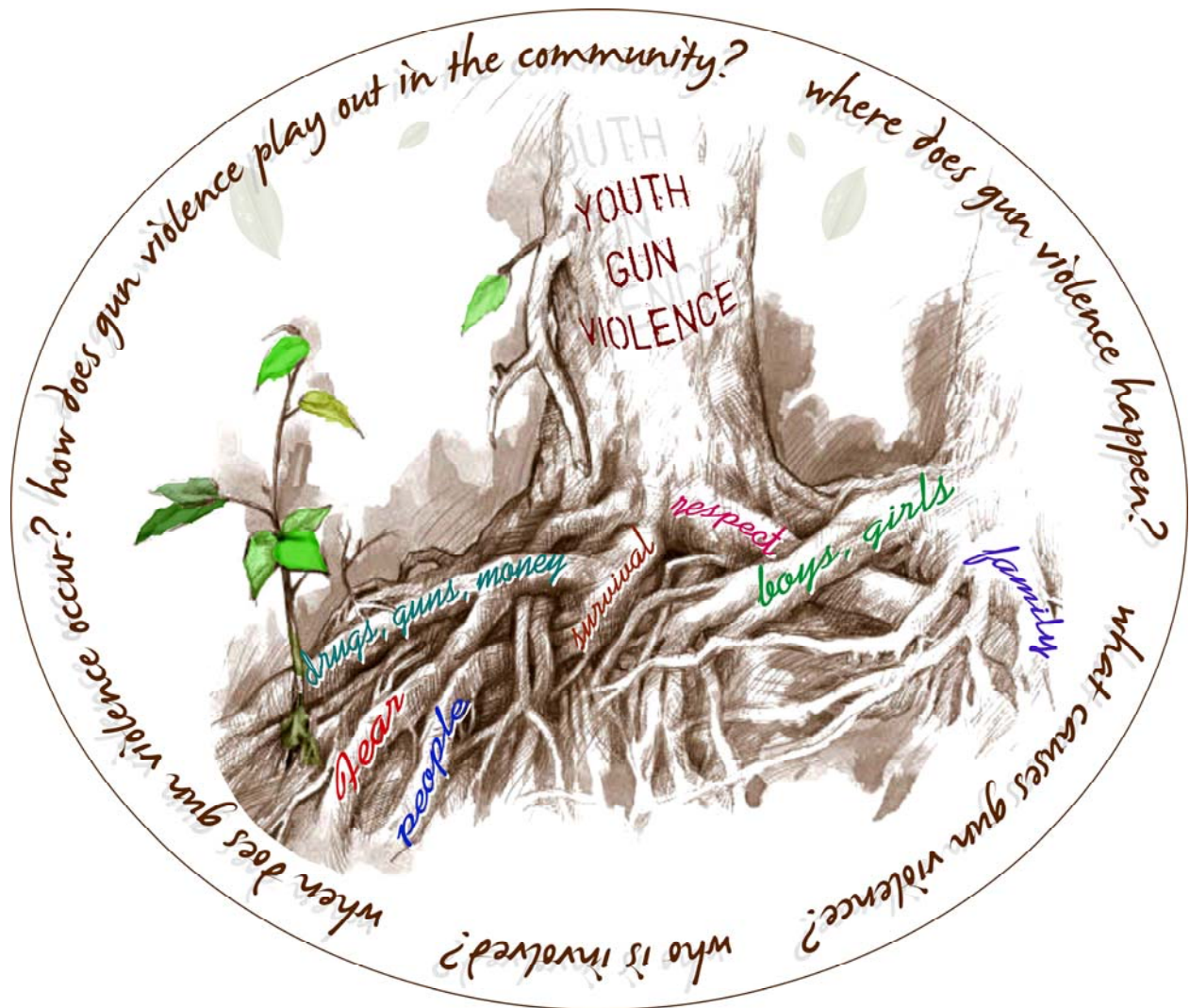


Understanding Youth Violence in New Haven: A Photovoice Project with Youth of New Haven

A Report from the Collaboration between the New Haven Family Alliance and
Robert Wood Johnson Clinical Scholars Yale University School of Medicine

In Pursuit of an End to Youth Gun Violence in New Haven



May 28, 2009

**A Report on Understanding Youth Violence in New Haven:
A Photovoice Project with New Haven Youth**

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Acknowledgments

We first begin by gratefully acknowledging the important role that our youth partners played in creating the data that made this report possible. Their views of life in New Haven through their photographs and words have provided new insight about youth gun violence in New Haven.

We are indebted to Tyrone Weston, Supervisor of the New Haven Family Alliance Street Outreach Worker Program, Street Outreach Worker Trent Butler for co-facilitating the boy's focus group discussions, and for the Street Outreach Workers themselves for their help in recruiting the youth who participated in this project and for their ongoing support throughout the project.

We thank the Institute for Community Research and Leslie Curry, PhD for the training they provided to the research and facilitation teams; and to Jessica Sack from the Yale University Art Gallery and Jonathan Bailey, a local photographer, for the training they provided to the youth participants.

We also appreciate the work of several individuals, who assisted in data collection and analysis including Erika Brown, Emily Bucholz, Abigail Paine, and Kelly Traister.

We want to thank Laura Lawrence and Kendall Getek who provided administrative support for this project.

We also thank advisers on the project—David Berg, PhD and Leslie Curry, PhD.

Finally, we give special thanks to the talented Lauren Getek for her drawing of the tree depicting the roots of violence and our hope for the future of New Haven youth.

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Understanding Youth Violence in New Haven: A Photovoice Project with Youth of New Haven

Executive Summary

Gun violence is among the most urgent public health concerns in the city of New Haven. In New Haven, gun violence reached its highest level in more than a decade in 2007, with 162 nonfatal shooting victims among its 127,000 residents.¹⁻³ Encouraged by the Mayor's commitment to eliminate youth gun violence through a comprehensive plan including gun policy, police action, mentoring and job opportunities,⁴ the New Haven Family Alliance (NHFA) approached the Robert Wood Johnson Clinical Scholars Program at the Yale University School of Medicine (RWJCSP) to collaborate on a project intended to inform the city's efforts to address youth gun violence. This community-based participatory research project, "*Understanding Youth Violence in New Haven: A Photovoice Project with Youth of New Haven*," is a research collaboration between the NHFA, RWJCSP, and a group of youth participating in the NHFA Street Outreach Worker Program.

Our report summarizes the key findings of this *Photovoice Project*. The goal of the project was to help identify, through the eyes and voices of young people directly impacted by youth gun violence, the root causes and effects of youth gun violence in their lives and in the city of New Haven.

Our data indicate that youth experiences of gun violence are closely tied to the absence of positive "opportunity structures"⁵ as well as the concept of "social determinants of health." Opportunity structures are factors external to the individual that limit or empower action. Social determinants of health are societal conditions that affect health and can potentially be altered by social and health policies and programs.⁶ They are largely shaped by the distribution of money and power and account for the health inequities—avoidable differences in health status—among people.⁷

The youth voice captured through this research offers new insight for public officials, organizations serving New Haven youth and New Haven citizens on the social and economic influences resulting in youth gun violence. Our recommendations suggest potential interventions to improve the opportunities available to youth at high-risk in New Haven while reducing the incidence of violence.

Research Approach

Our research team included members from the NHFA, the RWJCSP, and representatives of two community agencies knowledgeable about youth in New Haven. We used a community-based participatory research approach, a philosophy of scientific investigation in which the research team includes community members who stand to benefit from research as well as methodological experts based in academic centers.⁸ Our team worked together to conceptualize and implement a project that would have direct relevance to the New Haven community and would provide scientifically sound data to inform the development of actionable recommendations.

We employed an adaptation of Photovoice, an established research approach appropriate for participatory research designs and effective for studies involving vulnerable groups.^{9, 10} In Photovoice, participants are given cameras and asked to photograph scenes from their community that reflect the community's strengths and challenges. These images are used as stimulus for focus group discussions. This process has been shown to generate novel

insights into local policy and service needs as well as increased self-efficacy among participants.^{11, 12}

Participants included 19 youth aged 14-19 years who were selected through the NHFA Street Outreach Worker Program, 47% were male, 89.5% were African American and 10.5% were Latino. All participants engaged in an initial large group discussion to derive themes felt to reflect the "roots of violence" in their communities. Seven roots of gun violence in New Haven initially were identified by the large group: 1) people; 2) the system; 3) family; 4) "drugs, guns, & money"; 5) peer pressure; 6) survival; 7) pride and disrespect. Each of the seven roots was used as separate themes for weekly photograph taking and the weekly focus group discussions. An eighth theme, "fear", was added when participants and facilitators agreed that it was an important root that had not been initially identified but had figured prominently in discussions.

A total of 13 gender specific, ninety minute focus groups were held (7 female groups and 6 male groups). An RWJ Clinical Scholar and a staff member of the NHFA co-moderated the focus groups. Moderators were the same gender as their focus group participants.

Findings

Three major themes characterize the views of these youth regarding the underlying causes of gun violence and the effects of gun violence on their lives and their community.

Theme 1: Youth are presented with limited choices as they pursue normal adolescent development.

Youth participants described having limited choices available to them in their communities as they pursue developmental tasks common to all adolescents. Many of these choices necessarily involved risky or less healthy behaviors. Participants characterized their neighborhoods as profoundly unsafe. Youth described both ambivalence at getting involved and fear for their own personal safety.

Participants described a range of responses to the lack of safety in their environment. Some related feeling stressed at multiple levels, and others relied on coping strategies including substance use or expression of an exaggerated sense of invulnerability.

In this atmosphere in which youth feel continually at risk of victimization, respect, and status are seen as essential protective qualities. Participants spoke at length about the value of respect and status in their environments. The most visible sources of respect and status were associated with "*The Game*," a term used to refer to one set of opportunity structures that youth felt were available in their neighborhoods to achieve respect and status. The economic opportunities of *The Game* were most often associated with participation in the drug trade.

However, participants were also keenly aware of the risks associated with being involved in *The Game*. While participants referred to *The Game* as a temptation that should ideally be avoided, they also were clear in their identification of its allure and described individuals getting "caught up." They described tensions between engaging in *The Game* and pursuing alternate means of finding respect and status. These alternate means included excelling in academics or athletics.

Theme 2: The youth seek family structures, both at home as well as on the street that satisfies a need for safety and belonging.

Youth participants spoke at length and with great candor about the role of “family” in providing a basic safety net and locus of trust in an unsafe and unstable environment. Participants articulated a broad definition of family, acknowledging the need for familial structures both within traditional family relationships as well as alternative relationships in the home or on the street. Referring to the latter as “street family,” they identified peers that provide support and safety outside of the home. Whether “street family” or the traditionally defined “family,” these social structures form the basis of a support system in which the youth describe finding safety, stability, and support. Family relationships also foster a sense of accountability and acceptance for the young men and women navigating the path of adolescent development.

Participants expressed a desire to participate in trusting relationships. The reliability of family structures was contrasted against the mistrust felt in other relationships. The youth described a sense of support and reliability from family members, specifically relating to the experience of growing up in an environment where safety is a constant concern. They expressed direct appreciation for family members who work hard to give them a better life. In the setting of an unsafe or unstable environment, youth felt that challenges and outcomes are experienced in a way shared by all members of the family.

Theme 3: Females differ in their experiences of youth violence in New Haven, particularly after they become mothers.

Gender relations are a specific context in which female youth participants reported witnessing the danger of their environment in terms of their own personal safety as women.

While both male and female participants readily discussed the roots and outcomes of youth gun violence in the context of young men’s involvement in *The Game*, female participants described the effects of youth gun violence in terms of the stress they experienced, their role in parenting a child in a dangerous environment, and their aspirations for their children. Female participants described their role as parents: their sense that life had changed after they had a child, their role in protecting their own children. Parenting appears to give some females an opportunity to demonstrate mastery and to therefore succeed in a realm that is neither *The Game* nor academics. Female participants also expressed their personal aspirations.

Recommendations

The following recommendations represent ideas derived from what the NHFA and RWJCSP learned from the youth about youth gun violence. These recommendations are not novel, but confirm past ideas offered by other community stakeholders. They are intended to facilitate adolescents access to health promoting avenues for the pursuit of successful growth and development in New Haven. We believe that only an integrated and collaborative approach to the roots of youth gun violence will succeed in its elimination.

1. Bring together key agencies in the city to discuss and coordinate strategies to address concentrated intergenerational poverty in New Haven.

Interventions are needed to build the capacities of poor parents and families to increase their access to economic opportunities for themselves and their children. Poverty does not cause violence; it creates the conditions that foster violent crimes. Eliminating youth gun

violence will require a multifaceted strategy that not only addresses the most proximal causes of gun violence, such as the availability of firearms, but also the economic context in which violence occurs.

2. The City of New Haven in partnership with the public and private sectors should intensify efforts to identify barriers to youth career and employment opportunities and from this information, shape comprehensive programs that provide education and opportunities for youth leadership development and meaningful and sustained employment.

Strategies should include methods to help marginalized youth complete school, access vocational and secondary education, and/or obtain and maintain employment. The high school diploma program at adult education should be expanded allowing more youth to complete high school credit requirements outside the mainstream public school system. Resources should be made available to support efforts that provide apprenticeship opportunities for youth in the trades, civil service jobs and other areas that offer career paths for this population of youth.

3. In order to fashion the comprehensive strategy recommended above, we recommend that the Community Services Administration convene a youth violence prevention summit involving broad stakeholder groups as well as representation of New Haven youth themselves.

4. The City should create a comprehensive youth policy framework to provide overall direction for the many programs effecting youth including youth development goals.

Important contributors to such a summit should include the New Haven Board of Education, New Haven Police Department, Citywide Youth Coalition, Health Department, Youth Services Department, Yale University as well as public and private funders. At this summit, a comprehensive policy framework can be developed.

5. Specific neighborhoods where the roots of youth gun violence are concentrated need to become a focal point for new programs, specifically establishing neighborhood community centers to provide recreational, educational and other youth development activities that promote healthy behaviors, engage youth and help keep youth off the streets.

Neighborhood community centers could serve as a base for the development of healthy relationships and parallel family structures. Currently, youth who are unable to find supportive relationships in their homes frequently search out these relationships in a social context, "on the streets" or "on the corner," where opportunities for healthy development are relatively limited. Neighborhood centers would provide an alternative for healthy relationships. The city should ensure that recreational and arts facilities, parks and schools are available to those who are the most disadvantaged.

6. Provide mentorship opportunities through collaborations between the New Haven Family Alliance Street Outreach Worker Program and community service organizations, the New Haven Public Schools, and the faith based communities.

Youth need healthy examples in their life that they can emulate. In some situations, adult family members can fulfill that role but for other individuals traditional family structures are inadequate to provide health promoting mentorship. For this reason, it is important that the

city and community work together to help every child have access to at least one healthy mentoring relationship that provides support, guidance and nurturing.

7. Maintain at least one female Street Outreach Worker to work with female youth at high-risk for violence to develop gender-specific programs that both measure and address the specific needs of females.

Adolescent females in New Haven would greatly benefit from programs targeted specifically at their needs. These programs should be based on rites of passage models; they should build upon the strengths these young women embody; and as stated in the previous recommendation they should include formal mentoring programs. Educational messages to oppose gender-based violence should be considered for public areas frequented by both male and female youth including schools, parks, and libraries.

Understanding Youth Violence in New Haven: A Project with Youth of New Haven

Project Overview

Gun violence is among the most urgent public health concerns in the city of New Haven. In New Haven, gun violence reached its highest level in more than a decade in 2007, with 162 nonfatal shooting victims among its 127,000 residents.¹⁻³ Encouraged by the Mayor's commitment to eliminate youth gun violence through a comprehensive plan including gun policy, police action, mentoring and job opportunities,⁴ the New Haven Family Alliance (NHFA) approached the Robert Wood Johnson Clinical Scholars Program at the Yale University School of Medicine (RWJCSP) to collaborate on a project intended to inform the city's efforts to address youth gun violence. This community-based participatory research project, "*Understanding Youth Violence in New Haven: A Photovoice Project with Youth of New Haven*," is a research collaboration between the NHFA, RWJCSP, and a group of youth participating in the NHFA Street Outreach Worker Program (SOWP). The data derived from the project provide unique insights into how New Haven youth perceive and experience gun violence. Background information on the research partners for this project can be found in Appendix B.

Our report summarizes the key findings of this *Photovoice Project*. The goal of the project was to help identify, through the eyes and voices of young people directly impacted by youth gun violence, the root causes and effects of youth gun violence in their lives and in the city of New Haven. Members of our research partnership believe that characterizing the experiences and views of youth at high-risk for gun violence is imperative to developing a fully informed and in-depth understanding of this issue.

Our data indicate that youth experiences of gun violence are closely tied to the absence of positive "opportunity structures"⁵ as well as the concept of "social determinants of health." Opportunity structures are factors external to the individual that limit or empower action. Social determinants of health are societal conditions that affect health and can potentially be altered by social and health policies and programs.⁶ They are largely shaped by the distribution of money and power and account for the health inequities—avoidable differences in health status—among people.⁷

The youth voice captured through this research offers new insight for public officials, organizations serving New Haven youth and New Haven citizens on the social and economic influences resulting in youth gun violence. Our recommendations suggest potential interventions to improve the opportunities available to youth at high-risk in New Haven while reducing the incidence of gun violence.

The Prevalence and Impact of Youth Violence

New Haven, while a safe place for most of its citizens, continues to experience youth gun violence. Increasingly gun violence threatens to further isolate residents in already marginalized neighborhoods of the city.

Both nationally and in New Haven youth gun violence disproportionately affects minority racial and ethnic groups. While African Americans comprise 13% of the U.S. population, in the year 2007, nearly half (49.3%) of all victims of homicide were African American. Among youth between the ages of 10 and 24, homicide is the leading cause of death for African Americans and the second leading cause for Hispanics/Latinos. These deaths are typically

the result of firearm use.¹³ The consequences of youth gun violence are complex and multifaceted; annual treatments for gunshot victims are estimated at \$100-\$126 billion per annum.¹⁴ The toll on communities and families is also significant: youth gun violence affects communities by increasing the cost of health care, reducing productivity, decreasing property values, and disrupting social services.¹⁵

Between 2005 and 2008, over 500 people were the victims of shootings in New Haven, 25 of whom were between the ages of 10 and 24. Of the 162 shooting victims in 2007, 92% were people of color.¹ While the percentage of homicide victims 18 and under dropped from 25% in 2006¹⁶ to 4.5% in 2008,¹⁷ the pervasiveness of youth gun violence has continued to be of concern for city government officials, public safety officials and residents. While hard data are unavailable, homicide and non-fatal shootings by suspects under the age of 24 remain high. Vigorous public debates have been ongoing about appropriate measures that can be taken to address this violence.

Reframing our Understanding of Youth Violence

Throughout most of the 20th Century, youth violence was viewed solely as a public safety issue and as a result was addressed predominantly by law enforcement organizations and, within the social sciences, by criminologists. However, in recent decades an understanding of youth violence as having broader origins within the community has evolved. The problem of youth violence in New Haven and throughout the United States can be viewed through the lens of both the ethnographic work of Elijah Anderson and the theory of social determinants of health. These two constructs offer means with which to both better understand youth violence and seek points of intervention to reduce it.

In his seminal work, *The Code of the Street*, Elijah Anderson positions youth violence in an environmental context. He argues that "the lack of jobs that pay a living wage, the stigma of race, the fallout from rampant drug use and drug trafficking, and the resulting alienation and lack of hope for the future" are the circumstances of life, encountered by many impoverished African-American adolescents, from which violence springs.¹⁸ In their neighborhoods, these youth learn to exist in communities which expose them to violence. Anderson describes how forces in the environment including family can counteract the negative influences of the environment; nonetheless, writes Anderson, "even youngsters whose home lives reflect mainstream values—and the majority of homes in the community do—must be able to handle themselves" in an environment where safety or respect are often secured through violence.¹⁹ Anderson provides an understanding of how violent behavior is the result of an environmental context that can place youth not only at high risk of falling victim to aggressive behavior but also of becoming the aggressor.

Youth gun violence is the result of a complex interplay of individual factors and the social determinants of health: societal, neighborhood, and family factors largely shaped by the distribution of money and power. The U.S. Surgeon General and the Centers for Disease Control (CDC)^{15, 20, 21} recommend framing violence reduction as a preventative, public health issue and focusing on identification of modifiable risk factors, targeted program development, and evaluation of program effectiveness. In this framing, the societal, neighborhood, and family factors play a greater role in determining individual action than the individual factors, alone. The socio-ecological model (Figure 1)^{22, 23} represents the dynamic interaction between the complex and multi-layered factors that can lead to youth violence. These same factors can be harnessed to create programs to prevent youth gun violence. For example, using the socio-ecological model to apply a public health approach to youth gun violence, the societal and community influences on the individual and family systems can be modified. Many youth fulfill their age-appropriate need for identity

formation and belonging by interacting with a biological family as well as peer groups.²⁴ When the peer group participates in the oppositional culture of "the streets," it presents a formidable influence on a youth's development.^{18, 19} Biological family structures can similarly represent either a "decent" or "street" orientation, as Anderson theorized. The socio-ecological model as we present it in Figure 1 defines these family and peer relationships broadly so that the possible benefit of mentorship found at school, church, or an organized community center is also recognized.¹⁸

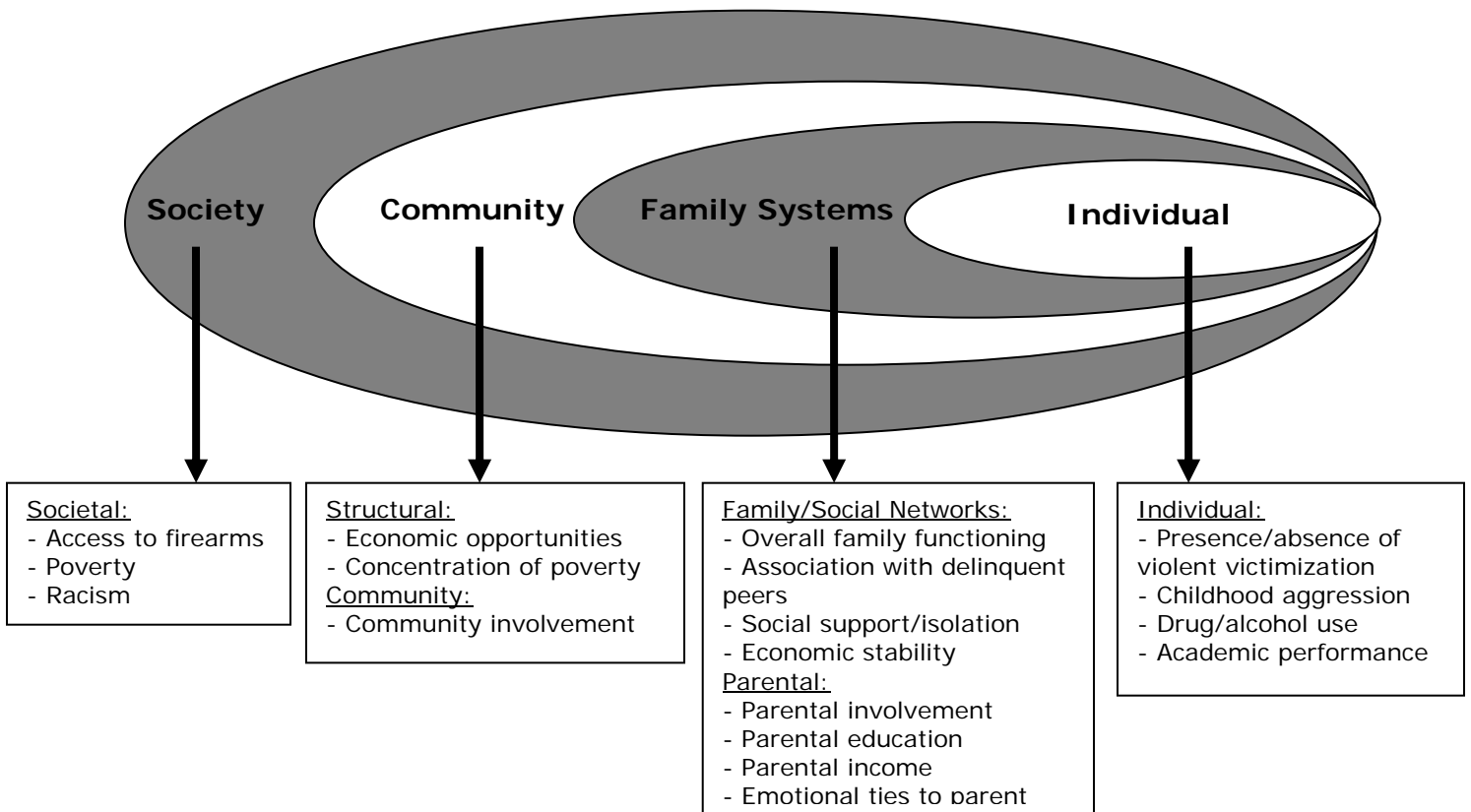


Figure 1: Socio-ecological Model used to present the complex interplay of influences on youth violence and prevention²³

It is with this theoretical understanding and the desire of the New Haven Family Alliance to better understand the driving forces causing youth gun violence in New Haven that we began our investigation into the perspective of New Haven youth. The aims of this research project were:

1. To characterize the perception of youth at high risk of participating in or being victims of gun violence regarding
 - The underlying causes of gun violence, and
 - The effects of gun violence on their lives and community.
2. To consider how these underlying causes and their effects may help identify modifiable risk factors and opportunities for program development.

Research Methods

Research team: Our research team included members from the NHFA, the RWJCSP, and representatives of two community agencies knowledgeable about youth in New Haven.

Research approach: We used a community-based participatory research approach, a philosophy of scientific investigation in which the research team includes community members who stand to benefit from research as well as methodological experts based in academic centers.⁸ Our team worked together to conceptualize and implement a project that would have direct relevance to the New Haven community and would provide scientifically sound data to inform the development of actionable recommendations.

We chose a qualitative method for two reasons. First, qualitative methods are a form of scientific inquiry widely used to generate new insights on complex social phenomena and to develop a comprehensive understanding of a problem.²⁵ We were interested in the perspectives of youth participants regarding the social interactions and cultural context for youth decision-making around violence.²⁶⁻²⁸ Second, qualitative methods are effective in gathering information from segments of the population that have been historically marginalized and underrepresented in traditional quantitative research, such as youth at risk for violence.

We employed an adaptation of Photovoice, an established research approach appropriate for participatory research designs and effective for studies involving vulnerable groups.^{9, 10} In Photovoice, participants are given cameras and asked to photograph scenes from their community that reflect the community's strengths and challenges. These images are used as stimuli for focus group discussions. This process has been shown to generate novel insights into local policy and service needs as well as increased self-efficacy among participants.^{11, 12}

Participants: Participants included 19 youth aged 14-19 years who were selected through the NHFA Street Outreach Worker Program. Youth participants of the Street Outreach Worker Program have been identified by law enforcement to have been involved with or at-risk of being involved with the criminal justice system. They also are referred to the program through other sources, including community agencies, schools, and parents. Approximately 200 youth are currently involved with the program. Street Outreach Workers invited youth that they felt could contribute insights toward our understanding of youth gun violence in New Haven to participate in an introductory session with the research team. A total of 26 youth participated in the introductory session; ultimately, 19 participated in the majority of the focus groups.

Nearly half of the participants (47%) were male, 89.5% were African American and 10.5% Latino. The median age was 16.4 years with an interquartile range of 3 years.

Participants came from five different neighborhoods: Dixwell (21%); Newhallville (21%); Fair Haven (21%); Hill North and Hill South (32%); and West Hills (5%). Ninety percent came from female-headed households. One participant came from a two parent family and 1 participant was homeless at the beginning of the project and subsequently found shelter.

Data collection: All participants engaged in an initial large group discussion to derive themes felt to reflect the "roots of violence" in their communities. This discussion was guided by an adaptation of a technique called Problem Tree Analysis.²⁹ Youth gun violence was conceptualized as a tree with roots and branches that result are a consequence of these

roots. Using a series of questions related to gun violence and an exploration of the perceived causes of gun violence, seven roots of gun violence in New Haven were identified by the large group: 1) people; 2) the system; 3) family; 4) “drugs, guns, & money”; 5) peer pressure; 6) survival; 7) pride and disrespect. Notes from this meeting can be found in Appendix D.

The larger group was then divided into two smaller groups, one composed of females and the other composed of males. Each of the seven roots was used as a separate weekly theme for photograph taking and one focus group discussion. An eighth theme, “fear”, was added when participants and facilitators agreed that it was an important root that had not been initially identified but had figured prominently in discussions.

A total of 13 gender specific, ninety minute focus groups were held (7 female groups and 6 male groups). An RWJ Clinical Scholar and a staff member of the NHFA co-moderated the focus groups. Moderators were the same gender as their focus group participants. Prior to data collection, the Institute for Community Research (Hartford, Connecticut) trained moderators on working with youth in data collection efforts and an expert in focus group facilitation from Yale University School of Public Health trained moderators in facilitating focus groups discussions.

Prior to the start of the focus groups, the educational staff of the Yale University Art Gallery offered a workshop for all youth participants on elements of visual literacy, and a local photographer provided instruction on basic photography. Each participant was provided with digital camera and instructed to take photographs that had meaning to them, particularly with reference to the root causes previously identified. Participants took photographs in their neighborhoods each week on one of the root causes. These photographs and the associated themes were then discussed in gender specific focus groups. In addition, using scripted probes generated by the research team, participants were encouraged to reflect on each other’s experiences and to consider the larger social context for the images that were represented. There were over twenty hours of discussion, generating hundreds of pages of transcribed text. Discussions were audio-recorded and professionally transcribed.

Data analysis: We used standard qualitative analysis procedures and, in consultation with an expert in qualitative analysis at the Yale School of Medicine,^{30, 31} a multidisciplinary team including School of Medicine faculty, community residents, and local social service providers conducted transcript review and analysis.^{32, 33} Team members from NHFA and the RWJCSP represented diverse demographic backgrounds and areas of expertise, including social work, human services, pediatrics, child psychiatry, and internal medicine. Importantly, the team also included two community members who had been raised in the city of New Haven, were familiar with the participants’ communities, and were active providers of youth services. These individuals were trained in qualitative analysis and fully engaged in the analytic process. Using constant comparative analysis³⁴, we reviewed transcripts sequentially to categorize quotes into themes with codes developed iteratively to fully capture all data. Once the final code structure was established, remaining transcripts were divided and analyzed separately by two three-person teams. We met regularly as a full group to resolve differences in codes through negotiated consensus.³⁵ We developed three key themes from recurrent and unifying ideas³⁶ that characterize the views and experiences of youth at risk for gun violence in New Haven.

Qualitative analysis software (ATLAS.ti 5.0) was used to electronically organize coded text and facilitate data retrieval. We used the following techniques to ensure scientific rigor: use of trained moderators for data collection, audio taping and independent preparation of the transcripts, standardized coding and data analysis, use of researchers with diverse

backgrounds, and the creation of an audit trail to document analytic decisions.^{25, 28, 37} In addition, we presented the findings to the youth participants for confirmation that the themes reflected their experience of the roots of youth gun violence. This technique, known as 'participant confirmation' is recommended to enhance the rigor and credibility of qualitative research. Prior to the start of the project, the research protocol was approved by the Human Investigation Committee of the Yale College of Arts and Sciences, New Haven, Connecticut and informed written consent was obtained from adult participants and from parents of participants under the age of 18.

Findings

Three major themes characterize the views of these youth regarding the underlying causes of gun violence and the effects of gun violence on their lives and their community. First, youth are presented with limited choices as they pursue normal adolescent development such as identity formation. Second, the youth seek family structures that satisfy their needs for safety, guidance and belonging. Third, females differ from males in their experience of youth gun violence. We identified these three themes to be of fundamental relevance to the problem of youth gun violence and therefore focus on these data in this report.

Theme 1: Youth are presented with limited choices as they pursue normal adolescent development.

New Haven youth experience the same kind of peer pressure in their adolescent development as all youth. Youth participants described having limited choices available to them in their communities as they pursue developmental tasks common to all adolescents.

"To me, like it always was about the girls, you know, you get your name known for the girls, you know, so I don't see why a lot of people sell drugs to buy 'em or went out and shot guns to get popularity when you could just play basketball. Do something that they like." (19 y/o male)

"If you go to (a) fashion school like Hill House... if you not fresh, I bet you by the next year you gonna try to (be)... because I talking about a lot of people who are not fresh and stuff, they (are) gonna try to get money. That's why everybody try(s) to get money, (be)cause they got to." (17 y/o male)

Although experiences such as peer pressure are common among adolescents, participants also described living in environments that are not at all typical. Many of these choices necessarily involved risky or less healthy behaviors. They characterized their neighborhoods as profoundly unsafe. This lack of safety presents substantial challenges as youth attempt to pursue acceptance, respect, and success.

"I wish I had bars on my windows." (15 y/o female)

"People get shot for anything..." (19 y/o female)

"It's just crazy. Why do you have to go and kill somebody over something dumb over stealing a bike or the drugs? Why do guns even have to be invented?" (19 y/o female)

Youth described both ambivalence at getting involved and fear for their own personal safety.

"I seen it happening and I ain't intruding one bit. I'm let him keep beatin' on her. I ain't getting in. It wasn't my business; you know what I'm saying. I mean he was wrong, the dude was wrong. I mean I said something to him but I ain't actually stop him or pulling him off. I don't know where that dude at. You could have a burner [a firearm] and pop me [shoot me], you know what I'm saying? I had notin' to do with that." (18 y/o male)

"Every other night they go out and get drunk or whatever they go do, at 2 or 3:00 in the morning I'm getting waken up because all I hear is banging. Cause our walls are kinda thin... I hear the whole conversation, I hear him beating on her. And I always wonder should I call the cops?... I'm scared sometimes. I was gonna call the cops but then I don't want her to come at me the wrong way." (15 y/o female)

Participants described a range of responses to the lack of safety in their environment. Some related feeling stressed at multiple levels, and others relied on coping strategies including substance use or expression of an exaggerated sense of invulnerability.

"Everything these days is stressful. [You] think that only grownups [have stress]... I'm 14 and I feel like I'm grown! Young people are more stressed than older people." (14 y/o female)

"Sometimes, then, you keep [stress] to yourself. But it can also break you unless you really let it out." (14 y/o female)

"I been shot, but I ain't afraid to get shot again. You know what I'm saying? I don't fear that." (18 y/o male)

"Well, that's how I feel about it, 'cause me, not even, I don't even need a shrink. All I need is a bag of weed and I'm good. A shrink is like a bag of weed." (15 y/o female)

"It [weed] don't take it away forever. Like it'll come back. Soon as you go to sleep and wake up." (15 y/o female)

"I'm not afraid of guns, I'm not afraid to die." (19 y/o female)

In this atmosphere in which youth feel continually at risk of victimization, respect and status are seen as essential protective qualities. Participants spoke at length about the value of respect and status in their environments. The most visible sources of respect and status were associated with "*The Game*," a term used to refer to one set of opportunity structures that youth felt were available in their neighborhoods to achieve respect and status. The economic opportunities of *The Game* were most often associated with participation in the drug trade.

"It's like, OK, if I'm out in society, you know, working and stuff, OK, I'd rather have respect than fear... When you outside on the streets, you'd rather be feared than respected. You'd rather be feared than respected in the streets, but in society, of course, you would want respect." (18 y/o male)

"He got his red flag in his pocket, everything. He's a true Blood. He'll sit on Congress Ave all day just waiting for somebody to walk by with a blue flag and fight like that cause they do that. So, like, with him, he got all his respect 'cause you can sit in somebody else hood. You could sit in the Crip hood. Like without nothing going on..."

he got mad respect." (16 y/o female)

"Power, money and respect. It's part of *The Game*." (15 y/o male)

"Kids turn to the streets for two reasons: one, it's easy to get the money. You don't need a job application, you just need a little cash and you can start hustling. Two, they're scared to fail. They don't see role models who are succeeding off the street, and they are scared that if they move past their comfort zone, they won't get anywhere." (18 y/o male)

"That's why if you get money first, you get respect, you get the power and buy anything you want cause whatever, then you get respect." (17 y/o male)

However, participants were also keenly aware of the risks associated with being involved in *The Game*. While participants referred to *The Game* as a temptation that should ideally be avoided, they also were clear in their identification of its allure and described individuals getting "caught up." They described tensions between engaging in *The Game* and pursuing alternate means of finding respect and status. These alternate means included excelling in academics or athletics. They also expressed goals for their own future as they relate to *The Game*.

"The streets change a whole kid's mind. The streets like a lot of kids now they don't believe they, some of 'em deal with home but a good majority deal with the streets. Coming up in the street life and it's not easy. You get caught up." (18 y/o male)

"Cause it's like, it's like I used to be a knucklehead... you know what I'm saying? After, you know, I got shot... it makes you think differently, you know what I'm saying? Like this ain't really worth it! But to people that don't see that it's not worth it now, it's embarrassing that they don't see. And, you know, they be out there every single day and still don't wake up to see this is embarrassing. I'm out here and I ain't gonna make it nowhere because believe it or not a lot of people... really think the streets is life... and (it's) inferior (to) like moving on. You know what I'm saying? Like they make things hard on (themselves). And when you (are) caught up being around (them), it's just like you don't move, period." (18 y/o male)

"That doubt your mind because like if the kid plays basketball and if he's good at basketball and he maintains himself from being in the streets from like from playing basketball and don't make it, when he don't make it and that's the only thing he knows, he only got one more option, and that's back to them streets. To get money in his pocket and anything." (18 y/o male)

"(You) gotta have a high school diploma. Some jobs you gotta have a license. You can't have no felonies. It's hard so instead of going through all that, people would rather sell stand on the block and sell drugs... you make quick money at it." (19 y/o female)

Theme 2: The youth seek family structures, both at home as well as on the street that satisfies a need for safety and belonging.

Youth participants spoke at length and with great candor about the role of "family" in providing a basic safety net and locus of trust in an unsafe and unstable environment. Participants articulated a broad definition of family, acknowledging the need for familial structures both within traditional family relationships as well as in alternative relationships

in the home or on the street. Referring to the latter as “street family,” they identified peers that provide support and safety outside of the home. In his discussion of the “code of the street,” Elijah Anderson used the term “street” in opposition to “decent” to describe the code that was followed by families and other individuals. In contrast the youth used the idea of street more concretely and instead abstracted the concept of “family” to describe any relationships that provided them with comfort. Whether “street family” or the traditionally defined “family,” these social structures form the basis of a support system in which the youth describe finding safety, stability, and support. Family relationships also foster a sense of accountability and acceptance for the young men and women navigating the path of adolescent development.

Participants expressed a desire to participate in trusting relationships. The reliability of family structures was contrasted against the mistrust felt in other relationships.

“Your family care about you. The people on the streets don’t care about you.” (16 y/o male)

“...you could start trusting someone and then they just pull it out from underneath you. They just straight up turn around and do some shady stuff that’ what make it harder... for me to trust people now because everything, everyone I used to trust just turned around and did some grimy stuff...” (19 y/o female)

The youth described a sense of support and reliability from family members, specifically relating to the experience of growing up in an environment where safety is a constant concern. They expressed direct appreciation for family members who work hard to give them a better life.

“Family (are) people that are important to you... they are there for you... they look out for you. Most times, like with my family, it really takes violence to bring us together.” (18 y/o female)

“Something has changed in my life and I feel that my mother is a survivor because she’s been clean for five months now. We have an apartment now and we are doing good. I feel to me she is a survivor because she stopped doing things so I don’t grow up that way.” (17 y/o female)

In the setting of an unsafe or unstable environment, youth felt that challenges and outcomes are experienced in a way shared by all members of the family.

“...family goes through things and then they figure out a way to get over it and make (their) situations better...” (17 y/o female)

“Because of the little things that they had. They probably don’t have a lot but they still make an effort to survive with the little stuff that they have.” (19 y/o female)

Participants alluded to shared characteristics between the “street family” and one’s traditional family, specifically in their identification of role models within these structures. Older mentors were highly valued in both structures, whether as grandmothers in the traditional family or as “OG’s” in a participant’s street family.

“An ‘OG’ is somebody that back in his day he was thug, he grew up, experienced life, a lot of things he went through, but he created change and is still around. He can tell you about his change. He’s respected because he’s seen it and he did it, but he lived

through it, you know, so he can preach back. So he see life different, he respect life now. Like he did all that and moved on." (18 y/o male)

"A grandmother could be like the OG of your family." (18 y/o male)

"Growing up correctly is going to school, hanging out with friends, etc... not hanging in the street and smoking up. It's common sense, but your parents need to tell you that. At the end of the day, I always got a lecture from my grandmother... but a lot of kids didn't get that benefit. That's how I knew the difference between growing up right and not." (18 y/o male)

Theme 3: Females differ in their experiences of youth violence in New Haven, particularly after they become mothers

Gender relations are a specific context in which female youth participants reported witnessing the danger of their environment in terms of their own personal safety as women.

"The first time we heard it I did. Like we shoulda did something. But then he, she kicked him out and then, then he'll come right back in. So after a while I'm just like hey why'd you let him back in after he's beating on you." (17 y/o female)

"[So] there was this lady and this man and they was arguing and he kept touching her and she didn't want him to touch her, so she was like get away from me, get away from me. So [he] stopped the car [squealing noise] and he hopped out and he was like, he was like 'Yo didn't she say get away from her?' ...And then, [the man] tried to grab her, he tried to hug, I think he was drunk. And so [he] hit him and he fell and he got back up like he was about to hit [him] back... [Then] the lady got up, she was just like... I'm calling the police. You shouldn't a hit him even though he was trying to touch me and stuff." (18 y/o male)

While both male and female participants readily discussed the roots and outcomes of youth gun violence in the context of young men's involvement in *The Game*, female participants described the effects of youth gun violence in terms of the stress they experienced, their role in parenting a child in a dangerous environment, and their aspirations for their children. Parenting appears to give some females an opportunity to demonstrate mastery, and to therefore succeed in a realm that is neither *The Game* nor academics. Female participants also expressed their personal aspirations.

"Like, I gotta have my mind state... my mind could be in the gutter but you can't be, you can't have diseases like as you grow up, like STDs... STDs, AIDS, anything." (15 y/o female)

"That's crazy. Especially when I'm over there like because I done seen bullets go - where was I- I was at my sister's house and bullets went through her door and her steps. Now I wanna know what he was shootin' with 'cause that's crazy for them bullets to go through the house and through the steps." (16 y/o female)

Female participants described their role as parents: their sense that life had changed after they had a child, their role in protecting their own children, and their aspirations for their children.

"Everything I do I gotta look back cause I got a son. There's no more worry about me. I got to make sure I'm happy, so he can be happy, but he always comes first."

(18 y/o female)

"I'm on my porch where I took that. We don't let'm go off the porch , like when folks start we have him come close... cause we're right there. We'll be sitting on the porch." (18 y/o female)

"There's no way I'm going to have my son [on] the block all day. They're going to go to school. They're not going to drop out, no nothing. Is that asking too much?" (18 y/o female)

In describing her thoughts on interacting with a child, one female used a sophisticated level of understanding of child development and in so doing, demonstrated mastery in parenting, not often attributed to teens.

Participant (14 y/o female): "I think 'cause if the child trying to talk to you, you ought to try to listen to them more or else they hold it in."

Moderator: "What happens if they hold it in?"

Participant: "They get a lot of anger."

Moderator: "Then what?"

Participant: "Bad stuff happens, sometimes."

Moderator: "Like what?"

Participant: "They start acting out."

Females described periods in their lives when they changed their aspirations.

"I kind of went through something like that. I feel a change in my life too. Like when I was (in)... my freshman year of high school get into fights, always getting arrested and be put on probation, I was a base head, getting suspended, skipping classes, just doing stuff I didn't need to do but then I just kept seeing it, just kept watching. I got tired of it. That made me want to change my life around..." (17 y/o female)

Conclusion:

The goal of the Youth Photovoice Project was to help identify, through the eyes and voices of young people impacted by gun violence, the root causes and effects of gun violence in the city of New Haven. We believed that the insight gained from this project would inform the thinking, policies and programming of public officials; organizations serving young people; and the citizens of New Haven.

Our research revealed that the roots of youth gun violence are steeped in a lack of opportunity structures both at homes and within the community. The input from youth helped to disclose a desire for family structures in and out of the traditional home that would provide a crucial sense of belonging and identity during this period of rapid growth and development. Youth participants in the Photovoice project described age-appropriate goals of pursuing success both in relationships with peers and as members of their communities. However, opportunities for healthy developmental pursuits, to achieve either financial or social successes were extremely limited and were not equally healthy. Many opportunities increased an individual's risk of engaging in gun violence. Youth expressed the view that most of their peers would prefer to pursue healthy means of achieving success through work, athletics, relationships, and school. However, health-promoting and pro-social opportunities were difficult to identify and alternate paths, such as participation in *The Game*, were readily available. The widespread availability of guns was also cited as a foundational problem in neighborhoods and communities experiencing gun violence.

In the end, our larger success in ending youth gun violence will come from a renewed commitment and collaboration between all members of the community, most importantly the youth. By putting in place opportunity structures focused on the healthy growth and development of youth at high risk, we are ensuring a healthier, safer community and a more positively engaged youth population.

Recommendations

The following recommendations represent ideas derived from what the NHFA and RWJCSP learned from the youth about youth gun violence. These recommendations are not novel, but confirm past ideas offered by other community stakeholders. They are intended to facilitate adolescents' access to health promoting avenues for the pursuit of successful growth and development in New Haven. We believe that only an integrated and collaborative approach to the roots of youth gun violence will succeed in its elimination.

1. Bring together key agencies in the city to discuss and coordinate strategies to address concentrated intergenerational poverty in New Haven.

Interventions are needed to build the capacities of poor parents and families and to increase their access to economic opportunities for themselves and their children. While poverty does not cause violence, it creates the conditions that foster violent crimes. Poverty creates communities of destiny, where opportunities are limited, rather than communities of choice. It is not coincidental that youth gun violence is concentrated in New Haven's poor, primarily African American and Hispanic communities. Poverty, experienced as social isolation, hunger, inadequate housing, and racism, is closely tied to the problem of youth violence.³⁸ For this reason, it is essential that those that wish to eliminate youth gun violence work to understand the problems of New Haven's poorest residents and develop strategies for reducing this poverty. Eliminating youth gun violence will require a multifaceted strategy that not only addresses the most proximal causes of gun violence, such as the availability of firearms, but also the economic context in which gun violence occurs.

2. The City of New Haven in partnership with the public and private sectors should intensify efforts to identify barriers to youth career and employment opportunities and from this information, shape comprehensive programs that provide education and opportunities for youth leadership development and meaningful and sustained employment.

Strategies should include methods to help marginalized youth complete school, access vocational and secondary education, and/or obtain and maintain employment. The high school diploma program at adult education should be expanded allowing more older youth to complete high school credit requirements outside the mainstream public school system. Resources should be made available to support efforts that provide apprenticeship opportunities for youth in the trades, civil service jobs and other areas that offer career paths for this population of youth.

3. In order to fashion the comprehensive strategy recommended above, we recommend that the Community Services Administration convene a youth violence prevention summit involving broad stakeholder groups as well as representation of New Haven youth themselves.

4. The City should create a comprehensive youth policy framework to provide overall direction for the many programs effecting youth including youth development goals.

Important contributors to such a summit should include the New Haven Board of Education, New Haven Police Department, Citywide Youth Coalition, Health Department, Youth Services Department, Yale University as well as public and private funders. At this summit, a comprehensive policy framework can be developed.

5. Specific neighborhoods where the roots of youth gun violence are concentrated should be a focal point for new program, specifically establishing neighborhood community centers to provide recreational, educational and other youth development activities that promote healthy behaviors, engage youth and help keep youth off the streets.

Neighborhood community centers could serve as a base for the development of healthy relationships and parallel family structures. Currently, youth who are unable to find supportive relationships in their homes frequently search out these relationships in a social context, "on the streets" or "on the corner," where opportunities for healthy development are relatively limited. Neighborhood centers would provide an alternative for healthy relationships.

Police substations exist in most neighborhoods struggling with youth violence. These spaces or other existing neighborhood spaces could be reconceived as local "safe havens". The New Haven Green has historically been a place where all citizens feel a sense of belonging and was one of the few places youth described feeling safe as a result of the combination of public safety presence, constant social activity, and lack of any specific territorial affiliation. While police substations are strategically situated in highly effected neighborhoods, they are currently viewed as foreign territory and as a result are underutilized as community structures to facilitate positive youth development during adolescence. The city should ensure that recreational and arts facilities, parks and schools are available to those who are the most disadvantaged.

6. Provide mentorship opportunities through collaborations between the New Haven Family Alliance Street Outreach Worker Program and community service organizations, the New Haven Public Schools, and the faith based communities.

The youth describe experiencing tensions between the opposing worlds of the "street" and society. Both offer paths to success, albeit of diverse social value. Growing up between both worlds, the youth recognize the usefulness of being on the "street", and observe that it offers a path to power and success for many of their peers through violence or participation in the drug economy. In this environment, however, youth are less likely to be exposed to role models that promote healthy choices.

Youth need healthy examples in their life that they can emulate. In some situations, adult family members can fulfill that role but for other individuals traditional family structures are inadequate to provide health promoting mentorship. For this reason, it is important that the city and community work together to help every child have access to at least one healthy mentoring relationship that provides support, guidance and nurturing. Such mentors serve as relational opportunity structures and provide an alternative to the less desirable relationships that youth otherwise look to for guidance. The Street Outreach Worker Program is one example of a program that already provides this sort of mentorship. Other opportunities to increase mentorship could be incorporated into existing NHPS curriculums at the middle and high school levels. Programs through faith-based organizations, vocational education programs and entrepreneurial incubators for youth small business development could all serve as additional settings for mentorship.

7. Maintain at least one female Street Outreach Worker to work with female youth at high-risk for violence to develop gender-specific programs that both measure and address the specific needs of females.

Adolescent females in New Haven would greatly benefit from programs targeted specifically at their needs. These programs should be based on rites of passage models; they should build upon the strengths these young women embody; and as stated in the previous recommendation they should include formal mentoring programs. Educational messages to oppose gender-based gun violence should be considered for public areas frequented by both male and female youth including schools, parks, and libraries.

The creation of opportunity structures that can benefit women must consider the distinct family responsibilities that young women often experience. For example, mentorship for these young women must not only provide vocational training and life skills training that is needed by all adolescents but must also consider the need among some adolescent women to develop parenting skills. All programs should be developed with child care needs in mind.

Our initial goal was to include the perspective and voice of young people in efforts to eliminate youth gun violence in New Haven. Implementing the recommendations contained in this report would further our collective aim of youth gun violence elimination.

Appendix A

References:

1. Fact Sheet. New Haven City, Connecticut. US Census Bureau, 2006. (Accessed 8/6/2008, at <http://factfinder.census.gov/>.)
2. Ayyar B. In New Haven, burglary spike linked to economic downturn. Yale Daily News 2008 April 9, 2008.
3. Kaempffer W. Shootings spiked in '07, Gun violence in city at highest level in decade, statistics show New Haven Register 2008 January 5, 2008.
4. Bass P. DeStefano: We Need to Aim Higher for Kids. New Haven Independent 2006 1/1/2006.
5. Cloward RA, Ohlin LE. Delinquency and opportunity: Free Press [Chicago], Glencoe, Ill; 1960.
6. Krieger N. A glossary for social epidemiology. In: Journal of Epidemiology and Community Health; 2001:693-700.
7. Commission on Social Determinants of Health WHO. Closing the Gap in a Generation. In; 2008.
8. Israel BA, Schulz AJ, Parker EA, Becker AB. Review of community-based research: assessing partnership approaches to improve public health. Annu Rev Public Health 1998; 19:173-202.
9. Wang C, Burris MA. Photovoice: concept, methodology, and use for participatory needs assessment. Health Educ Behav 1997; 24(3):369-87.
10. Wang C, Burris MA, Ping XY. Chinese village women as visual anthropologists: a participatory approach to reaching policymakers. Soc Sci Med 1996; 42(10):1391-400.
11. Foster-Fishman P, Nowell B, Deacon Z, Nievar MA, McCann P. Using methods that matter: the impact of reflection, dialogue, and voice. American Journal of Community Psychology 2005; 36(3-4):275-91.
12. Carlson ED, Engebretson J, Chamberlain RM. Photovoice as a social process of critical consciousness. Qual Health Res 2006; 16(6):836-52.
13. Youth Violence Fact Sheet. Centers for Disease Control, 2008. (Accessed May 3, 2008, at <http://www.cdc.gov/ncipc/factsheets/yvfacts.htm>.)
14. Gunderson L. The financial costs of gun violence. Annals of internal medicine 1999; 131(6):483.
15. Krug EG, Mercy JA, Dahlberg LL, Zwi AB. The world report on violence and health. The Lancet 2002; 360(9339):1083-8.
16. Public Safety Report: New Haven Police Department; 2007 December 31, 2007.
17. New Haven Register January 2, 2009.
18. Anderson E. The Code of the Street: Decency, Violence, and the Moral Life of the Inner City. New York: W.W. Norton & Company, Inc.; 1999.
19. Anderson E. THE CODE OF THE STREETS. (Cover story). Atlantic Monthly (10727825) 1994; 273(5):80-94.
20. General USS. Youth violence: A report of the Surgeon General. Washington DC: US Department of Health and Human Services 2001.
21. Thornton TN, Craft CA, Dahlberg LL, Lynch BS, Baer K. Best Practices of Youth Violence Prevention: A Sourcebook for Community Action. 2000.
22. Bronfenbrenner U. Ecological models of human development. International encyclopedia of education 1994; 3(2):37-43.
23. Williams K, Rivera L, Neighbours R, Reznik V. Youth Violence Prevention Comes of Age: Research, Training and Future Directions. 2007.
24. Erikson EH. Identity and the life cycle: Norton; 1980.
25. Curry LA, Nembhard IM, Bradley EH. Qualitative and Mixed Methods Provide Unique Contributions to Outcomes Research. Circulation 2009; 119(10):1442.

26. Corbin J, Strauss AL. Basics of qualitative research: techniques and procedures for developing grounded theory: SAGE Publications Ltd; 2007.
27. Sofaer S. Qualitative methods: what are they and why use them? Health Services Research 1999; 34(5 Pt 2):1101.
28. Patton MQ. Qualitative research and evaluation methods. 3rd ed. Thousand Oaks, CA: Sage; 2002.
29. Chevalier JM. The social analysis system. Url: www.sas-pm.com 2004.
30. Bradley EH, Curry LA, Devers KJ. Qualitative Data Analysis for Health Services Research: Developing Taxonomy, Themes, and Theory. Health Services Research 2007; 42(4):1758.
31. Mays N, Pope C. Qualitative research: rigour and qualitative research. In; 1995:109-12.
32. Pope C, Ziebland S, Mays N. Analysing qualitative data. In: British Medical Journal; 2000:114-6.
33. Patton MQ. Enhancing the quality and credibility of qualitative analysis. Health Services Research 1999; 34(5 Pt 2):1189.
34. Glaser BG, Strauss AL. The discovery of grounded theory: Strategies for qualitative research: Aldine; 1977.
35. Morse JM. The significance of saturation. Qualitative health research 1995; 5(2):147.
36. Boyatzis RE. Transforming qualitative information: Thematic analysis and code development: Sage; 1998.
37. Mays N, Pope C. Assessing quality in qualitative research. 2000; 320(7226):50-2.
38. The Review of the Roots of Youth Violence: The Executive Summary. In: The Queen's Printer for Ontario; 2008.

Appendix B

Research Partners

The New Haven Family Alliance

The New Haven Family Alliance is nonprofit community organization located in New Haven, Connecticut. Its mission is to strengthen fragile families and to improve the quality of life for children in the greater New Haven area. The process of coalition building and systems change to support healthy families is part of the core agency mission. The agency's goal is improving children's developmental outcomes by helping families become financially self-reliant and increasing parents' capacity to guide and nurture their children. The NHFA works with community partners to increase community and family capacity to promote children's physical, emotional, social and spiritual well being.

History

Established 17 years ago as a child welfare reform agency, the NHFA uses social work knowledge and skills and contemporary research findings to continually refine a model of relational social case work and community case management to address the needs of a population suffering trauma, grief, loss and separation from family and community. The NHFA holistic intervention model has proved highly effective in meeting the needs of very low income urban children by connecting or reconnecting parents to their children and families to their communities.

Current Programs and Activities

The NHFA administers several programs in addition to the Street Outreach Worker Program described in Addendum C. Clinically informed, community case management in conjunction with structured classes and/or support groups meets specific needs of clients served by the NHFA. Other NHFA programs include: *The Male Involvement Network (MIN)*, a coalition of service providers and institutional partners established in 1999 to engage or re-engage men and fathers in their children's lives. MIN is a collaborative, comprehensive, systemic approach to working with low and very low-income fathers. *Intensive Family Preservation and Reunification (IFP)*, a partnership with Yale Child Study Center to respond to findings of parental abuse or neglect by the Department of Children and Families by improving parents' capacity to care for their children; *Moving To Work*, a 245 hour, 5 days a week employment preparation, job placement, and retention program designed to help parents receiving cash assistance from the state achieve financial self-sufficiency; the *New Haven Juvenile Review Board*, a community-based balanced and restorative justice program in which youth work with a community panel to repair harm done to the victim and community and increase their own competency and life skills; *Strengthening Schools Through Family and Community*, an academic support program designed to support the academic achievement of children in grades K-12 who have attendance issues and behavior problems.

Key Contact: Barbara Tinney, MSW, Executive Director, (203) 786-5970

The Robert Wood Johnson Clinical Scholars Program (RWJCSP)

The Clinical Scholars Program is one of several health related training programs funded by the Robert Wood Johnson Foundation to develop health leaders and influence the quality of health and health care in this country. The RWJCSP is designed to train physicians: 1) in clinical, health services and community research; and 2) to translate research findings into practice to improve health policy, health care systems and community health at local, state, and national levels.

Yale University School of Medicine is one of four sites across the country to have a Clinical Scholars Program. The other three programs are at the University of California at Los Angeles, the University of Michigan, and the University of Pennsylvania. Yale has been a site for the Clinical Scholars Program since the inception of the program 35 years ago. One of the more prominent graduates of the program is Dr. David Satcher, former U.S. Surgeon General.

Commitment to New Haven

As part of their training in community research and its translation into action, Clinical Scholars learn how to work with local community leaders, together assess health priorities of the community, and explore ways to address those priorities. Although most Clinical Scholars will only be in the New Haven community 2 years, they are committed to making a contribution to the community while they are here.

The faculty of the program is committed to providing continuity in the program's relationships with community organizations as Clinical Scholars move on and support Clinical Scholar community projects during their time in New Haven.

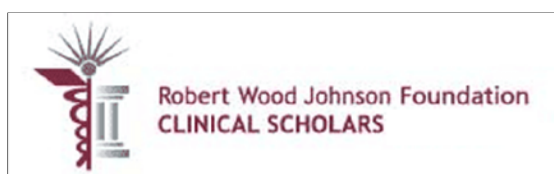
A Steering Committee on Community Projects has been established to guide the Scholars and faculty efforts in New Haven. The Steering Committee has representation from community organizations such as the Health Department, the New Haven Family Alliance, the Hill Health Center, the Fair Haven Community Health Centers, Yale New Haven Hospital and the Hospital of St. Raphael's, the Community Action Agency, JUNTA for Progressive Action, other Yale community-based efforts, and former Scholars. All members of the Steering Committee share a commitment to full community engagement.

Current Projects

In addition to partnering with the New Haven Family Alliance on the Photovoice project, another Clinical Scholar is working with the organization in an evaluation of the Street Outreach Worker Program.

Other projects underway include: 1) working with local health organizations and the New Haven County Medical Association to establish a Project Access New Haven to increase access to specialty care for the uninsured; 2) working with the Teen Pregnancy Prevention Council and New Haven Board of Education to better understand the attitudes of New Haven teens with regard to pregnancy and contraception; and 3) working with the Health Department and others in the state to improve trauma care.

Key Contacts: Georgina Lucas, MSW, Deputy Director, (203) 785-6761
Marjorie Rosenthal, MD, MPH, Assistant Director, (203) 785-6377



Appendix C

New Haven Family Alliance Street Outreach Worker Program

Street Outreach Worker Program

The New Haven Family Alliance Street Outreach Worker Program was developed and implemented as a collaborative, multi-faceted approach to reduce and prevent youth violence.

All effective Street Outreach efforts to prevent community violence are supported by comprehensive and inclusive violence prevention strategies. The New Haven Family Alliance's strategic public health approach to violence prevention employs 1) a risk reduction model that explains why violence occurs and how to reduce risk; 2) Street Outreach workers who identify and engage individuals who are at high risk of becoming involved in violence in order to prevent shootings and killings from occurring and who focus on high-risk conflict mediation to stop shootings and retaliations; 3) community mobilization to engage residents, local businesses, service organizations and members of the faith community to help build safer and more viable communities; 4) a public education campaign to facilitate behavior change and promote nonviolence and that disparages violence and carries pointed messages about the consequences of shooting and killings; 5) Faith-Based leadership Involvement to complement the activities of the street outreach workers by providing safe havens, talking to high-risk individuals, participating and providing leadership in shooting responses, preaching nonviolence and urging congregants to work to stop shootings and killings from occurring; 6) Criminal Justice participation to hold individuals responsible for shootings and killings accountable to the community for their actions. "The elimination of youth gun violence is not an end that can be achieved without the involvement of police, the courts and corrections agencies – until thinking completely changes."

The Street Outreach Worker and high-risk conflict mediation are the most important components of the initiative. The Outreach workers are individuals who are familiar with "street" life, form relationships with youth at high risk for violent behavior, mediate conflicts and try to head off violence. Outreach workers are street-smart themselves and are challenged to build sufficient trust with high risk individuals in order to influence the ways these young people think and act. Outreach workers also redirect youth to pro-social pursuits including jobs, job training, returning to school, entrepreneurial pursuits, etc. These workers will meet and work with youth in non-traditional settings and during non-traditional hours when violence is most likely to occur, particularly evenings and late night hours and weekends.

Appendix D

Notes from the Kick-Off Meeting with Youth Participating in the Photovoice Project June 16, 2008

Twenty six youth who expressed interest in participating the Photovoice project came together to discuss youth violence, its roots and develop the themes that would be used as the basis for the weekly photographs and focus group discussions. To stimulate discussion, specific questions were asked and then recorded. NHFA staff member and research team partner, Shirley Ellis-West facilitated this group discussion. Below are the questions asked and the responses of youth in attendance:

1. Who is involved?

- Minorities
- Hoodn....
- Cops
- White people
- Drug dealers
- Innocent people
- Any type of person
- Everyone
- Stores
- Politicians
- Army
- America
- Bin Laden
- Family
- Friends
- Children
- Young adults
- Community
- Police
- Parents
- Government
- George W. Bush

2. How does violence play out in the community?

- Drugs
- Guns
- Money
- Respect
- Girls
- Disagreements
- Fights
- Gangs
- Betrayal
- Death
- Jail
- Rape
- Kidnapping
- House raids
- Dropouts
- Vandalism
- Kids without parents
- People get hurt (emotionally, physically)
- Parents lose kids

3. When does violence occur?

- Anytime
- During an argument
- During a fight
- Robbery
- Drug sale
- Money
- 3:00 am
- After the club/parties
- School lets out
- Disrespect
- After games
- Midnight
- Summertime
- When it's really hot!!
- Dice games
- Community functions
- Bar let out
- During war
- Night
- Daytime
- All the time

4. Where does gun violence occur?

- Everywhere
- Neighborhoods
- Schools
- Army
- Corner stores
- Parties
- Mall
- Movies
- Concerts
- Clubs
- Cookout
- Skating rink
- Gas station
- Homes
- Park
- Court
- Alleyways
- Churches
- Beach
- Dice games
- The mall
- Suburbs/urban areas
- Apartments
- Iraq
- In the hood
- Store
- Freddy
- Work

5. What causes gun violence?

- Argument
- Beef
- Money problems
- People who can't fight
- Cheating
- Gangs
- Drugs
- Lying
- Snitching
- Poverty
- War
- Disrespect
- Baby mama drama
- Child support
- Stealing
- Statements
- Gambling
- Hustling
- Insanity
- Stealing
- Robbery
- Hating/envy
- Emotionally hurt
- Brokenness
- In need of money
- Environment
- Men/women
- Attitude
- Mood swing
- Road rage
- Politicians
- Revenge

Roots of violence identified in the problem tree exercise:

- People (thugs, dirty cops)
- the system (government)
- family
- drugs, guns, \$\$
- peer pressure
- survival
- \$\$
- pride/disrespect

At the end of the session, these ground rules were also developed to guide the youth's participation in the project.

Group Rules for Photovoice Project:

1. Respect for each other

2. Stay focused on task
3. don't talk over each other
4. Good hygiene
5. Good communication
6. Be on time
7. Don't lose your camera

