## TRAUMA PREVENTION INITIATIVE LOGIC MODEL – a comprehensive, place-based approach to build trauma resilient communities

Short-term Outcomes

Increased Collaboration

Increased community and

Integrated referral protocols

inform decision making and

commitment to a coordinated

agency collaboration

■ Increased use of data to

Increased knowledge and

Increased community

Increased Service Use &

**Protective Factors** 

involvement in decision-

■ Increased access to and use of

targeted services based on

Improved protective factors

that decrease the likelihood

that a person will become a

attitudes, beliefs, resilience)

■ Improved school climate and

Improved Community Safety &

Increased safety of physical

enforcement/community

Decreased experience of

violent victimization and

perceptions of safety

environment and improved

victim or perpetrator of

violence (knowledge,

school engagement

relationships

Decreased Violence

Improved law

perpetration

relations

Improved inter-personal

and networks

service delivery

approach

making

needs

\* Strategies funded by Measure B funding (in full or in part)

## **INPUTS**

## **County Staff**

- Health Agency leaders
- DHS/EMS staff
- DMH staff
- DPH staff
- Other LAC
   Departments
   (e.g., DPSS, DCFS, Sheriffs, DPR, Probation)

#### **Community Partners**

- Cities and municipal agencies
- CBOs/FBOs
- Social service providers
- Local coalitions
- Schools/learning institutions
- Hospitals/trauma centers
- Community interventionists, case managers, outreach workers
- Philanthropy
- Private businesses

### Resources

- DHS Measure B funding
- Other County, state and federal funding
- Foundation funding
- Existing programs and initiatives
- Technical support

#### **STRATEGIES**

#### Coordinating Strategies \*

- Conduct analyses of EMS,
   Coroner, DPH, and other data to identify hot spots for trauma
- Conduct inventory of community existing services, needs, gaps
- Develop comprehensive, placebased violence prevention plan
- Develop and implement community engagement strategies

#### Primary Prevention

- Parks After Dark (PAD): extended hours, programming, and colocated services \*
- Home visitation for at-risk families through Nurse Family Partnership (NFP) Program
- School-based violence prevention/restorative justice
- Intergenerational mentorship
- Youth employment programs
- Violence reduction policies (e.g., gun legislation)
- Built Environment design to revitalize communities and reduce incidence of crime

#### Secondary Prevention

- Community Intervention/Outreach and Safe Passages \*
- Hospital Based Violence Intervention \*
- Trauma informed care and screening for violence exposure
- Evidence-based juvenile justice system diversion

#### **Tertiary Prevention**

 Coordinated wrap around services: mental health, substance use, and social services for high-risk and re-entry populations

## **OUTPUTS**

#### **Coordinating Strategies**

- Timely and useful hot spot analyses
- Completed needs/assets inventory
- Comprehensive violence prevention and intervention plan
- Established regional advisory council to integrate services and strategies and coordinate with other county initiatives (MBK, GARE, Health Neighborhoods)

#### **Primary Prevention**

- Number of youth and families that participate in PAD
- Number of families receiving NFP
- Number of schools/students engaged in violence prevention activities
- Number of youth reached though mentorship/employment programs
- Number of violence reduction policy opportunities identified/implemented
- Number of built environment strategies identified/implemented

### Secondary & Tertiary Prevention

- Number of entities implementing community- and hospital-based interventions
- Number and types of individuals trained (on trauma informed care, evidence-based diversion, linkages to services. etc.)
- Number and types of hospital policy, protocol, or system changes to support screening and referral to resources
- Number and quality of diversion and re-entry programs
- Number of people screened and referred to target services, including mental health, health services and substance abuse
- Developed referral networks

### OUTCOMES

#### Intermediate Outcomes

# Institutionalization of Collaboration

- Increased capacity and institutionalization of infrastructure for a collaborative approach to trauma prevention
- Increased number of policy, protocols, and system changes/supports to reduce violence

## Stronger Families & Communities

- Improved family bonding and functioning
- Improved positive community identification
- Improved mental health, physical health and decreased substance abuse
- Improved school achievement
- Increased stable housing
- Increased educational and economic/employment opportunities

#### Reduced Violence & Crime

- Decreased crime and gang violence
- Decreased violence-related trauma visits, injuries and deaths
- Reduced recidivism rates

## **Long-term Outcomes**

# Decreased Violence & Trauma disparities

- Reduced prevalence of interpersonal and community violence
- Reduced disparity in the rate of violent deaths in SPA 6 compared to LAC

## Improved Health & Social Outcomes

- Improved health status
- Decreased incarceration
- Improved social cohesion
- Improved social conditions
- Improved educational attainment and employment

#### Reduced Costs

 Reduced violence related trauma center costs

**Abbreviations:** LAC, Los Angeles County Department of Health Services; DMH, Los Angeles County Department of Mental Health; DPH, Los Angeles County Department of Public Health; IVPP, Injury and Violence Prevention Program; MCAH/NFP, Maternal, Child and Adolescent Health/Nurse Family Partnership; DPSS, Los Angeles County Department of Social Services; DPR, Los Angeles County Department of Parks and Recreation; CBOs, community-based organizations; FBOs, faith based organizations; SAPC, Substance Abuse Prevention and Control; PAD, Parks After Dark; MBK, My Brother's Keeper; GARE, Government Alliance on Race and Equity