# ASSESSING GUN VIOLENCE RISK FROM THE GROUND UP

## RESEARCH REPORT
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Corners | CENTER FOR NEIGHBORHOOD ENGAGED RESEARCH & SCIENCE

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Photo of street outreach workers at a community event. Photo Credit: Institute for Nonviolence Chicago

# ACKNOWLEDGEMENTS

# TABLE OF CONTENTS

# Executive Summary

Gun violence reduction initiatives that seek to engage individuals involved in violence must effectively identify and manage risk. Risk assessment informs participant recruitment, service provision, and program evaluation. Discussions around risk assessment often center quantitative metrics and researcher-designed assessment tools, deemphasizing the lived and professional experience of frontline professionals who work and often live in the communities they serve. The study outlined here analyzes the perspectives of frontline street outreach and victim services workers in Chicago on how they define, assess, and respond to gun violence risk on the job.

The findings are based on a series of semi-structured focus group discussions and a participatory analysis session conducted in early 2021 by researchers at the Center for Neighborhood Engaged Research & Science (CORNERS).[*] These discussions sought to answer the following questions related to risk assessment on the frontlines of gun violence prevention:

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| 1. How do frontline violence prevention workers define risk for gun violence? | 2. How do violence prevention workers assess and respond to risk? | 3. What role do/should formal assessment tools play in violence prevention? |

Seasoned staff from both street outreach and victim services programs shared their experience identifying when, where, and who is at risk of shooting or being shot. It also gathers perspectives on strategies to mitigate this risk.

## Key Findings

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| Gun violence risk is dynamic and relational. It involves multiple interacting domains that create situations of high risk. | Outreach workers rely on their close ties and knowledge of gun violence networks to assess and respond to risk. | Frontline staff are often skeptical of formal risk assessment tools that might fail to capture the shifting dynamics of risk. |

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# Introduction

Gun violence reduction efforts that aim to reach individuals involved in gun violence must be able to accurately assess risk. Policymakers, practitioners, and community members urgently need to know how to identify where gun violence might happen and who might be involved to make communities safer and places where residents not only survive but thrive. In many contexts, such as prisons, hospitals, and community violence interventions (CVIs), risk assessment drives participant selection, the approach to service provision, and the evaluation of program efficacy. Researchers and policymakers often center risk assessment conversations around quantitative metrics and researcher-designed assessment tools but most of the on-the-ground and frontline work of finding, reaching, and connecting with populations involved in gun violence is guided by the lived experiences and social networks of outreach workers themselves.[1, 2]

As the world becomes increasingly automized and digitized, quantitative tools for risk assessment are often developed with little regard for or incorporation of the perspective and expertise of street outreach professionals and victim advocates who work, and often live, in communities experiencing high rates of gun violence.[3] This research report analyzes the perspectives of frontline violence prevention workers in Chicago, who shared how they define, assess, and respond to gun violence risk on the job, as well as their opinions about the use of formal assessment tools. This report highlights findings from a series of semi-structured focus groups and participatory analysis sessions conducted by Northwestern's Center for Neighborhood Engaged Research & Science (CORNERS) in early 2021. The focus groups included staff from both street outreach and victim services programs focused on preventing gun violence and serving gun violence victims and their families. This report aims to convey how local experts understand when, where, and who is at risk of shooting or being shot. It also gathers their perspective on strategies to mitigate this risk.

1    Wheeler, A. P., et al. 2019. "The Accuracy of the Violent Offender Identification Directive Tool to Predict Future Gun Violence." Criminal Justice and Behavior 46(5):770–788.
2    Kramer, E. J., et al. 2017. "Violent reinjury risk assessment instrument (VRRAI) for hospital-based violence intervention programs." Journal of Surgical Research 217.
3    Papachristos, A. V. 2022. "The promises and perils of crime prediction." Nature Human Behaviour 6(8): 1038–1039.

Photo of Street Outreach Workers. Image credit: Chicago CRED

The report begins by discussing what outreach workers and victim advocates do on the ground to mitigate gun violence and the differences between the two roles. Because the two groups of frontline workers have different functions, there are nuances in how they define, assess, and respond to risk. After providing such crucial background on the workforce, the report is organized around three research questions: (1) What is risk? (2) How do violence prevention workers assess and respond to risk? and (3) What is the role of formal risk assessment tools in CVI?

# Key Findings

(1) Frontline workers see gun violence risk as relational and dynamic. Risk cannot be reduced to individual characteristics and, instead, involves risky behaviors, situations, times, and group conflicts that ebb and flow.

(2) Outreach workers rely on their close ties and hyperlocal knowledge of gun violence networks to assess and respond to risk for involvement in violence.

(3) Given the hyperlocal and relational approach of outreach workers and victim advocates, frontline staff are often skeptical of formal risk assessment tools that might fail to capture shifting situations and relationships.

# Background & Methods

The findings in this report are based on a series of semi-structured focus group discussions in February 2021 conducted by research staff at CORNERS. The center currently serves as the research partner for several outreach initiatives and organizations across the city of Chicago, including the Communities Partnering 4 Peace collaboration and Chicago CRED. This project is one piece of an evaluation of the City of Chicago's investments in violence reduction strategies. The goal of the risk assessment focus groups was to develop insights on how risk is understood "on the ground" and a general set of principles to guide risk assessment for community violence interventionists. In line with CORNERS' community engaged approach to research, researchers recruited seasoned staff from street outreach and victim services programs across the city to participate in the discussions and co-analyze data alongside the research team. In total, 29 people participated in seven focus group discussions, representing 19 organizations and 32 neighborhoods across Chicago.[4] During the focus groups, facilitators asked participants to describe the methods and indicators they use for participant selection and service delivery and their familiarity with and use of formal risk assessment tools.[5] Following a preliminary thematic analysis, the CORNERS team held a participatory data analysis session with a subset of focus group members to collectively identify and coalesce around key themes that emerged from the discussions.[6]

## RELATIONSHIP BETWEEN VICTIM SERVICES AND STREET OUTREACH

The outreach activities discussed in this report involve two types of service providers: street outreach and victim services. These positions have distinct, but intertwined roles in gun violence prevention. Both groups play critical roles in violence intervention, operating at different points in the continuum of care available to people with gun violence involvement. Street outreach workers operate on the front-end as "boots on the ground" while victim advocates work "behind the scenes" after a shooting occurs. They, accordingly, offer different perspectives on what risk is and how they respond to it.

Outreach workers and victim advocates are both firmly rooted in the communities they serve and routinely interact with a wide range of community members with diverse needs. However, both groups of workers are charged with providing service to a specific

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4    The participants included 15 outreach workers, 12 victim advocates, and two other violence prevention workers. All but one participant was Black or Latino, and the majority (69%) identified as male. All but one of the participants who identified as women were victim advocates.

5    For each focus group, a research team member took detailed notes of what was said and their observations during the conversation. Following each focus group, the facilitator and notetaker debriefed and captured initial reflections.

6    Researchers reflected initial themes back to participants, who edited the themes in line with their experiences and offered additional insights.

population. Street outreach focuses on identifying, reaching, and engaging the "key individuals" driving violence, including those actively involved in gun violence and those at risk of becoming involved in gun violence. The focal task of street outreach is to intervene before individuals "become victims, survivors, or defendants", with an emphasis placed on group- or street-involved persons and incidents. Outreach organizations primarily operate violence intervention programs that offer immediate diversions away from violence as well as longer-term positive alternatives and supports. They mediate conflicts; help facilitate non-aggression agreements between/within groups; organize sports events, barbecues, and other community events; and provide regular material and social support.

Victim services workers, or victim advocates, have a predetermined target population: the victims and secondary victims of violence typically identified in the aftermath of a shooting incident or violent event. After assessing a client's emotional and material needs, often aided by formal assessment tools, victim advocates typically provide a combination of traditional social services and crisis response. These services can include referrals to behavioral health services, assistance with funeral arrangements, and relocation support.

With this background on street outreach and victim services, we now turn to understanding one of their shared activities: identifying who is in danger of being directly involved in gun violence so they can intervene and offer services.

# Key Findings

Photo of CVI workers engaging community. Photo credit: Institute for Nonviolence Chicago

9

# What is Risk?

**Finding 1: Gun violence risk is relational and situational. It involves risky behaviors, times, places, and group conflicts and cannot be reduced to individual characteristics.**

Focus groups began on the primary research question: how do outreach workers and victim advocates define gun violence risk? This is a question of utmost importance to practitioners, residents, funders, and policymakers alike, and fundamentally breaks down into "who is going to shoot or get shot and how can we tell?" Identifying these individuals is a critical step in knowing how to prevent and intervene in gun violence.

One of the most common approaches to assessing risk is focusing on individual characteristics or "risk factors". Criminal justice and even some public health research focuses on identifying the personal behavior characteristics that put someone "at-risk" or lead an individual to become involved in violence.[7] In general, frontline violence prevention workers and advocates objected to definitions of risk that focus on labeling individuals as "at-risk," noting the baggage that gets attached to young Black and Latino boys often labeled "at-risk." Focus group participants, instead, provided a different characterization of risk - a holistic definition that includes but goes beyond individual characteristics. Gun violence risk is relational and dynamic. It involves multiple interacting domains that create situations of high risk: individual characteristics and behaviors, group/interpersonal dynamics, times, and places (figure 1).

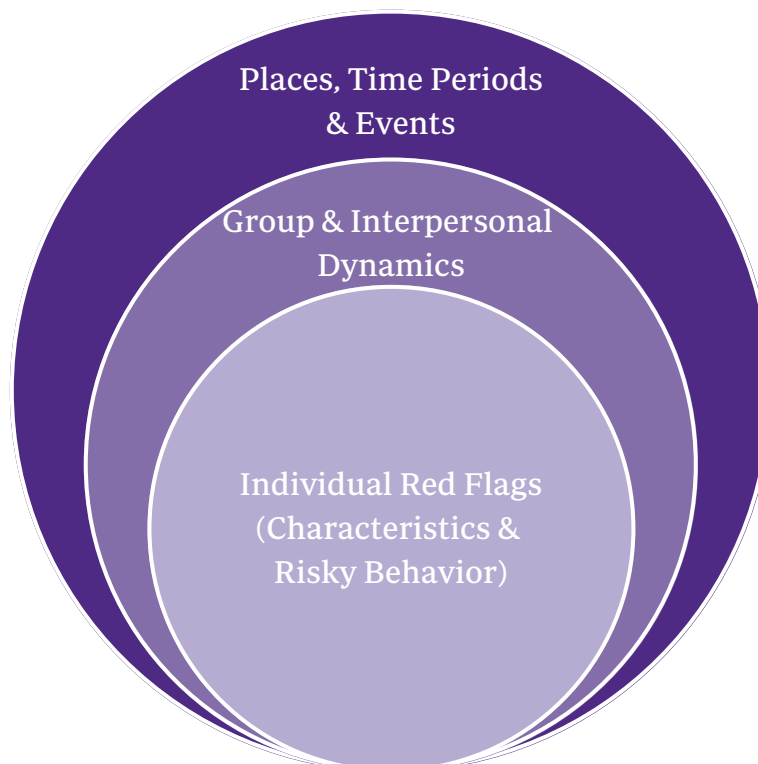## Risk of Gun Violence as a Dynamic Situation

Initial focus groups indirectly and directly investigated the definition of risk that frontline workers use when intervening and working with those involved in gun violence. Focus groups dove into how street outreach workers and victim advocates operationalized gun violence risk—how did they know who to work with or, in the case of victim advocates, who did they start worrying about for future victimization or retaliation? Organizations hire street outreach workers for their lived experience with gun violence and their closeness to community networks that provide actionable insights into where gun violence is happening and among whom. Outreach workers are constantly on the street, talking to people in the neighborhood and their networks, to ensure the most up-to-date information about disputes, groups, and other tensions that

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7    Berk, R., et al. 2021. "Fairness in Criminal Justice Risk Assessments: The State of the Art." Sociological Methods & Research, 50(1), 3–44.

might lead to gun violence. Victim advocates, in contrast, begin by responding to a victim of gun violence and/or their family after an incident; often these connections begin near the site of a shooting incident or hospital.

## Risk for gun violence involves numerous shifting features that together form a dynamic landscape of risk

Hired precisely because of their hyperlocal knowledge, outreach workers often began their description of risk assessment as a function of their experience growing up in the same communities, having spent time "on the same blocks," and being familiar with the social and group networks where shooters are likely located—or, at least, having personal experience and networks that would allow them to locate those involved in gun violence. Outreach workers begin their job with pre-existing knowledge of the people who are "about that life" (i.e., involved in gun violence or group/neighborhood disputes). We encouraged the outreach workers to lay out explicitly those markers of who to work with or where to go that feel natural to them, but opaque to outsiders. In response, participants provide a series of characteristics that flagged potential risk including having been recently shot, being deeply invested in their street reputation, being known as a weapons carrier, and gang or group involvement.

Places, Time Periods & Events

Group & Interpersonal Dynamics

Individual Red Flags (Characteristics & Risky Behavior)

*Figure 1. The domains of the dynamic landscape of gun violence risk.*

Outreach workers also described numerous, shifting features of risk that they keep track of as they work to stop gun violence. Outreach workers cited their knowledge of group and neighborhood dynamics (times when conflicts began to "get heated") and neighborhood geography ("the spots where it's going on") as equal to or even more important than individual characteristics or behavior. Workers described being hyper-alert in the days after a shooting when a victim or their friends go into "defense mode," meaning they may be attempting to retaliate and/or are hypervigilant. Outreach workers brought up knowing about historical beefs and monitoring social media for new conflicts brewing.

For victim advocates, their first introduction to an individual occurs when that person or their family member has just been shot or involved in a violent event. There is a baseline level of risk with those clients as they have all, by definition, been victimized; as such, focus group conversations revolved around the care advocates provide victims and families, and when they begin worrying an individual could be at further risk. Victim advocates also described individual "red flags" like those mentioned by outreach workers—past victimization or trauma, truancy from school, signs of anger or unwillingness to accept support. Victim advocates also discuss focusing on the weeks immediately following a shooting or managing dynamics in a hospital room to prevent conflict.

## Individual Red Flags

While gun violence risk involves the confluence of risky spaces, times, and group dynamics, frontline outreach workers stay attuned to individual characteristics and behaviors that heighten risk for gun violence. We use the phrase "red flags" to indicate traits that indicate a possible increased risk of gun violence involvement instead of "at-risk" due to frontline workers' perception of the phrase's implications to stigmatize, Black and Latino youth from under resourced communities. For violence prevention workers, getting to know their clients is a core part of the job. Red flags that increase their concern for an individual may be behaviors, traumas, or other life experiences (Table 1). While a bullet can hit a friend or bystander as easily as a gun carrier, outreach workers always want to know who on their blocks or in their neighborhood is on offense (actively aggressing/seeking out opportunities for violence), defense (not actively aggressing, but will use violence if needed), or invested in gangs or street life. Victim advocates are less connected to day-to-day life in the neighborhood, but through their relationships one advocate succinctly summarized the approach as looking for who was the most "overwhelmed." Traditional actuarial criminal justice risk assessment models consider a narrower set of "risk factors" than frontline violence prevention workers.

Importantly, interventionists stressed that even these "red flags" are not static and are related to contextual and situational factors. Gun violence victims and offenders (who are often in overlapping networks) are embedded within risky situations and contexts. Risk changes day to day as new conflicts, traumas, and opportunities present themselves. Frontline violence prevention workers navigate this ever-shifting landscape to identify where trouble is going to "pop off" and prevent guns from coming out.

Table 1. Red flags described by outreach workers and victim advocates

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|---|---|---|
| History of being shot or attacked, especially recently | Alcohol or drug use, especially if they are out all night | Direct witness to trauma (fights, shootings, assaults) |
| Family or friend shot, stabbed, or killed, especially recently | Trouble in school (truancy, poor grades, fights) | Parental incarceration or street involvement |
| Recently released from prison or frequent incarceration | Homelessness or housing insecurity | Rejection of services, saying they want to deal with conflicts on their own |
| Known to carry a gun | Parental neglect | Deep involvement in a gang |
| Involved in street activities (shooting dice, selling drugs, car jackings) | Signs of critical need like wearing the same clothes multiple days in a row | Signs they are deeply invested in street reputation (trying to posture or have a certain swag) |
| Suicidality | Hunger | Emotionally overwhelmed |

*Table 1 shows the red flags that outreach workers and victim advocates indicated they look out for with the participants they work with. We did not order the risk factors in the table, and it did not seem in focus groups or analysis sessions that frontline workers gave priority to any one red flag over another. Outreach workers and victim advocates identified these factors when we asked what alerted them that someone was vulnerable or should be a high priority. It is notable that these risk factors include a wide array of characteristics, only some of which are typically found on formal risk assessment tools employed in the criminal justice system or clinical settings.*

## Group and Interpersonal Dynamics

Most outreach workers and victim advocates discussed conflicts and disputes between gangs, crews, or groups of friends as contributing to gun violence risk. Like individual red flags, however, focus group participants stressed that group-affiliation itself does not fully capture risk of gun violence: group affiliation and conflict dynamics are just two of several interrelated factors related to the ever-changing dynamics of gun violence. Frontline violence prevention workers carefully monitor a range of conflicts from historic disputes to new feuds emerging on social media as a barometer of violence dynamics. In many Chicago neighborhoods, group conflicts can go back generations but easily erupt into present-day violence. With the pervasiveness of social media and the breakdown of larger gangs into smaller crews, new conflicts can spark in an instant due to online taunts or a music video.

Focus group participants also talked about meso-level group dynamics as a risk for gun violence: the ways in which relationships within and between crews are intermingled with a broader spectrum of neighborhood, friendship, and social ties. Specifically, focus group participants discussed relationships between non-gang friends, family members, or other group members that can spark a shooting. Part of identifying risk for frontline gun violence prevention workers is paying attention to the nuances of relationships to see where the danger may appear, which might entail recognizing both the ties between street crews and internal family dynamics. For example, one victim advocate explained that helping a mother deal with her emotions prevents her from talking to the cousin of the victim who has a gun and may choose to then avenge their loved one. Sometimes, one participant shared, identifying risk is about seeing who the quiet one is at the hospital. Lastly, many participants shared that disputes in romantic relationships that involve group affiliated individuals, or their loved ones, can erupt into group conflict.

## Places

Frontline workers mentioned hospitals and the scenes of violence as places with volatile emotions and dynamics. One participant explained, "If people from opposing groups both have injuries from a shootout and wind up at the same hospital, then you get two crews at the same spot. The hospital can become an explosive scene." Similarly, the scene of a shooting can draw dozens of people. Police at the scene of the crime are not always seen as coming to help and can fuel the anger. Emotions run extremely high. These places were discussed not necessarily as the site of the next shootings, but as the location where

the motivation for the next shooting is sparked. Key locations where risk lingers socially can also serve as a source of information on risk levels and the level of threat related to disputes and groups. For example, one outreach worker noted: "The hospital scene is a hotbed of emotions. You can spot right off who you gotta talk to." Sometimes the grief of a mother or anger of a cousin can set off the person who will later go out and retaliate.

Beyond emotionally volatile hospitals and crime scenes, focus group participants also cited other, potentially innocuous, spaces as places where risk may be elevated. For example, areas that facilitate large gatherings (i.e., parks or entertainment districts) can become sites of multi-victim shootings if a dispute escalates. Similarly, social media is increasingly the site of interpersonal disputes, taunting rival group members, and other verbal conflicts that can spill into physical violence.

## Time Periods & Events

Frontline workers further define risk in relation to the time periods when gun violence is most likely to take place and the timing of specific events that might escalate risk. Both outreach workers and victim advocates consistently described the time following a shooting as a high-risk period where retaliation might take place. Victims, their friends or family, or groups they are associated with can go into "defense mode." Victim advocates prioritize families in the immediate weeks after a homicide because that is the most intense, emotional period of crisis for those individuals. As a

> **"Funerals used to be a sacred place. It's not no more. It's another hotspot."**

feature of their job, victim advocates focus less on interrupting the violence and more on caring for the victim and their family or friends in what they discussed as the most trying period. Outreach workers also attend to the trauma and volatility a recent shooting can cause. They focus extra attention on people or groups within the immediate days and weeks after a shooting, acknowledging that this is a time when more gun violence can erupt.

Beyond the immediate period after a shooting, outreach workers also discussed anniversaries, birthdays, and funerals as risky times for shootings. One outreach worker noted that funerals are an easy way to locate and target kin or group members of someone who was killed. One outreach worker explained, "Funerals used to be a sacred place. It's not no more. It's another hot spot." Similarly, anniversaries of shootings can

result in memorials or gatherings to target or revive emotions that lead to offensive or defensive shootings. Birthdays of previous victims also provide opportunities for gatherings that serve as targets or escalate emotions.

# How do CVI Professionals Assess & Respond to Risk?

**Finding 2: Frontline violence prevention workers embed themselves in hyperlocal gun violence networks and develop relationships to identify and respond to risk.**

Frontline community-based violence preventionists repeatedly emphasized their embeddedness in hyperlocal communities and their ability to develop strong relationships across networks and neighborhoods as the primary approach to assessing and responding to risk. They use diverse, but personal, methods to mitigate the risk of gun violence across groups and individuals, responding to the dynamic in front of them. To explore violence preventionists' methods of recognizing and addressing risk, we directly asked focus group participants how they identify potential program participants or drivers of violence and probed to better understand how they engage those hardest to reach. We then asked outreach workers and victim advocates how they respond to risky situations and manage risk for their clients.

Frontline workers explained that they use their embedded understanding of dynamics of violence and emotional intelligence to assess risky situations and identify people who have red flags. Violence prevention workers operate as a connection to resources to address individual needs or behavior and reduce the risk of gun violence involvement. In addition to services, they also use their own stories, model nonviolent behavior, and lean on their relationships with gun violence networks to diffuse risky situations and manage risk.

## License to Operate

Almost all the outreach workers who participated in our focus groups highlighted the importance of one's reputation within a community and with people in its gun violence network as a critical factor in their ability to identify and deescalate risk for gun violence. More specifically, outreach workers consistently described the essential importance of having "license to operate" (LTO) permitting them to work in their community. LTO is earned through a history of street involvement and close pre-existing relationships with community members. Beyond a worker's lived experience and social network, LTO is predicated upon being perceived as trustworthy and benign within a particular community. Managers making hiring decisions also recruit new outreach workers with this focus on reputation and being enmeshed in hyperlocal networks. Outreach workers thus come to their work with an idea of who in their networks or neighborhoods are at elevated risk for gun violence involvement, who might be an effective ally in diffusing risky situations, and who would understand the "red flags" to look for. While programs look for emotional intelligence and strong communication skills, the quality and reach of outreach workers' relationships with drivers of violence is crucial for hiring decisions. Both supervisors and frontline outreach workers recognized the need to have experience and a credible reputation "in the street" to assess and respond to risk effectively. As one outreach worker described, "I could see what's going on when I hit the block because I came from there [...] it's embedded in me already, I done turned the page but I ain't forgot what I know."

> "I could see what's going on when I hit the block because I came from there [...]it's embedded in me already. I done turned the page but I ain't forgot what I know"

Outreach workers use their LTO, lived experience, and networks not only to identify risk of gun violence but to manage that risk when they encounter it. They may use their knowledge of hyperlocal networks to connect to potential program participants, to an "in-road" to assist in mediating a conflict, or to the loved one of someone at risk for engaging in violence to keep them calm. Similarly, outreach workers may use their LTO to gather information to assess whether a conflict may result in gun violence and to diffuse it if necessary. For example, after a shooting, outreach staff may seek out "intel" from their networks on whether the victim's associates may have the intent and means to engage in retaliatory violence. If the risk for retaliation exists, then an outreach worker can use their relationship with a "shot caller" or the possible shooter's loved one to deescalate the risk of gun violence.

Conversely, victim advocates may have a history in the neighborhood, but this pre-existing understanding is not a requirement for their job function as it is for their outreach colleagues. They can demonstrate their trustworthiness and credibility through their work and engagement with the community. Victim advocates in our focus groups and analysis session repeatedly highlighted their efforts to be seen as dependable members of the community in which they work, not just service providers collecting a paycheck. They may canvas with outreach workers, attend community events, and generally maintain a presence in the community in both good times and bad. Victim advocates repeatedly underscored this need to be seen as someone who is invested in the community in general, and not only associated with crisis, as an important factor in being credible. Their investment and credibility allow them to assess levels of risk when they are providing services to a family or victim of gun violence.

Finally, outreach workers and some victim advocates have themselves been victims or perpetrators of gun violence and use their story and behavior as proof or motivation for moving away from "the life". In all our focus groups, participants highlighted their own evolution from being "a part of the problem" to "a part of the solution" as an important tool in their toolkit to engage those at risk of gun violence involvement and inspire change.

## Keeping in tune with the neighborhood

Because risk is highly dynamic, even when equipped with LTO, outreach workers and victim advocates must continuously develop their relationships and reputation within the community to maintain a current understanding of the hyperlocal dynamics of violence. To that end, both groups of workers employ similar methods to stay in tune with neighborhood dynamics, such as maintaining a regular presence in the area, providing wide-reaching services, and generally being known for reliability. Being physically present allows potential participants/clients, key individuals, and the general community to get to know and trust violence prevention workers. Relationships with community members are also strengthened through broad service provision, such as food distribution, clothing, and linkages to care. For example, one violence reduction organization has a recording studio at their office and routinely permits young people to use the space. Such an exchange strengthens the relationship and builds trust between those youth that may be at risk for gun violence involvement and outreach staff. Victim advocates and outreach workers in our focus groups highlighted their credibility and presence as a key factor in their ability to get the information they need to effectively assess risk.

In short, people are more likely to share their needs and feelings with someone they consider trustworthy and steadfast, thereby improving violence preventionists' ability to assess the risk of gun violence involvement.

For example, during the COVID pandemic, many violence prevention services assumed a broad support role within their community. They distributed food boxes and personal protective equipment, coordinated COVID testing sites, and tried to provide diversions and economic opportunities for young people (see previous CORNERS report on Street Outreach and Covid 19). But these efforts were not unique to the pandemic. Rather, violence prevention workers understand their broad offer of support services as an essential component to reducing violence. It is precisely through this form of service provision that relationships are developed and strengthened with community members. As one focus group participant explained, "Your biggest work happens when it's quiet... That's when you be feeding the community, talking to the guys, offering them services". For victim advocates, this is central to their ability to embed themselves into communities with which they do not have prior connections. For outreach workers it serves to keep their knowledge of dynamics of violence current so they can more easily identify who may be at greater risk for gun violence involvement and when volatile situations arise. Further, it serves to increase buy-in from community members that are not driving violence—connections that can then be leveraged to connect program participants to neighborhood jobs, safe spaces, and other resources.

## Reaching outside personal networks

There was widespread agreement among focus group participants that the key to assessing and responding to risk lies in the embeddedness of violence preventionists in the hyperlocal gun violence networks of their neighborhood. However, when we probed, some acknowledged challenges and limitations of such an approach. The most obvious limitation is that the model's success is predicated upon being embedded in the right networks in the right places at the right times. "Good" outreach workers have inside knowledge of the dynamics and drivers of violence in their networks and/or geographic area. As one outreach supervisor claimed, "if you have the right guys on your team, you know what's going on in the area." When we asked where this model might not hold up, participants highlighted two ways in which the model is limited: generational gaps and difficult to reach or unknown networks.

In general, outreach workers in Chicago are older men and women, with an average age of 44 years old.[8] They may know the parents or older family members of people driving or involved in gun violence and can use those relationships in conjunction with their

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8    Hureau, D. M.,et al. 2022. "Exposure to gun violence among the population of Chicago community violence interventionists." Science advances, 8(51),

reputation to assess and respond to the risk of gun violence. They may be seen as mentors to younger kids on the block, or people of authority because of their past street involvement. In this way, the generational divide can be a powerful mechanism to respond to and assess risk. But other outreach workers highlighted the gap as a barrier to the work. Despite being embedded in their community, they are often generationally removed from the networks of younger people and youth that are engaged in violence, complicating both the identification of risk and the de-escalation of conflicts. For example, one outreach worker remarked that it is difficult to use the typical network approach with young adolescents because he and his colleagues are older and do not "hang out with 13-year-olds."

Beyond the generational divide that can separate outreach workers from younger people driving violence there can be network divides, gaps in relationships with individuals, groups, and events to which outreach teams are not yet connected. When we asked how they overcome this limitation, the almost universal response from participants was that even if they do not know someone or have a connection, then they know someone who does, whether that be an "in road" or a colleague at another organization. For example, at citywide coordination meetings outreach staff may request assistance in connecting with a victim of gun violence that resides outside of the service area where the victimization occurred. While focus groups participants provided some examples of successfully using their networks, in  practice this approach can still fail. At those same citywide coordination meetings, it is not uncommon to hear outreach supervisors attempting to recruit new workers from a particular area or group with which they do not have relationships. It is unclear from our focus groups how violence interventionists overcome situations in which a group embroiled in conflict or driving violence is resistant to relationship building.

# What role should formal tools play in CVI?

**Finding 3: Violence prevention workers are skeptical of formal risk assessment tools because so much of their work relies on relationship building and hyperlocal knowledge of shifting dynamics. However, these evidence-based tools do have a place along the broader continuum of care available to people with an elevated risk of gun violence involvement.**

In the final section of the focus groups, we asked outreach workers and victim advocates about their experiences with and opinions of formal risk assessment tools. Most had not used any type of formalized or actuarial tool to assess risk as part of their routine job functions, with some organizational exceptions. As such, we explained that the question referred to some type of checklist, form, or research-driven identification model. Some talked about materials they used for training or forms used for case management to gather information about a participant's life and needs. Despite a lack of familiarity with specific tools, the insights from focus groups reveal that frontline violence prevention workers in Chicago express skepticism towards formal risk assessment tools but recognize their potential value for other collaborating service providers, such as case managers and clinicians. Ultimately, while formal tools are not widely used or accepted uniformly throughout the field, frontline workers embrace the communities of practice being created as a valuable platform to share best practices and coordinate efforts.

Many outreach workers viewed standard data collection practices around risk factors as a tool for validation with outside partners, not necessarily a tool for direct practice. Outreach workers did not see them as having much practical benefit beyond underscoring information they already knew and to potentially demonstrate to funders, research partners, and policymakers that the decisions they make on the ground are accurate. One participant emphasized how static tools cannot capture the ever-changing nature of gun violence risk: "It [gun violence risk] doesn't stick to the script. Adaptability. Seeing things. Keeping a pulse. Knowing what's going on in the community. Monitoring the birthdays of key individuals...You gotta have an instinct for it." Despite this skepticism, innovative tools that incorporate data analytics with outreach workers' expertise in violence dynamics have shown promising early results in more efficiently identifying and responding to gun violence risk.

Victim advocates and case managers showed more familiarity with formal assessment tools given their more downstream role along the continuum of care available to those at elevated risk for gun violence. The forms they referenced appeared to be case management or holistic assessment forms and checklists used to determine participant strengths and needs. However, even though they were more familiar with such tools, victim advocates also talked about the practical limitations of using formal tools in the field. One advocate explained that they realized "It's not best practice" to use form tools "in real time [with a participant]." They went on to say that going through a list of assessment questions turned people off because it felt formal or nosy. She filled out forms after interactions but used informal open-ended questions to get to know clients. This practice is shared by other service providers, such as clinicians, in their work with this particular population. Although some victim advocates found assessments useful for documenting information and tracking progress, most went back to the importance of forming genuine relationships. One focus group participant explained that when they look at people, they look at them as individuals who have needs, not as classifications of high-risk or low-risk, "They are still just people. They are people."

## Formal risk assessment tools are a static measure of risk - and viewed as removed from lived experience and impacted communities

Although it is not uncommon for workers across professions to resist formalization or the introduction of new tools, one important takeaway from these focus groups should not be lost in the conversation about risk assessment tools. Street outreach and the models of victim advocacy connected to them are hyperlocal interventions formed in Black and Latino communities marginalized by formal institutions. Actuarial risk assessment tools are viewed as technological developments often removed from lived experience and the communities most impacted. The findings from these focus groups emphasize that the methods currently in use by outreach are based on the embodied knowledge and relationship building of the workers themselves. Extreme care must be given when trying to consider how traditional models of public health standardization do or do not align with community grounded interventions such as outreach. Whereas a criminal justice risk screener might have to be adapted to be "culturally sensitive" or only capture a static measure of risk, the gun violence assessment process used by frontline community violence professionals is developed directly from community-specific expertise and accounts for the dynamic nature of risk. Such expertise cannot be stripped from the practice for the sake of standardization. The outreach worker or the victim advocate, with their relationships, experience, and deep local knowledge, are the risk assessment tool in the field. Any attempts at formalizing risk assessment must be created hand-in-hand with local workers.

# Conclusions &
# Next Steps

Photo of outreach workers at a community event. Image credit: Metropolitan Peace Initiatives

23

# Conclusions

These findings provide a more nuanced definition of gun violence risk than is typically presented in formal or actuarial risk assessment tools. For frontline violence prevention professionals, gun violence risk involves a landscape of related factors, including interpersonal dynamics, volatile situations, and individual characteristics. This relational and dynamic definition of gun violence risk complicates narratives that center individual behavior and characteristics. Ultimately, outreach workers and victim advocates understand, assess, and manage risk via a holistic approach that integrates actuarial and relational methods.

These findings do not provide an answer to the question of whether risk assessment can be standardized into a statistical tool or assessment. However, they do provide some clear directions. So much of outreach workers' assessment practices rely on forming close relationships and tracking the ever-changing dynamics of violence in their communities; handing off such intimate and on-the-ground assessments to a seemingly sanitized tool yields much of this expertise to those who appear far-removed from the community. Gun violence prevention strategies and evaluation approaches that narrowly focus on actuarial measures may not assess or address risk as accurately and efficiently as those that integrate relational methods that incorporate human lived experience.

Outreach workers have embraced the community of practice approach currently being built in Chicago. This burgeoning model leverages existing strengths, increases coordination, and provides opportunities to share best practices, resources, and innovative approaches. For the first time, thanks to several ongoing non-profit and public funding efforts, violence prevention organizations across the city of Chicago have begun regularly meeting and coordinating with each other. Outreach workers across the city are sharing information and expertise, broadening individual social networks and

streamlining the operationalizing of networks for gun violence interventions. When asked how outreach workers gain access to people in groups they did not know, a limitation mentioned in the previous section, one worker responded, "We build a network for that purpose." They contact other outreach workers or organizations who do have inroads with those groups.

These collaborative spaces also give them opportunities to share experience with each other to improve their work. Training programs and other opportunities for learning have emerged from these spaces. For example, frontline staff and managers in focus groups repeatedly cited the Metropolitan Peace Academy (MPA), a training initiative developed with and by street outreach workers, as a positive and effective professionalizing effort. Programs led by those with lived experience as both (potential) participant and violence prevention worker provide culturally relevant and rigorous training and build both individual and organizational capacity. Many of the focus group participants described their appreciation for such training initiatives and the support the growing community of practice offered.

# Appendices

## Appendix 1. Focus Group Guide, Street Outreach Professionals

1. One at a time, tell us your name, what organization you work with, and in what neighborhood/area you work.

**Participant Characteristics and Risk**

1. How do you select a participant
   a. Why these characteristics/methods? Why do these matter?
   b. Can you give us an example of what that looks like/can you paint a picture of that for us?
   c. What does it mean to be "ready" for services/programming?
   d. How do you confirm/verify that a participant has these risk factors/characteristics?
   e. If recent victimization is a risk factor, how do you figure out/know if someone has been recently victimized (90-120 days)?
   f. Does age/generational difference between the outreach worker and participant matter for finding/selecting/engaging with a participant?
2. What are some of your main reasons for deciding not to work with a person? Why?
   a. Can you give us an example of that idea in practice?

**Risk Assessment/Participant Selection Practices**

1. How would you define "risk" in your line of work? How do you know someone you're working with is at risk?
2. In general, how do you find high risk participants?
   a. What places, spaces, ways, or sources do you go to in order to find them?
   b. Do these sources sometimes fail you? In what way?
   c. Does it matter what crews you/your staff know?
3. What sorts of things set off an alarm in your head that someone is really in immediate harm?
4. Can you give us an example of high vs. low risk in your context?
5. Has your approach to assessing/reading changed over time?
   a. Why? What moments have affected your approach to assessing risk?
   b. How do you assess for risk or manage risk?

**Formal Tools to Assess Risk**

1. What risk assessment tools or criteria have you heard of?
   a. Do you use them? Why or why not?
   b. If you have used them, what has made them useful or not useful?

1. What risk assessment tools or criteria have you heard of?
   a. Do you use them? Why or why not?
   b. If you have used them, what has made them useful or not useful?
   c. What tools do you want or need to do your job? What is the most useful information to have? Least useful?
   d. How can we bring together data and lived experience? How does data enhance the knowledge/lied experience of outreach workers?

## Appendix 2. Focus Group Guide, Victim Services Professionals

1. One at a time, tell us your name, what organization you work with, and in what neighborhood/area you work.

**Participant Characteristics and Risk**

1. How do you start to engage with a client?
2. How do you prioritize which participants need services/more support? Where do you spend the most time?
   a. If I was new, how would you tell me to approach the work?
   b. Why these characteristics/methods? Why do these matter?
   c. What does it mean to "ready" for service?
3. What are some of your main reasons for deciding <u>not</u> to work with a person? Why?
   a. Can you give us an example of that idea in practice?
   b. Who doesn't work with you?

**Risk Assessment/Participant Selection Practices**

1. How would you define "risk" in your line of work? How do you know someone you're working with is at risk?
   a. Do you use the terms "risk" or "at risk" to describe your participants/clients? What other words do you use to describe your clients/participants?
2. What sorts of things set off an alarm in your head that someone is likely to engage in retaliation or be revictimized?
   a. Can you give us an example of high vs. low risk in your context?
3. Has your approach to assessing/reading risk changed over time?
   a. Why? What moments have affected your approach to assessing risk?

**Formal Tools to Assess Risk?**

1. What risk assessment tools or criteria have you heard of?
   a. Do you use them? Why or why not?
   b. If you have used them, what has made them useful or not useful?
2. In what ways do formal tools need to change to keep up with how your work is changing?

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