

WHAT DOES A COMMUNITY-BASED ORGANIZATION NEED TO SUCCESSFULLY IMPLEMENT A PUBLIC HEALTH APPROACH TO PREVENTING VIOLENT EXTREMISM?

LESSONS LEARNED FROM EVALUATING SAFE SPACES

The **University of Illinois at Chicago (UIC)** evaluated the **Muslim Public Affairs Council's (MPAC)** Safe Spaces program and found that the program as implemented was not successful, but some aspects showed potential. The full NIJ report is available and scholarly reports forthcoming. This research brief, written in collaboration with **START**, shares key lessons learned to help guide other programs and policies.

BACKGROUND

Community-based violence prevention programs, including those utilizing a public health approach, require adequate community participation, expertise, and funding. During the implementation phase of the Safe Spaces project, the UIC researchers found that many of the community sites had inadequate buy-in, preparation, and resources to establish and sustain violence prevention programming. Thus, we conclude that successful implementation by community-based organizations hinges on three components: 1) community-buy in; 2) community resources and capacity, and; 3) supplemental external support and capabilities.

COMMUNITY BUY-IN



Engage community leadership.

The community members who have been selected to lead implementation need to engage with faith leaders, interfaith boards, school administrators, among other civic leaders to explain the value of the program and encourage participation. This includes engaging with any potential opposition to violence prevention programming to explain the benefits of a public health approach. If those promoting the program address concerns in a transparent and productive manner, they can earn greater levels of trust among community leadership. It is vital that the community, and especially trusted leaders, have a positive perception of the program's potential benefits for the community as a whole in order to promote implementation.



Engage local political leadership.

A major roadblock to implementation can be the communities' reluctance to accept federal funding due to their perception that federal involvement would stigmatize their community. Therefore, it is vital for community members interested in violence prevention programs to engage local political leadership to build a coalition of the willing that can overcome challenges associated with community buy-in and programmatic funding. This will also prepare the community to have greater agency over programs that may be implemented in partnership with organizations external to the community and to ensure trust is maintained throughout the duration of the program.



Engage program implementers, including community member participants.

Communities needed a clear understanding of the level of commitment required in order to recruit and train appropriate people for program implementation. Many communities rely at least partially, if not heavily, on volunteers to implement and run violence prevention programming as well as other community-centered activities. Hence, prior to training, communities need to ensure they can identify individuals that have the time to dedicate to training and program implementation. Casting a wide net for volunteers, including parents, mental health professionals, educators, and mentors from the civic, private and public sectors can increase the capacity of the program. By recruiting people who are the best fit in enough numbers, communities can avoid issues with burnout.

COMMUNITY RESOURCES & CAPACITY

Community-based organizations need the personnel and capabilities to execute and sustain violence prevention programming properly. If those resources are not present, community leaders, political leaders, and implementers need to work together to build them.

It is also important to note that human and material resources needed for primary and secondary prevention programs (a.k.a. prevention and intervention programs) can vary greatly. Secondary preventions (interventions), in particular, can require greater financial resources and a higher degree of involvement from implementers over time to be implemented effectively. Prior to training, communities need to develop a clear understanding of what is required in both types of activities and recruit volunteers or paid staff accordingly.

Further, it may not be viable for community-based organizations to implement primary and secondary prevention programs simultaneously if they have not conducted these types of programs previously. If resources and capacity are scarce, it may be more advantageous for the community to first train for and implement primary prevention programs as they develop the expertise and relationships necessary to implement secondary prevention efforts.



SUPPLEMENTAL EXTERNAL SUPPORT & CAPABILITIES

Communities and program implementers must be aware of their internal capabilities and what skills they may need to outsource prior to initiating training to ensure time to recruit necessary outside support. The first priority would be to find and utilize expertise within the community and then look for partnerships outside the immediate community as needed to incorporate into training and implementation.

Once a community-based organization has recognized they need external support or capabilities, it should work with local political and community leaders to identify partners external to the local community, which could include mental health professionals, educators, or social workers in the wider region. Taking a strengths-based approach to these relationships will help external partners understand and help build upon existing community capacities, and will help the community see the value brought by external partners.



Also, by emphasizing external partnerships, especially with professional institutions and networks that build healthy communities generally, the program can move the focus away from particular religious or ethnic groups. Violence prevention training and programs can be reframed to address “whole-of-community” concerns and foster more inclusive dialogue and participation.