

Madison Dane County Violence  
Prevention:

# A ROADMAP TO REDUCING VIOLENCE

# FOREWORD

Dane County is special. Its people, land, culture, history and economy have made it the fastest growing county in Wisconsin and one of America's most desirable places to live. Our home is attractive because the greater community cares for the safety and wellbeing of all its citizens and strives to provide opportunities for all to thrive while living in safe, supportive neighborhoods. Citizens, community-based organizations and local officials from across our county--with its diverse breadth of rural, suburban, and urban landscapes and its populous Capitol, Madison--take this duty seriously and have committed resources for positive change.

However, COVID-19 has brought a myriad of challenges. Violence both in our community and in our homes has risen significantly, as a struggling economy, isolation, and the stresses of the past year have left community members tired and on edge. Violence is corrosive – it eats away at family structures, personal relationships and the relationship between citizens and the greater community. Pervasive acts of violence leave communities hollow. The impact crimes and other violent acts have on our citizens is a public health crisis that warrants a public health response.



We are pleased to support Public Health Madison Dane County's (PHMDC) Violence Prevention Unit and the release of *Madison Dane County Violence Prevention: A Roadmap to Reducing Violence*. As a city-county integrated health department, the health department is well-positioned to bring much needed coordination to violence prevention, and to lead using a public health approach. Their Violence Prevention Unit will work in tandem with community and government stakeholders to use data and evidence based practice to inform decisions and action, better connect siloed people and systems, leverage real world networks, and address short-term and underlying drivers of violence to lessen the opportunity and lure of violence in these turbulent times and into the future.

The process of creating this plan began with the work of building connections across sectors and organizations and gathering buy-in by engaging community stakeholders in plan-feedback sessions. This plan will continue to provide ample room to adjust as necessary, delivering a starting point for our violence prevention work while not locking us into processes that may not work for us or may need to change as our economy recovers from the ravages of a challenging past year and the months ahead.

We invite you to join us in our effort to reimagine public safety in Madison and Dane County and find your own way to contribute to this vision for just and safer communities. We look forward to working with our colleagues in public health, social service organizations, law enforcement, business, non-profits, and neighborhoods across the county to make meaningful progress. We have a duty to all of our citizens to turn the tide on violence. Together we can get it done.

Thank you Public Health Madison Dane County for charting our course forward. Thank you community members who contributed to this final product. Thank you to the partners who will usher this work into reality. And thank you to you. In reading this report, sharing its vision and finding your own way to contribute, you have joined us in delivering our grand vision for violence prevention.

Sincerely,



**Joe Parisi**  
Dane County Executive



**Satya Rhodes-Conway**  
Mayor of Madison

# INTRODUCTION

## Background

While violence has long been declared a public health issue, it is only in recent years that we've seen a growing number of large scale, comprehensive violence prevention plans that actively utilize a public health approach. Central to a public health approach to violence prevention is the utilization of data, multi-sector collaborations that draw from the strengths and expertise of diverse stakeholders, and a commitment to addressing the spectrum of violence prevention. A public health approach to violence also acknowledges that addressing violence requires addressing associated inequities and underlying drivers of violence, such as structural racism, generational trauma, poverty, and mental health, as well as more immediate individual and interpersonal contributors of violence. Hence, violence prevention is the collective responsibility of multiple systems and organizations, and will require investment and support from many sectors and stakeholders.

In the wake of increasing concerns in violence trends in Madison and Dane County, it has become increasingly clear that a coordinated, comprehensive violence prevention plan is needed. In 2017, conversations about the development of a coordinated approach to addressing the spectrum of violence prevention in Dane County began, and Public Health Madison & Dane County was tasked with taking the lead. We formed a violence prevention unit to begin to analyze, define, and address the issue of community violence utilizing a public health approach. Since then, our violence prevention unit has developed relationships with key stakeholders, started to develop data infrastructure plans, launched and facilitated the Community Safety Intervention Team (CSIT), conducted stakeholder meetings, supported and led many local violence prevention initiatives, and conducted focus groups and community listening sessions.

2020 saw the intersection of numerous global and national crises, including the COVID-19 pandemic. This put a temporary hold on our violence prevention work as the agency rallied to lead the city and county response to the public health pandemic. However, as time went on, the COVID 19 pandemic deepened economic and social disparities and increased violence in communities across the country, including Madison and Dane County. In July, 2020 following an urgent "Call to Action," additional resources were provided to expand Public Health Madison & Dane County's violence prevention capacity and support the finalization of a plan to address the unique patterns of violence in Madison and Dane County.





Artwork by: @brooklyn.deneae, @ceenashsarts\_, @\_synoviaa

This Madison Dane County Violence Prevention Roadmap is the result of that effort: a comprehensive plan establishing goals, strategies, and objectives to address the full spectrum of violence prevention and offer a coordinated approach to reduce violence in Madison and Dane County. Grounded in a public health approach to violence, the plan will use science and data to better understand the problems, and will leverage the expertise and experiences of partners across numerous sectors to execute the plan. Collectively, we seek to address the many risk factors of violence and to build on and further the protective factors. We also will incorporate continuous community engagement, and as such, this document will remain a living document that can be amended to accommodate evolving issues, trends, and priorities.

To date, we've outlined a plan with 5 core goals and accompanying evidence based strategies and objectives. These goals speak to broad areas of work that address the full spectrum of violence; stopping violence before it occurs, intervening and preventing further reengagement in violence, and supporting individual and community healing following violence. These goals and strategies were also developed to contribute to reductions in multiple forms of violence. This plan is *not* intended to replace or duplicate current violence prevention work, but instead seeks to build on the strengths and successes of existing efforts, support innovative solutions and increased opportunity for collaboration, and offer a coordinated, public health approach to help us achieve our goal of reducing violence. We believe that together, this Madison Dane County Violence Prevention Roadmap will help make Madison and Dane County a safer, healthier community over the next five years.

## What Does “Violence” Really Mean?

Violence is defined as the intentional use of physical force or power so as to injure, abuse, damage or destroy oneself or another person, group or community. Our violence prevention unit utilizes this definition to drive our work of addressing gun violence, sexual violence, intimate-partner violence, violence within home settings, self-harm and suicide. Violence is a widespread public health issue that has a profound impact on immediate and lifelong health, opportunity and well-being. Exposure to and engagement in violence often results in higher risk of negative physical or mental health impact, experiencing other forms of violence, and challenges across the lifespan, including but not limited to barriers to education, employment, and housing. These consequences also have cumulative negative impacts on the health and well-being of individuals, families and communities. However, research has shown that investing in a multi-prong, public health approach to violence and implementing evidence-based programs, policies and practices can reduce violence and lessen its detrimental impacts on the health and wellbeing of individuals and communities.

## Public Health Madison & Dane County’s Role: Data & Roadmap Coordination

Public Health Madison and Dane County’s Violence Prevention Unit (VPU) is dedicated to facilitating the coordination and supporting the implementation of the Roadmap. We will employ data and science to further develop, inform, and refine violence prevention priorities and strategies, convene violence prevention stakeholders and partners, and oversee the coordination of the Roadmap execution and evaluation.

More specifically, our Violence Prevention Unit will:

- Develop and maintain data infrastructure in collaboration with data partners to effectively, analyze, monitor and communicate violence patterns and trends
- Convene a Madison Dane County Violence Prevention Coalition to support the Roadmap work delegation and execution
- Support the adoption and adaptation of evidence-based violence prevention strategies and programs
- Facilitate continuous community engagement in the Roadmap’s refinement, determination of priorities, and implementation
- Oversee support for Roadmap evaluation



## **Violence Prevention Unit's (VPU) Vision**

A community that utilizes collaboration and coordination to reduce violence and invest in the safety and health of residents and their environments.

## **Violence Prevention Unit's (VPU) Guiding Principles**

- Approach violence prevention with consideration for and incorporation of Health, Racial, Gender and Economic Equity
- Incorporate voices of those with lived violence experiences
- Address shared risk and protective factors that cross multiple forms of violence
- Support efforts that create immediate impact and long-term change

# THE ROADMAP







# GOAL 1

## Understand Violence in Our Community through Data

The public health approach to violence prevention relies on data to understand the challenges and opportunities in our community. Data can improve understanding of the problems by identifying who is most impacted by violence and determining what factors are contributing to violence. We also use data and research to identify strengths and strategies that protect individuals and communities from violence, decrease the likelihood of reengagement in violence, and support healing. We will employ data from the Madison Police Department, Dane County Human Services and a variety of other stakeholders to describe patterns of violence—for example arrests, assaults, shots fired and youth involvement in the criminal justice system—along with other indicators of violence and sources of data. In addition, we will incorporate the lived experiences of those impacted by violence and use qualitative methods to inform prevention strategies. Together, we will build data infrastructure and strategies in collaboration with data partners and aim to broadly share data analyses and trends. Furthermore, we will monitor advancements in evidence-based practice and work to adopt/adapt proven programs and strategies. Ultimately, we are working to increase systematic data collection, tracking, analysis, and communication of the patterns of violence in Dane County in order to inform action and better serve the residents of Madison and Dane County.

### Strategy 1: Use timely, comprehensive data to prioritize and implement prevention efforts

- **Objective 1:** Enhance local capacity to collect, access, analyze, and utilize primary and secondary mixed methods violence related data from a variety of sources, including people with lived violence experiences, local emergency depts., Emergency Medical Services (EMS), law enforcement, trauma informed care services, and medical examiners
- **Objective 2:** Conduct regular reviews of incidents of violence in coordination with hospitals, law enforcement, and community partners; work to develop a unified approach, common goals, and shared definitions of violence
- **Objective 3:** Work with health care systems in Dane County to implement the Cardiff model and help capture “hidden violence”
- **Objective 4:** Explore incorporation of ACES data and local social determinants of health indicators into violence databases

## Strategy 2: Create data dissemination tools to aid in the understanding of violence data

- **Objective 1:** Establish an internally facing dashboard that captures shots fired, homicides, and other relevant indicators of violence in our community
- **Objective 2:** Establish a mechanism and dissemination plan for informing partners of violence data trends
- **Objective 3:** Establish and enforce shared policies and protocols to maintain data alignment with HIPPA, support individual confidentiality and privacy, and disseminate data in ways that minimize harm and stigma
- **Objective 4:** Explore data and information sharing capacities and protocols to support improved coordination among sectors and services

## Strategy 3: Enhance and strengthen data about gun ownership, safety, and use

- **Objective 1:** Conduct dialogue and education to promote evidence-informed policies related to gun safety ownership and possession
- **Objective 2:** Collect and analyze gun violence perpetrator data to examine patterns of access to firearms





# GOAL 2

## Support Community Engagement with Children, Youth, and Families

It is well documented that starting from a very young age, people's surroundings and experiences shape behaviors. Accordingly, successful violence prevention plans must think about opportunities to support children, youth, and families in many settings—homes, schools, jobs, and other community environments. Furthermore, community partners must employ comprehensive approaches that address many factors that impact healthy youth development and wellbeing, including early education, access to positive programs, family engagement and adult support, and employment opportunities. We also need to bolster coordination across organizations that are promoting healthy families, as early intervention and prevention coordination will better serve families and increase impact. Investing in and creating more opportunities for children, youth, and families to connect to community resources that promote healthy development and engagement can create generational changes and contribute to healthier communities.

### Strategy 1: Promote healthy families and quality early learning to foster culturally responsive, healthy child development

- **Objective 1:** Promote early childhood home visitation and positive parenting programs
- **Objective 2:** Strengthen preschool enrichment with family engagement
- **Objective 3:** Support father-child connectedness, including opportunities for systems-involved fathers
- **Objective 4:** Create more robust family engagement programs for youth involved in the youth justice system
- **Objective 5:** Promote and support programming that implements positive youth development frameworks

## **Strategy 2: Connect children, youth and families at high risk of violence engagement to high-quality community-based programs that promote health and social wellness**

- **Objective 1:** Bolster school-based violence and trauma prevention for staff, students, and families
- **Objective 2:** Provide space and resources to empower young people to become violence prevention advocates and speak out against behaviors that promote violence
- **Objective 3:** Ensure case management, mentorship, supportive services, and peer support specialists are accessible and available for youth and young adults involved in gun violence

## **Strategy 3: Expand intimate partner violence and sexual assault primary prevention programming to address shared risk and protective factors of violence**

- **Objective 1:** Support leadership and empowerment programming for women and girls in schools and neighborhoods
- **Objective 2:** Expand efforts to promote positive gender norms that support the formation of healthy relationships and healthy gender identity, including mobilizing men and boys as allies
- **Objective 3:** Adopt comprehensive school-based sexual violence and teen dating violence prevention policies and practices that also address the needs of LGBTQ youth
- **Objective 4:** Support programs that emphasize whole family engagement in youth gender identity and sexual orientation discussions

## **Strategy 4: Increase employment and workforce development opportunities for youth**

- **Objective 1:** Increase coordination of youth job opportunities and prioritize programs that link higher need youth to subsidized jobs
- **Objective 2:** Develop re-engagement centers for young people ages 14-24 who have been disconnected from school and workforce to support skill development and reconnection to educational and employment opportunities
- **Objective 3:** Work in partnership with employers to increase job opportunities, on-the-job training and retention strategies for youth, with consideration of youth from undocumented families and youth formerly engaged in the justice system
- **Objective 4:** Work with schools and youth programs to support youth connections to skilled trade career pathways





# GOAL 3

## Foster Strong Neighborhoods

We've long known that place matters, and neighborhoods are an especially important context for supporting individual and community wellbeing. Building and sustaining strong neighborhoods is an essential component of public safety and preventing violence in Dane County. This goal seeks to support and increase opportunities to empower communities by bringing together residents and community stakeholders—including government—to develop trust and working relationships, and support resident leadership in developing solutions to address systemic challenges in neighborhoods. Research shows that insufficient opportunities and resources also create conditions that promote violence. Thus, in order to deter violence we have to strengthen existing resources to support residents in fostering a sense of safety and trust among their neighbors. Collectively, we aim to build on existing community assets and create safe, inclusive environments where all residents can thrive.

### Strategy 1: Improve government-community relationships

- **Objective 1:** Provide increased opportunities for government-community partnerships and trust-building
- **Objective 2:** Increase knowledge, awareness, leadership and power provided through civic engagement and collective action among residents in neighborhoods
- **Objective 3:** Sustain and expand existing community problem solving efforts, with the goal of building and strengthening relationships, trust, legitimacy, and coordination with community leaders throughout the community
- **Objective 4:** Support opportunities to conduct community health needs assessments with neighborhood residents to determine community priorities

## Strategy 2: Build resident leadership and collective action to improve community well-being

- **Objective 1:** Build capacity for residents to lead organizations to address the needs of their neighborhoods
- **Objective 2:** Work with resident leaders to improve environmental factors that contribute to or protect against violence (e.g. dimly lit areas, abandoned buildings, increased green space, etc.)

## Strategy 3: Connect residents to resources to improve their quality of life

- **Objective 1:** Identify and increase resources—including support for community organizers and leaders—to respond and connect people to services when residents feel unsafe in their neighborhoods
- **Objective 2:** Invest in and promote programs to increase safe and affordable housing
- **Objective 3:** Connect residents to community resources to meet basic needs such as food, housing, medical and other services/resources
- **Objective 4:** Strengthen neighborhood centers as resources for families

## Strategy 4: Strengthen relationships between police and community

- **Objective 1:** Create more venues and opportunities for police and community to engage and build trust
- **Objective 2:** Implement ongoing, anti-racism training for police
- **Objective 3:** Work to implement public safety reforms that increase public trust, safety, and community investment

## Strategy 5: Improve cultural responsiveness and support cultural identity of community members

- **Objective 1:** Promote connections to faith and/or sense of cultural identity to advance individual and community connection and resilience
- **Objective 2:** Promote culturally rooted resilience and social development for chronic and repeat juvenile offenders
- **Objective 3:** Support and encourage service agencies to adopt culturally responsive evaluation and treatment planning



INTERVENTION &  
HEALING

# GOAL 4

## Bolster and Increase Intervention and Continuous Healing for Those Affected by Violence

While preventing violence from happening is always the ultimate goal, we must also prepare and bolster our ability to respond to incidents of violence and its aftermath. Violence in our communities is not simply an issue for police and courts to solve. Rather, it must be addressed more holistically by many community stakeholders, including but not limited to community organizations, government agencies and residents. Together we will strengthen intervention systems and services, and—as foundational elements of these efforts—build on and expand community social networks, improve relationships and trust, and support practices like trauma informed care to improve the quality of care and service.

The aftermath of violence includes not just intervention, but healing from trauma—both as individuals and as communities—and often, the navigation of many services and systems, including the justice systems. Healing is a critical component of violence prevention, and requires drawing from and cultivating community strengths, as well as engaging culturally responsive services and creating strong coordination across services. Healing can be furthered through the support and expansion of restorative programming and courts for perpetrators and victims of violence. Finally, to address more collective community healing, we must examine and address the risk factors, systems, and policies that contribute to the overrepresentation and repeat engagement of particular populations within the criminal justice systems, and increase utilization of effective alternatives to incarceration.

### Strategy 1: Create and support systems that respond to individual and community needs prior to, during, and following violence incidents

- **Objective 1:** Convene the Community Safety Intervention Team to predict and respond to instances of shots fired and gun violence and work to expand and adapt CSIT model to encompass Dane County
- **Objective 2:** Support and promote individual capacity for conflict prevention and de-escalation by proactively utilizing the Community Safety Worker Pilot, community safety-direct outreach programs, and additional existing violence prevention intervention infrastructure
- **Objective 3:** Strengthen referral systems and coordination among agencies that provide support and services to perpetrators, victims and those at risk of perpetration or victimization of violence

## Strategy 2: Explore group violence intervention models

- **Objective 1:** Develop and/or adapt risk assessments to be utilized by CSIT and other groups to identify individuals and groups at greatest risk for participation in gun violence
- **Objective 2:** Convene information and strategy sessions with identified partners to discuss adaptation and adoption of group violence intervention models

## Strategy 3: Promote culturally responsive trauma-informed care, healing, behavioral health, and trauma reduction services

- **Objective 1:** Provide trauma screening, reduction and healing-informed care support to residents, professionals who address violence, and others experiencing primary and secondary trauma
- **Objective 2:** Increase coordination of mental health, counseling, trauma and resiliency services across agencies to support those who have been exposed to multiple forms of violence, with support for family engagement throughout the process
- **Objective 3:** Build a stronger network of trauma-informed service providers across multiple settings in the community, including hospitals, schools, and businesses to better assist victims and witnesses to violence with service navigation and any immediate safety planning needs
- **Objective 4:** Increase the availability of trauma informed care, implicit bias, and anti-racism training for service providers
- **Objective 5:** Work to address service access and coordination barriers stemming from homeless or housing insecure status of participants

## Strategy 4: Strengthen treatment and healing services for survivors of sexual assault, intimate partner violence and violence within home environments

- **Objective 1:** Expand awareness and access to survivor-centered services including community based, school-based and in home services
- **Objective 2:** Advance policies that enhance safety of survivors before, during and after legal proceedings
- **Objective 3:** Increase affordability and access to treatment services for perpetrators of intimate partner violence, sexual assault, and violence within home settings, across cultures and languages with bilingual and bicultural counselors
- **Objective 4:** Create streamlined referral systems to services, crisis intervention, and treatment to address trauma experienced by survivors



## Strategy 5: Identify and support people at risk for self-harm and suicide

- **Objective 1:** Train community members to identify people at risk for suicide/self-harm and respond effectively by facilitating access to support services
- **Objective 2:** Support treatment to prevent suicide attempts such as discharge information sessions and active follow-up approaches to prevent suicide
- **Objective 3:** Support health care systems with adopting suicide screening and prevention protocols (Zero Suicide Initiative)
- **Objective 4:** Support the expansion of emergency mental health services
- **Objective 5:** Connect self-harm and suicide work to other violence domains by supporting primary violence prevention work and addressing shared risk and protective factors

## Strategy 6: Strengthen and increase restorative justice in courts, child welfare institutions, schools, and community settings through better coordination between organizations

- **Objective 1:** Support victim reparation work for harmed individuals in the identified settings
- **Objective 2:** Engage families and the greater community in reconciliation work
- **Objective 3:** Support offender responsibility work within the identified settings

## Strategy 7: Reduce disproportionate arrests and incarceration

- **Objective 1:** Reduce the recidivism rate for people with previous contact with City of Madison/Dane County systems
- **Objective 2:** Create alternatives to incarceration for people with mental health illness and substance use disorders
- **Objective 3:** Identify and address factors that are contributing to the overrepresentation of black and latinx populations in the youth and criminal justice systems
- **Objective 4:** Increase deferment programs and alternative sentencing options within courts and expand capacity of existing problem-solving courts to provide therapeutic resources and services for youth and adults involved in the criminal justice system, juvenile justice system, and child welfare system



# GOAL 5

## Strengthen Community Capacity, Collaboration, and Coordination of Violence Prevention Efforts

Improving the coordination of violence prevention efforts within Madison and Dane County will be critical to the successful implementation of this Roadmap. Undoubtedly, there are already *great examples* of effective multi-sector and community-led violence prevention collaborations in Madison and Dane County. Public Health Madison & Dane County will build on and expand opportunities for increased, ongoing collaboration and coordination by reconvening a Madison Dane County Violence Prevention Coalition, supporting funding opportunities driven by data and coalition-determined priorities, offering connections to capacity building opportunities, sharing violence prevention data and Roadmap status communications, and providing overarching coordination support of the Roadmap execution and evaluation. Throughout the 5 years, individual organization and existing collaborations will continue, but our leadership roles in data and Roadmap coordination will support increased coordination towards *collective* Madison and Dane County violence prevention action.

### Strategy 1: Support opportunities for violence prevention capacity building and increased collaboration across organizations and sectors

- **Objective 1:** Reconvene and sustain a Madison Dane County Violence Prevention (MDCVP) Coalition with strong community representation to provide leadership, coordination, and oversight to the implementation of Madison's Dane County's Violence Prevention Roadmap
- **Objective 2:** Monitor local, regional, and national violence prevention research and best practices and support ongoing opportunities for partner training and capacity-building in violence prevention best practices
- **Objective 3:** Identify and collaborate on strategies to support violence prevention policy development, advocacy, and implementation

## Strategy 2: Create mechanisms for impactful, sustainable funding

- **Objective 1:** Develop and maintain funding opportunities to support the Roadmap implementation and evaluation over the course of 5 years
- **Objective 2:** Work to establish funding opportunities for community organizations to serve in primary and leadership roles to implement activities within the plan
- **Objective 3:** Align funding with evidence-based strategies and practices that reduce violence
- **Objective 4:** Ensure mutual support and funding alignment for violence prevention initiatives from Madison and Dane County violence prevention leadership

## Strategy 3: Increase coordination of violence prevention efforts in Madison and Dane County

- **Objective 1:** Develop, implement and maintain a comprehensive Madison Dane County violence prevention plan
- **Objective 2:** Establish MDCVP coalition workgroups to support a collaborative operationalization of plan goals, strategies, objectives and activities
- **Objective 3:** Develop and implement MDCVP coalition branded and culturally responsive communications to keep partners and the public informed on violence trends
- **Objective 4:** Engage the media to extend violence prevention communications reach

## Strategy 4: Increase violence prevention evaluation capacity and accountability

- **Objective 1:** Determine evaluation needs for existing Madison and Dane County supported violence reduction initiatives
- **Objective 2:** Establish an evaluation plan and funding for the Roadmap
- **Objective 3:** Develop a communications plan to demonstrate Roadmap status and progress

# CONCLUSION

It is well understood that violence risk factors are multifaceted and complex. Accordingly, public health approaches to violence prevention emphasize multifaceted, comprehensive strategies that: 1) Utilize diverse sources of data to understand violence risk and protective factors; 2) Engage community stakeholders; 3) Target both immediate and underlying drivers of violence; 4) Provide opportunities to build resilience and intervene prior, during, and after violence occurs; and 5) Support coordination across sectors, existing initiatives, and different domains of violence. These foundational elements of a public health approach to violence have been incorporated throughout the Roadmap and, we hope, will collectively support Madison and Dane County in becoming safer, healthier communities over the next five years and beyond.

While a plan is an important component of violence prevention, as previously stated, the implementation of this plan will require investment and support from many sectors and community stakeholders. In addition, 2020 was an unprecedented and trying year, and the ongoing COVID 19 pandemic has—and will continue to have—long-term impacts on our health, economy, and social fabric. Undoubtedly, the work ahead will be challenging and we anticipate bumps and setbacks, but we will continuously engage community expertise, monitor evolutions in violence prevention best practice, and build on lessons learned as we move forward.

So what's next? Over the next five years, we hope that this Roadmap will serve as a guiding document for violence prevention efforts throughout Madison and Dane County, with the flexibility to evolve as needed. More immediate next steps include: 1) Reconvening the Madison Dane County Violence Prevention (MDCVP) Coalition to ground partners in the Roadmap and establish work groups to begin action planning around Roadmap goals, strategies, and objectives; 2) Working with data partners to establish high-level evaluation metrics to track Roadmap success, and engaging coalition and community partners in the creation of more tailored evaluation metrics to assess progress of specific Roadmap objectives and activities, and; 3) Sharing the 2021 funding landscape for violence prevention efforts in Madison and Dane County as well as hopes for future funding.

Thank you to the many community stakeholders that contributed to the development of this plan. Your insights, experience, and dedication are deeply appreciated. And thank you to the violence prevention pioneers in other cities and counties who paved the way to utilizing a public health approach to violence, and continue to share their strengths, struggles, and lessons learned. We look forward to joining you as we make this plan a reality.



# APPENDIX 1:

## Glossary

- **Adverse Childhood Experiences (ACEs):** ACEs constitute traumatic events occurring before age 18. ACEs include all types of abuse and neglect as well as parental mental illness, substance use, divorce, incarceration, and domestic violence. A landmark study in the 1990s found a significant relationship between the number of ACEs a person experiences and a variety of negative outcomes in adulthood, including poor physical and mental health, substance abuse, and increased engagement in risky behaviors. The more ACEs experienced, the greater the risk for these outcomes.  
[www.childwelfare.gov/topics/preventing/preventionmonth/resources/ace/](http://www.childwelfare.gov/topics/preventing/preventionmonth/resources/ace/)
- **Cardiff Model:** This model provides a way for communities to gain a clearer picture about where violence is occurring by combining and mapping both hospital and police violence data. More than just an approach to understand violence, the Cardiff Model provides a straightforward framework for hospitals, law enforcement agencies, public health agencies, community groups, and others interested in violence prevention to work together and develop collaborative violence prevention strategies.  
[cdc.gov/violenceprevention/publichealthissue/fundedprograms/cardiffmodel/whatis.html](http://cdc.gov/violenceprevention/publichealthissue/fundedprograms/cardiffmodel/whatis.html)
- **Community Safety Intervention Team (CSIT):** This team is just one part of the overall violence prevention plan. CSIT is responsive to incidents of violence and works to prevent further violence. It is composed of representatives from government agencies, police, community organizations and schools. The group coordinates a collaborative emergency response to critical incidents that can potentially threaten the health, safety, and security of not only those directly involved, but the community at large. The group utilizes lines of communication within CSIT to ensure that the response to a critical incident serves the immediate needs of the community.
- **Community Safety Worker (CSW):** The Community Safety Worker Pilot Project will examine the potential value of street level, neighborhood based social service professionals, who will be responsible for helping to facilitate public safety. The CSWs will work towards neighborhood well-being by collaborating with residents, police, non-profits, social services and businesses to address community public safety concerns. This role will enhance conflict resolution capacity at the neighborhood level and will assist in deflecting individuals away from the criminal justice system and towards social services and community support systems.

- **Data Dashboard:** A data dashboard is a data management tool that supports the tracking, analysis and visual display of key metrics and data points to monitor data trends over time.
- **Health and Racial Equity:** Health equity means that everyone has a fair and just opportunity to attain their full health potential and that no one is disadvantaged, excluded, or dismissed from achieving this potential. There is a focus on how structural drivers of inequity—such as racism, sexism, and income inequality—impact communities. Racial justice is a primary focus in health equity work because racism, discrimination, and other forms of racial injustice have resulted in dramatic health and safety disparities for communities of color.  
<https://www.preventioninstitute.org/focus-areas/health-equity-and-racial-justice>
- **Implicit Bias:** Thoughts and feelings are “implicit” if we are unaware of them or are mistaken about their nature. Bias occurs when we have a preference for (or aversion to) a person or group of people (in contrast to neutrality). Thus, we use the term “implicit bias” to describe attitudes towards people or associated stereotypes that often occur without our conscious knowledge. <https://perception.org/research/implicit-bias/>
- **Intimate Partner Violence:** Sometimes referred to as domestic violence, dating abuse, or relationship abuse. This is a pattern of behaviors used by one partner to maintain power and control over another partner in an intimate relationship. That includes behaviors that physically harm, intimidate, manipulate or control a partner, or otherwise force them to behave in ways they don’t want to, including through physical violence, threats, emotional abuse, or financial control.  
<https://www.thehotline.org/identify-abuse/understand-relationship-abuse/>
- **Protective Factors:** Characteristics associated with a lower likelihood of problem outcomes (for example, engagement in violence) and/or characteristics that reduce the negative impact of a risk factor (for example, the presence of a supportive adult in a child’s life).  
<https://youth.gov/youth-topics/youth-mental-health/risk-and-protective-factors-youth>
- **Public Health Madison & Dane County:** Madison and Dane County’s local health department, with a staff of more than 150 people, serving close to 600,000 people in more than 60 cities, villages, and towns across Dane County. We work to enhance, protect, and promote the health of the environment and the well-being of all people in Madison and Dane County.  
<https://publichealthmdc.com/about>

- **Recidivism Rate:** Recidivism refers to a person's relapse into criminal behavior, often after the person receives sanctions or undergoes intervention for a previous crime. A measurement of the rate at which offenders commit other crimes, either by arrest or conviction baselines, after being released from incarceration.  
<https://nij.ojp.gov/topics/corrections/recidivism>
- **Restorative Justice:** A theory of justice that emphasizes repairing the harm caused by criminal behavior through cooperative processes that allow willing stakeholders to meet and actively work through the events and trauma. However, some alternative restorative justice approaches are available when that is impossible. Restorative justice has proven capable of contributing to the transformation of people, relationships and communities.
- **Risk Assessment:** Violence risk assessments are evidence-based procedures that help us identify historical and current risk factors as well as protective factors for engagement in violence. A violence risk assessment helps identify situations where an individual is more likely to become violent and situations where their risk of violence might be lower.  
<http://onlinedigeditions.com/article/The+Evolution+Of+Violence+Risk+Assessment/1844056/230372/article.html>
- **Risk Factors:** Characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of problem outcomes (examples: mental illness, abusive caretakers, food insecurity).  
<https://youth.gov/youth-topics/youth-mental-health/risk-and-protective-factors-youth>
- **Risk and Protective Factors Together:** The presence or absence of risk and protective factors, as well as different combinations of protective and risk factors contribute to the mental health of youth. Identifying protective and risk factors in youth may inform effective prevention and intervention strategies.  
<https://youth.gov/youth-topics/youth-mental-health/risk-and-protective-factors-youth>
- **Sexual Violence:** Sexual violence involves force or manipulations of unwanted sexual activity without consent.  
[www.nsvrc.org/sites/default/files/Publications\\_NSVRC\\_Factsheet\\_What-is-sexual-violence\\_1.pdf](http://www.nsvrc.org/sites/default/files/Publications_NSVRC_Factsheet_What-is-sexual-violence_1.pdf)
- **Social Justice:** Social institutions, when justly organized, provide us with access to what is good for the person, both individually and in our associations with others. Social justice also imposes on each of us a personal responsibility to collaborate with others to design and continually perfect our institutions as tools for personal and social development.  
<https://www.cesj.org/learn/definitions/defining-economic-justice-and-social-justice/>

- **Trauma Informed Care:** Trauma informed care (TIC) acknowledges that organizations need to have a complete picture of a person's life situation — past and present — in order to provide effective services and a healing orientation. TIC emphasizes the need to recognize the widespread impact of trauma and understand different paths for recovery, know the signs and symptoms, and integrate knowledge about trauma into policies, procedures, and practices, to actively avoid re-traumatization.  
<https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care/>
- **Violence in Home Environments:** Violence that occurs within home environments, including but not limited to domestic violence, intimate partner violence, and child abuse. <https://www.unicef.org/media/files/BehindClosedDoors.pdf>
- **Zero Suicide Initiative:** Zero Suicide is an aspirational goal designed to catalyze transformational change, a suicide care model with specific practices for health systems to employ, and a movement to make health care settings safer and more compassionate for people with suicidal ideation  
<https://zerosuicide.edc.org/about/mission>



# APPENDIX 2:

## Acknowledgements

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# APPENDIX 3:

## References

Centers for Disease Control and Prevention. (2014). **Connecting the Dots: An Overview of the Links among Multiple Forms of Violence**

Centers for Disease Control and Prevention. (2016). **Youth Risk Behavior Surveillance System.**

Chandler, A. **Violence Trends, Patterns and Consequences for Black Males in America: A Call to Action.** Cities United.

City of New Orleans. (April 2016). **NOLA for Life: Comprehensive Murder Reduction Strategy.**

City of Philadelphia. (January 2019). **The Philadelphia Roadmap to Safer Communities.**

City of Milwaukee. (2016). **Milwaukee Blueprint for Peace.**

MCW Injury Research Center. (2016). **The Cardiff Model: Empowering Communities to Address Violence through shared Data and Multisector Partnership.**

Wisconsin Department of Children and Families. (2016). **Wisconsin's Community-Based Juvenile Justice System: Summary of Input Gathered and Visions for the Future of Youth Justice.** Bureau of Youth Services.

Wisconsin Department of Children and Families. (2017). **Youth Justice (YJ) Vision and Strategic Plan.**