The logo is contained within a white rounded rectangle with a black border. It features the number '414' in a large, orange, distressed font at the top. Below it, the word 'LIFE' is written in a large, black, distressed font. At the bottom of the rectangle is a silhouette of a city skyline with a prominent orange arch bridge and utility poles.

414

LIFE

414LIFE: Evaluation and Program Update

Medical College of Wisconsin
Comprehensive Injury Center
Division of Data Analytics & Informatics
414LIFE



from ComStat and non-fatal shootings (COMPASS) and non-fatal shootings (COMPASS) and non-fatal shootings (COMPASS) retrieved from the ArcMap database. Using ArcMap 10.4.1, data stratified by City of Milwaukee neighborhoods each year and then aggregated.

The total number of assaults, nonfatal shootings, and homicides was considered as was the change over time in assaults, nonfatal shootings, and homicides (e.g. increase or decrease in assaults/nonfatal shootings/homicides from 2014 to 2016), to generate an initial list of neighborhoods. The MHDVP took this list and cross-referenced it with considerations of current capacity that was gathered through Steering Committee member interviews and community input. As a result, the following 10 neighborhoods have been prioritized for Blueprint implementation:

1	OLD NORTH MILWAUKEE	6	JANING
2	HARBORVIEW	7	SHEPHERD PARK
3	FRANKLIN HEIGHTS	8	HISTORIC MITCHELL
4	SILVER SPRING	9	LINCOLN VILLAGE
5	NORTH DIVISION	10	MIDTOWN

56

WEAR ORANGE

RESEARCHING INDICATORS

Indicators that will be tracked across all priority neighborhoods:

- Number of nonfatal shootings in priority neighborhoods
- Number of homicides in priority neighborhoods
- Number of retaliatory homicides in priority neighborhoods
- Employment rate in priority neighborhoods
- Participation in school and summer programs

GOAL #1: STOP THE SHOOTING

We must prevent gun violence, including homicides and non-fatal shootings, through strategic, timely, and coordinated efforts among residents and first responders. Timely data regarding the factors and location of violence is essential to identify hotspots of violent activity and inform prevention efforts.

In the city and inform prevention efforts, focused interventions must be implemented pre-incident, during an incident, and immediately following an incident to reduce the likelihood of continued violence. Individual and community support post-incident is critical to reduce the impact of violence among those directly impacted through physical or emotional trauma. These interventions are critical for preventing retaliatory violence, decreasing the likelihood of future incidents. Illegal gun possession increases the likelihood



Inspiration for 414LIFE

- 70% Increase in homicides in 2015
- Expansion of the City of Milwaukee's OVP in 2016
- Launch of **Blueprint for Peace** 2017
- 414LIFE Pilot launched by city's Office of Violence Prevention in December 2018
- Hospital partnership with Froedtert and Ascension established May 2019
- MCW - CIC Division of Violence Prevention selected as implementation partner for 414 LIFE

Program Approach

414LIFE

*Milwaukee's
Community- and Hospital-Based
Violence Intervention Program*



The 414LIFE Program aims to prevent and interrupt the transmission of violence through a three-prong approach:

1

Identification and detection

2

Targeted intervention

3

*Changing community-wide
attitudes, behavior, and norms
related to gun violence.*



Frontline Staff

Credible
Messengers

Lived Experience

Available 24/7

Trained professionals

- Cure Violence
- VIRT - Violence Interruption and Reduction
- HVIP - Hospital Based Violence Interruption
- Stop The Bleed Program
- Academy for Transformational Change
- Professional Community Intervention Institute
- NARCAN Training
- Mental Health First Aid
- Certified Trainers for the Academy of Transformational *Change - A program to improve professionalism, teamwork, and outcomes of Credible Messengers and Violence Prevention Staff.*

Violence Interruption Model

Using the same health strategies used to fight diseases such as tuberculosis, cholera and AIDS.

INTERRUPT TRANSMISSION

Prevent Retaliations

Mediate Conflicts

Keep Conflicts 'Cool'

REDUCE HIGHEST RISK

Assess Highest Risk

Change Behaviors

Provide Treatment

CHANGE COMMUNITY NORMS

Respond to Shootings

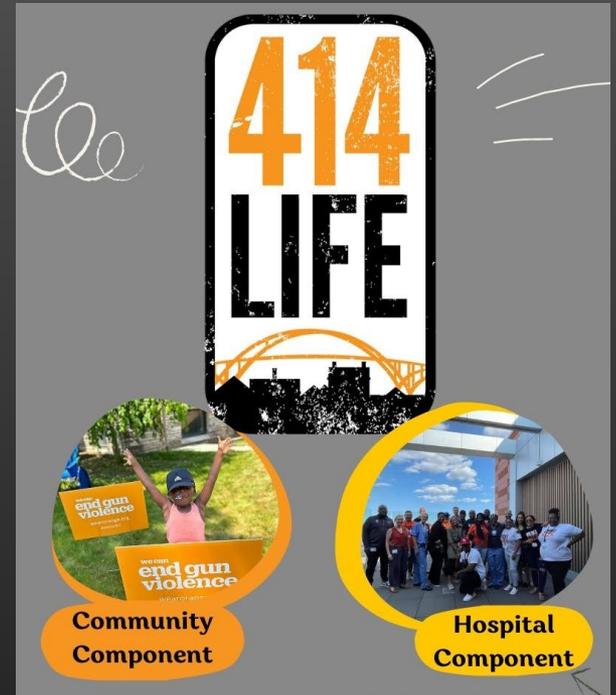
Organize Community

Spread Positive Norms



Program Structure

- Focus on individuals ages 15-35 at highest risk for gun violence victimization
- The program is comprised of two main components
- *Community component*
 - Community Outreach
 - Violence Interruptions/Mediations
 - Participant Case Management
 - School Restoration of Consciousness (ROC) Workshops
- *Hospital component*
 - In-hospital violence interruptions
 - Ensuring culturally sensitive care
 - Addressing recovery needs
- *Referral process*
 - Hospital to Community Component
 - Community referrals to 414LIFE



Oct 2018	Start Date	May 2019
Violence Interrupter Outreach Worker	Team	Hospital Responder
Monitor and intervene ongoing or potential conflicts in the community Establish relationships with high-risk individuals to help address their risk and needs	Goals	Mediate to prevent retaliation or recidivism Connect patients with resources for immediate needs
Cure Violence (CV)	Model	Hospital-Based Violence Interruption Program (HVIP)



Phase 1 Evaluation



Community Component

October 2018 – December
2022



Hospital Component

May 2019 – December
2022

Data Sources

Inputs →
Stakeholder
Interviews

Outputs →
Referral pages,
EMR

Outcomes →
Trauma Registry,
REDCap for case
management

Data Analyses

Inputs → Thematic
Analysis

Outputs →
Descriptive
Statistics,
Geospatial mapping

Outcomes →
Descriptive
statistics & Historic
Match Control

Timeline

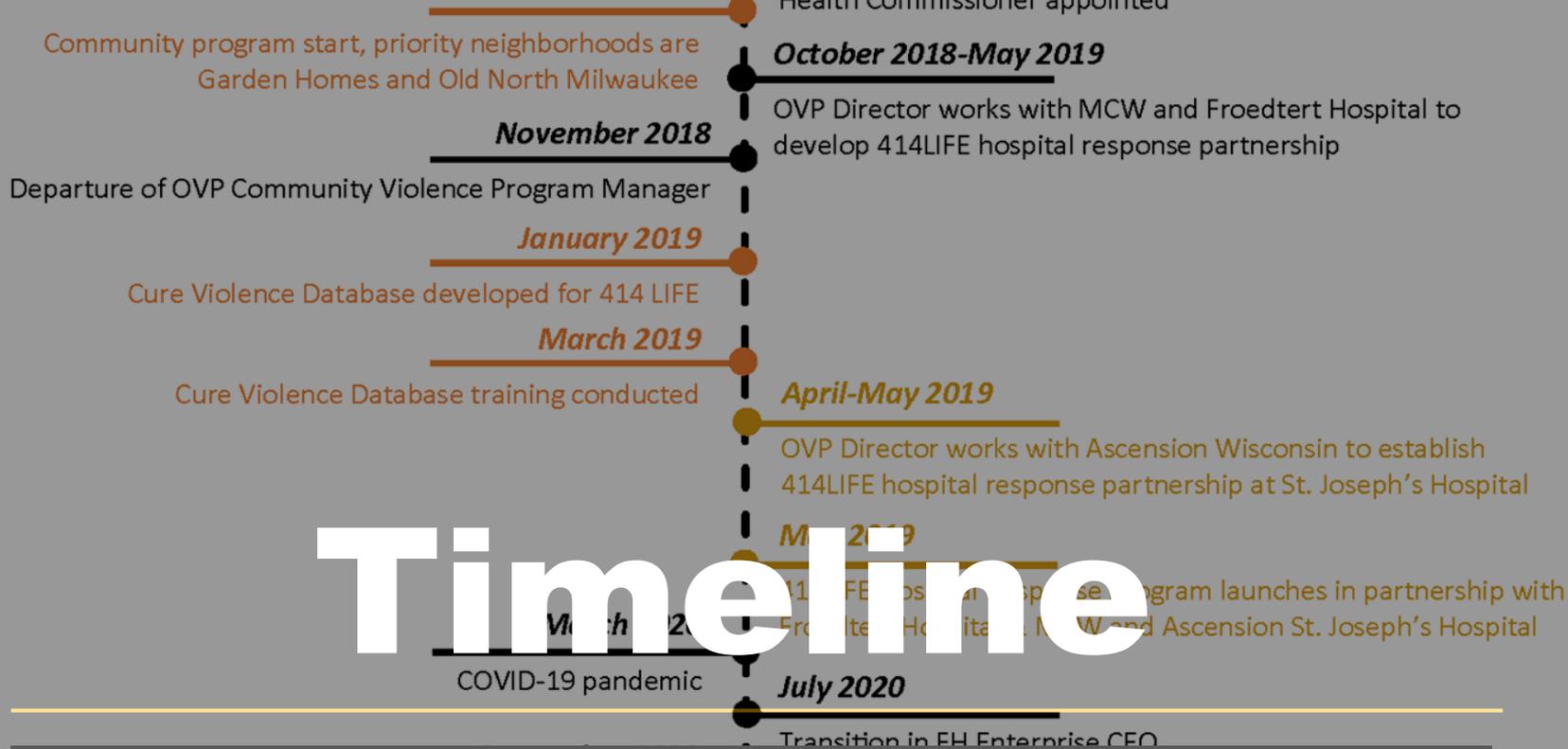


Table 1. 414LIFE Priority Neighborhoods and Dates of Operation

Neighborhood	Dates of Operation
Garden Homes	October 2018 – January 2022
Old North Milwaukee	October 2018 – Present
Historic Mitchell Street	July 2021 – March 2022
Walker's Point	January 2022 – Present

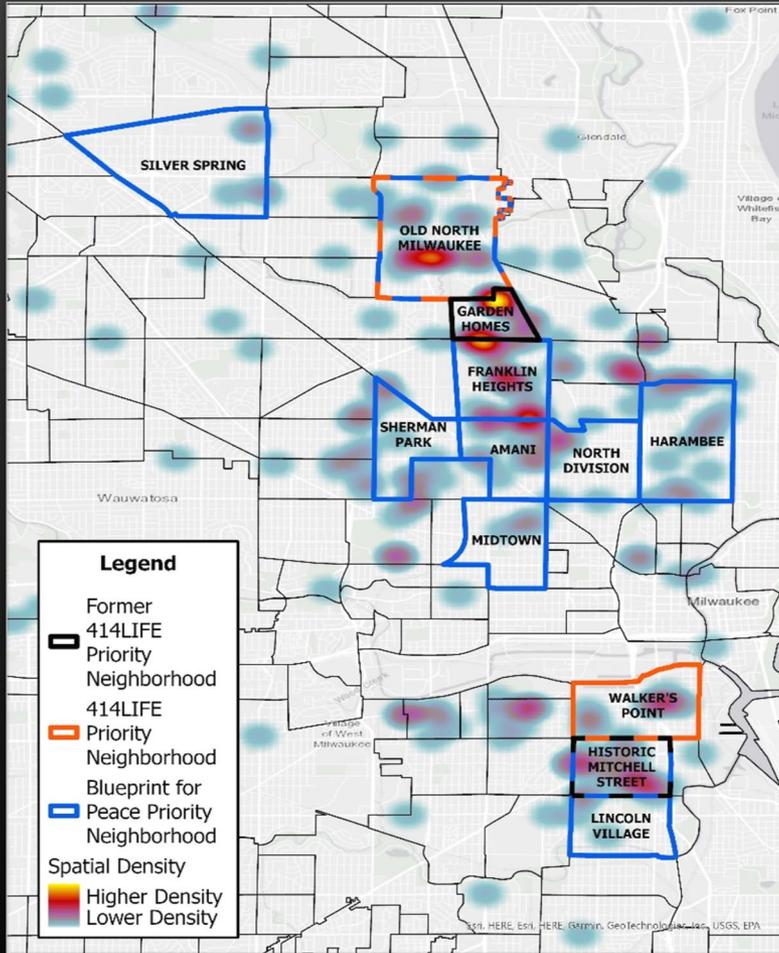
Community Component Staffing

Staff Positions at Program Start, Transition to MCW, and End of Phase 1 Evaluation

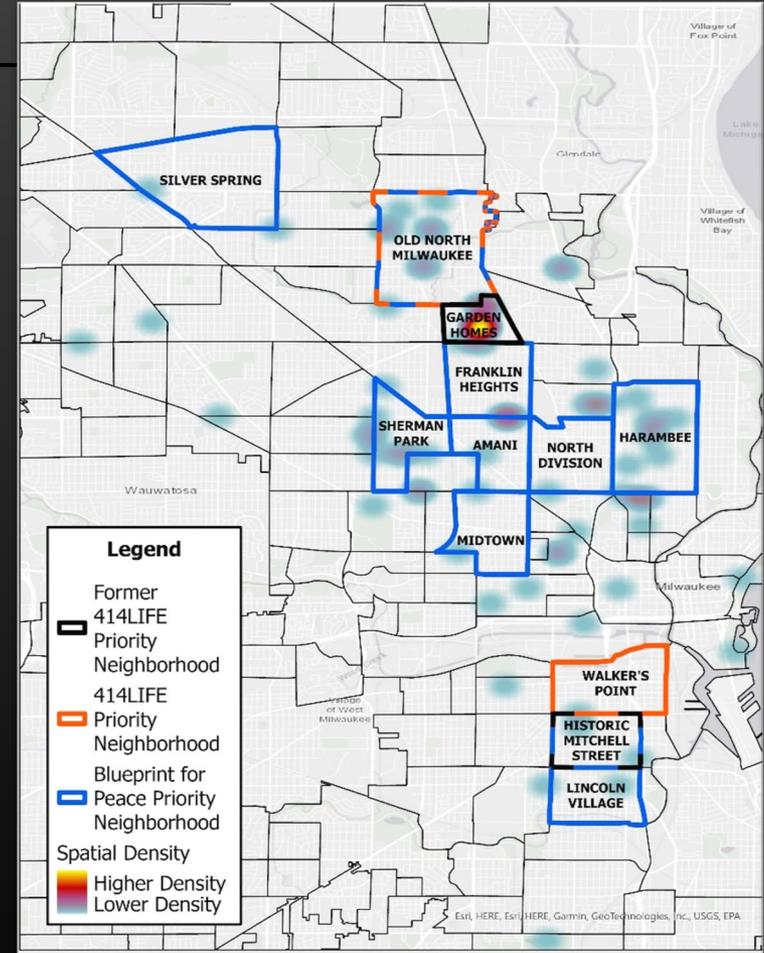
Position Title	Program Start (October 2018)	UGH to MCW Transition (July 2021)	End of Phase 1 Evaluation (December 2022)
OW (FT)	2	4	4
OW (PT)	1	--	--
VI (FT)	3	3	3
Outreach coordinator	1	1	0
OW/VI supervisors	2	2	2
Community program coordinator	--	1	1
Community response and engagement worker (PT)	1	--	--
Program Administrator	--	1	1
Program Operations Manager	--	--	1
Program Director	1	1	1
Total Positions	11	13	13

Note. OW = Outreach Worker, VI = Violence Interrupter, PT = Part Time, FT = Full Time.

Activities



Density of **Community Mediations**,
October 2018 – December 2022



Density of **Community Activities**,
October 2018 – December 2022

Activities

133 participating community members recorded, primarily male, Black, with average age of 26 years.

414LIFE Community Component Outputs			
Output	Type	Characteristic	Total
Participants	Total	# of Participants	133
	Age	Average	26.3 years
		Range	11 – 54 years
		Within target age range	107 (80.4%)
	Gender	% Male	95
	Race	% Black or African American	87
		% Latinx	8
		% Multiracial	<5
		% Non-Hispanic White	<5

Activities

Total of **110 events**,
with a focus on:

- Community events
- Building relationships with community partners
- Community violence awareness

414LIFE Community Component Outputs			
Output	Type	Characteristic	Total
Community Activities	Total	# Events	110
		# Events in 414LIFE Priority Area	26 (25%)
		# Events in Blueprint Priority Area	47 (46%)
	Event type (#)	Building relationships with community partners	24
		Community violence awareness	12
		Norm change	2
		Providing resources	4
		Raise awareness of Cure Violence Program	6
		Community Event	48
		Presentation/Public Education	5
Other	9		

Activities

A total of **257 community mediations** recorded, with most (**71%**) **resolved or conditionally resolved**

414LIFE Community Component Outputs			
Output	Type	Characteristic	Total
Mediations	Total	# Mediations	257
		# Mediations in 414LIFE Priority Area	47 (20%)
		# Mediations in Blueprint Priority Area	95 (44%)
	Outcome	# Resolved	133 (52%)
		# Conditional	48 (19%)
		# Unresolved	58 (23%)
		# Unknown	18 (7%)

Stories

““

He successfully is maintaining 2 jobs, one is at a meal program, and he owns an automotive business. No current run in with the system, and just completed his federal paper. He is also in stable safe housing.””

“Participant has removed his self from toxic relationship. He plans to start non profit for athletes.”

“Today [Participant] contacted me to let me know she got a job at [place omitted] and so did her best friend. [Participant] displayed drive and motivation when it came to finding a job but consistently either going to fill out apps or doing follow up calls to set interviews if possible. I did congratulate her on this.”

““

This participant was struggling in high school but made a huge shift. **made honors at the end of the school year and is now at [university]** and is doing well.””

Participating Milwaukee Public Schools

Table 5. ROC Workshop Attendee Characteristics from All Sessions

School	Count	Age	Grade
	Number (%)	(Average)	(Average)
Assata High School	7 (3.5%)	16.4 years	11
Howard Fuller Collegiate Academy	41 (20.6%)	15.5 years	10
Marshall High School	34 (17.1%)	14.9 years	9
Mesmer High School	7 (3.5%)	15.4 years	9
North Division High School	18 (9.1%)	14.9 years	9
Nova High School	23 (11.6%)	16.2 years	10
Obama High School	12 (6.0%)	14.8 years	9
Vincent High School	57 (28.6%)	14.8 years	9
Total/Overall	199 (100.0%)	15.2 years	9th grade

Outcomes

93.5% of students that participated in the ROC workshops felt a little better, somewhat better or much better prepared to *avoid or prevent* violence.

Table 6. The Extent that School ROC Workshop Participants Agree or Disagree with Statements on Violence After Participation (n = 123)

<i>As a result of being part of these sessions...</i>	Strongly Agree (%)	Agree (%)	Not Sure (%)	Disagree (%)	Strongly Disagree (%)
I better understand violence as a disease.	23.0	38.5	31.2	3.3	4.1
I have a better understanding of the conditions that promote violence.	23.1	52.9	17.4	5.0	1.7
I can avoid getting into fights or violent confrontations.	23.6	35.0	29.3	6.5	5.7
I can do something different than what all my friends are doing, if it's what I think is right.	50.4	32.5	8.9	4.1	4.1
I can use options and methods to resolve a conflict other than violence.	23.8	45.9	25.4	2.5	2.5
I feel I can be a peaceful person.	49.6	33.3	9.8	5.7	1.6
I feel that I can make a non-violent choice even if I feel disrespected.	18.7	30.1	36.6	9.8	4.9
I can be a positive influence and/or a role model.	48.4	36.9	9.0	1.6	4.1

Which part of the workshop sessions made the biggest impact on the student?

“

*I feel when we talk and have deep convos about stuff because **I learn and see and hear stuff from other people's point of view.***

”

“

The talking part of the sessions made me a better person somewhat because I haven't had that many fights since I've started

“I don't want to kill my ex anymore”

*The workshop help me a lot **I use to be violence and robbery people but now I stop because workshop.***

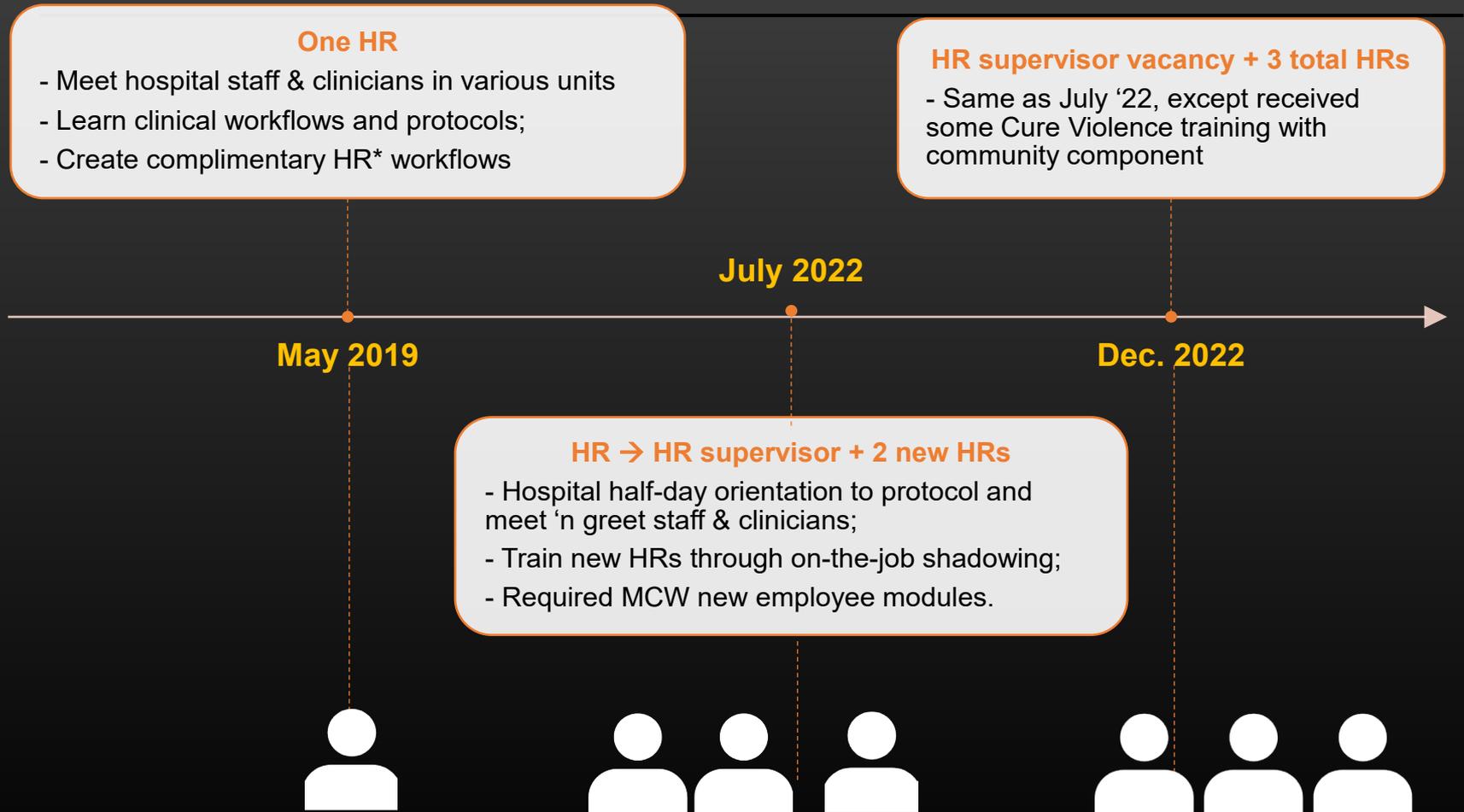
”

“

now I feel like there are people that actually care about how I'm feeling.

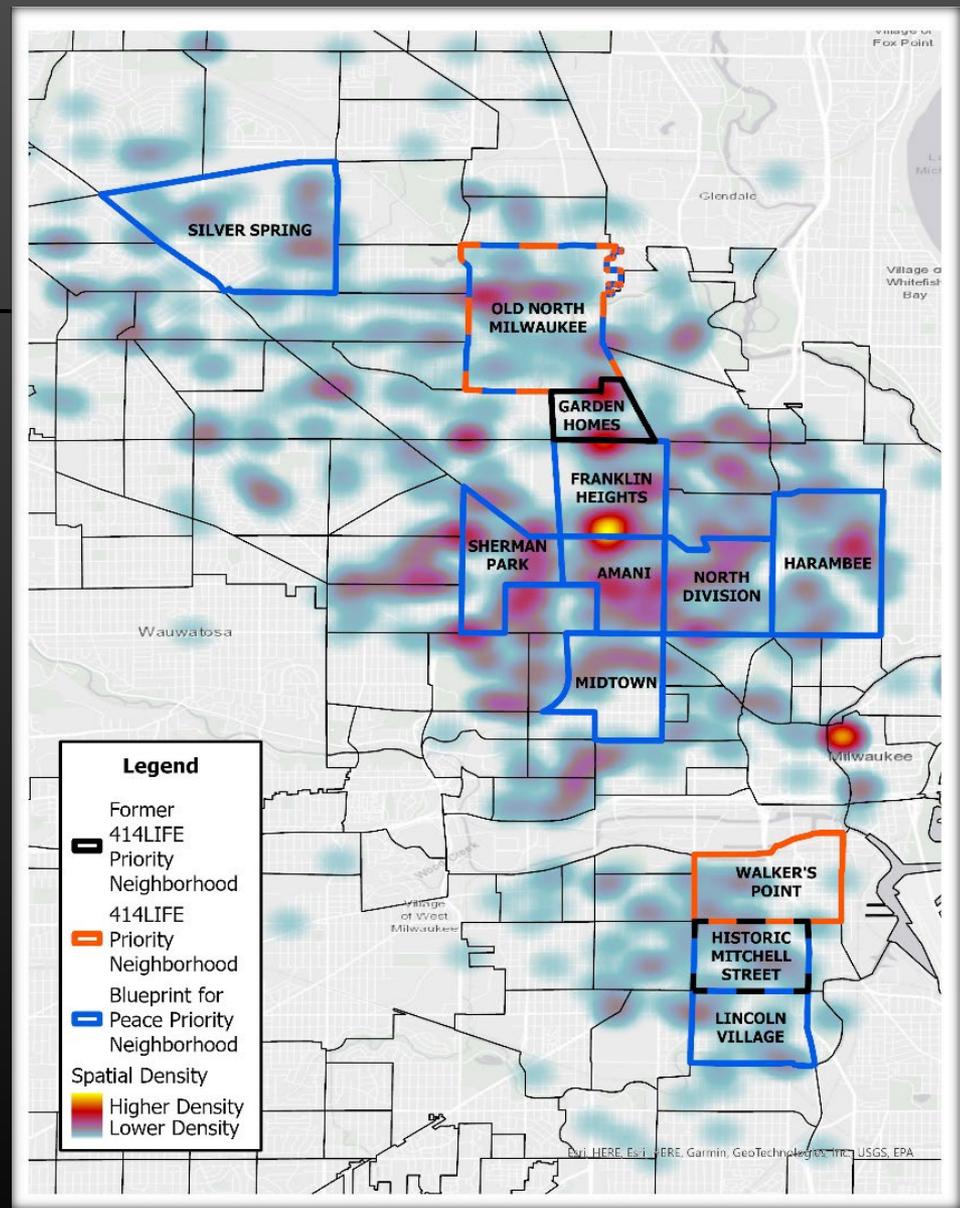
”

Hospital Component Staffing



Injured Community Members

- **Age:** 15 – 88 years, average of 30.2 years
- **Race:** 84.8% Black / African American
- **Sex:** 81.1% male



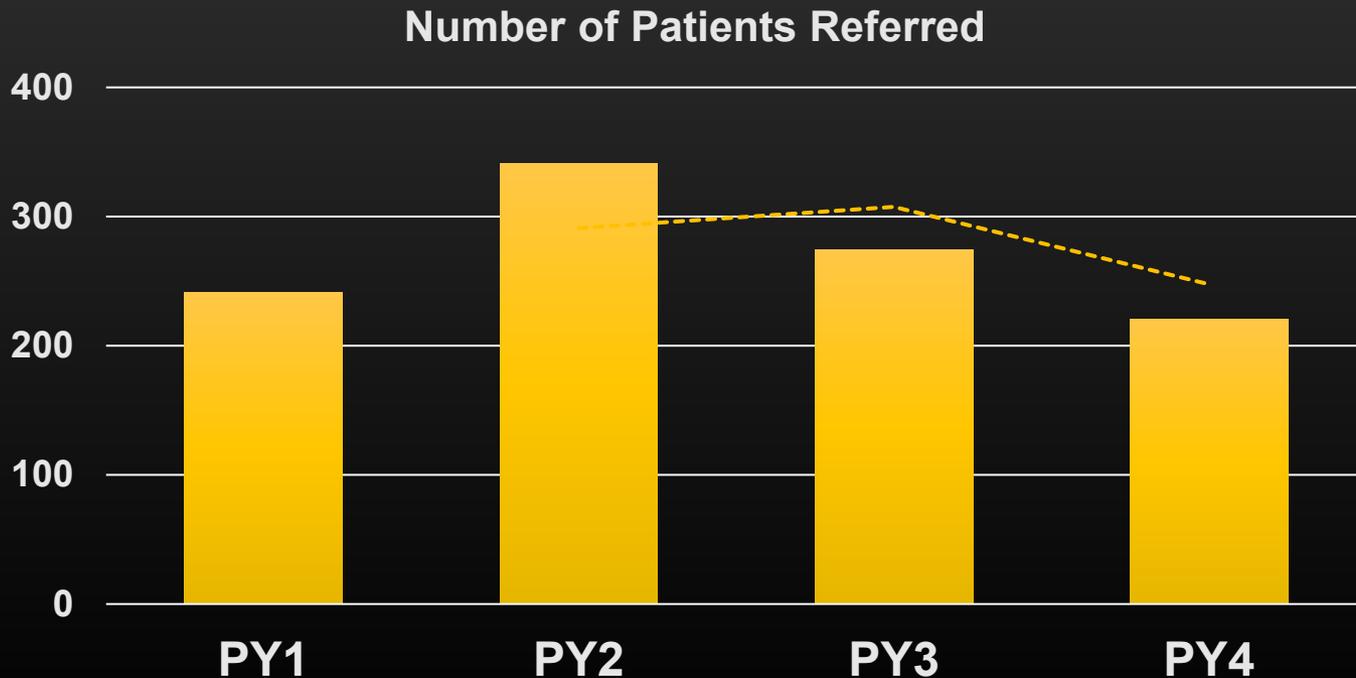
Spatial Density of Injury Locations for Referred Hospital Patients, May 2019 – December 2022

Referrals

1,075 hospital referrals

- Program Year 1: 241
- Program Year 2: 339
- Program Year 3: 274
- Program Year 4: 221

(through Dec 2022)



PY = Program Year

Needs identified

Table 7. 414LIFE Hospital Participant Reported Needs by Type

Need	# of times need identified
	<i>n</i>
Mental health (e.g., therapeutic services, grief counseling, trauma psychology)	116
Financial (e.g., employment, government assistance)	113
Retaliation (patient or loved ones will retaliate or be retaliated against)	60
Safe housing (concern of return to a safe home)	52
Support for family or loved ones	49
Safe discharge (concern of safe return to community)	42
Mobility (i.e. patient limited due to physical functioning)	39
Support for dependents	33
Transportation (to and from medical appointments)	31
Basic needs (e.g., food, water, heat, toiletries, clothing)	24
Substance abuse	9
Firearm safety	8
Spinal Cord Injury (concern for injury specific programming)	6
Total	582

Note. n = number. Patients may report multiple needs and thus counts do not represent unique individuals.

Impact Stories

Team member
about participating
community
resident...

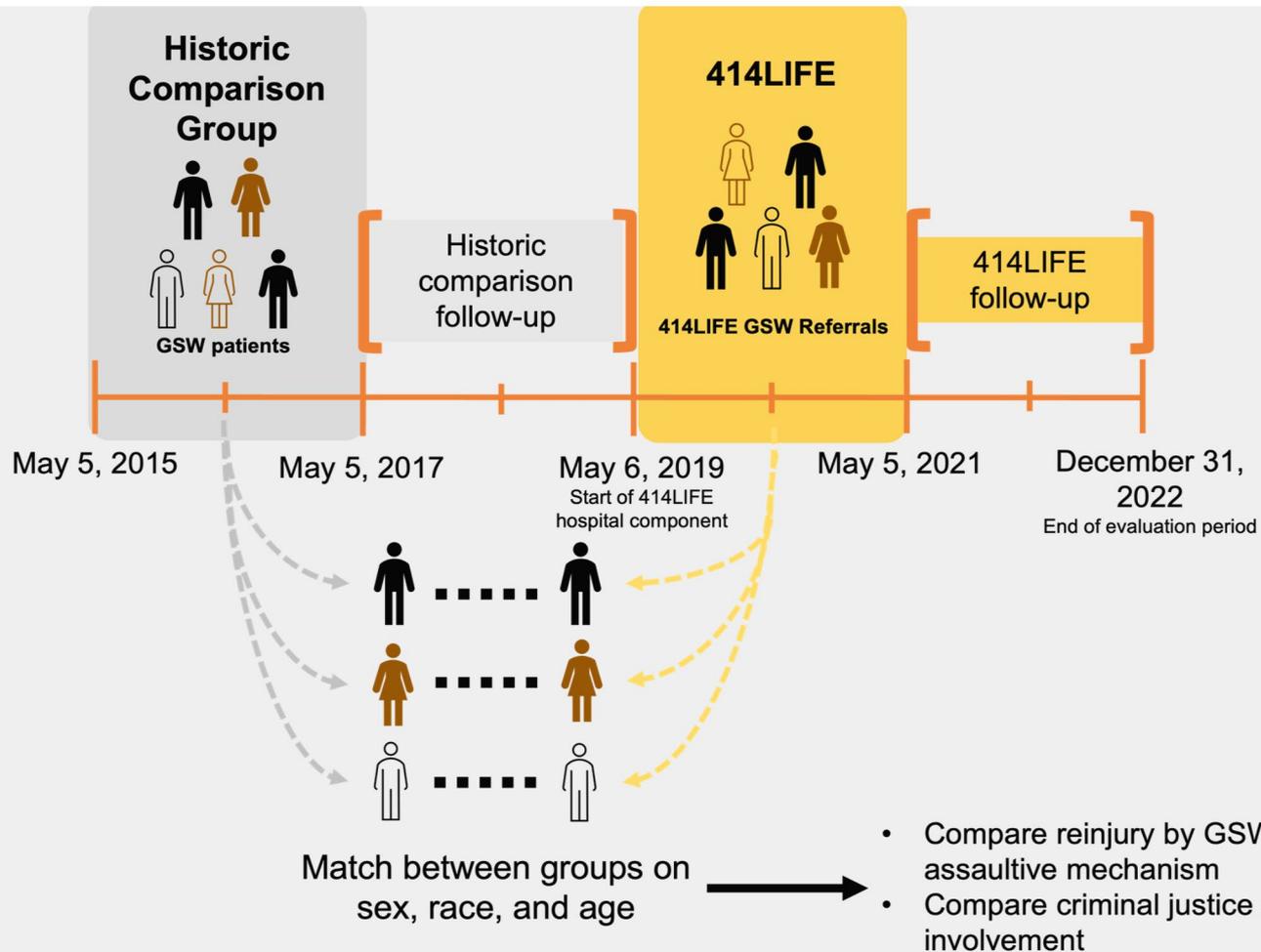
...he knows what he
wants and what he has
to do. **He just needs
a support system
along the way...**

he's very intelligent and
it's like he just wants
somebody to tell him
'Go do it, you know, go
do it'...

[B]efore 414LIFE, it felt like we were sort of just
stuck in the silo of 'we took care of the patients
once they were brought here and then sent them
back to the same environment.' I feel like this is
enabled... us to feel like **there is more than
just like 'I fixed your injury. Good luck,'**
...we've made some really good moves from an
institution standpoint and advocated for our
patients, our patient population...

Hospital partner about the
institutional impact...

Outcomes



Re-contact with the criminal justice system

Involved in homicide or non-fatal shooting as victim or suspected of involvement within 2 years of injury...

33 of 399
414LIFE patients
(8.3%)*



22 of 479
Comparison patients
(4.6%)*



New criminal charges
within 2 years of injury...

16 of 399
414LIFE
patients (4.0%)*

10 of 479
Comparison
patients (2.0%)*

Reckless injury
Disorderly conduct
Homicide

*not significant difference

Re-Injury Outcomes



Number & timing of another injury after the first firearm injury

1-Month	3-Month	6-Month	1-Year	2-Year
Another firearm injury				
2	3	4	8	12*
Another type of violent injury				
0	0	1	2	2*

- **3%** of referred community residents had another firearm injury within 2 years of initial referral
 - Lower than reinjury levels reported in other programs
- 19 community members (**1.76%**) were **re-referred** to 414LIFE for this

Recommendations

Enhance Outward Communication

- 1.1 Expand breadth of recipients of 414LIFE reports
- 1.2 Close the loop on communications and referrals received
- 1.3 Update written hospital component materials to be specific to gunshot wound victims
- 1.4 Re-orient key stakeholders about purpose and scope of 414LIFE

Clarify and further document aspects of program implementation

- 2.1 Re-evaluate the level of emphasis in and the location of the priority neighborhoods
- 2.2 Clarify expectations around engagement with participants and discharge criteria
- 2.3 Re-evaluate scope of team member roles
- 2.4 Develop centralized tracking of community component participants
- 2.5 Increased positive/strength focused data entry training
- 2.6 Provide trauma-informed care for 414LIFE frontline workers

Future Phases

- Iterative, **annual process** through current awarded funding (~2025)
- **Participating community resident interviews**
- **Additional data** sources
- Phase 2 to be updated based on Phase 1's findings and recommendations



Increasing Capacity

- Staffing
- Funding
- ThriveOn Collaboration
- Hospital Expansion
 - Aurora Sinai Hospital
 - Ascension St Joseph's Hospital
- Trauma Quality of Life Clinic
- Post-Discharge Care Team



Current Hospital Component Highlights

- **1421 total program referrals** since the start of the hospital component in 2019.
- Since the start of the hospital component in 2019, there has been **27 re-referrals to the program following a re-injury.**
- **Hospital Expansion**
 - Beginning March 1, 2024 - Ascension St. Josephs' Hospital
 - Beginning May 1, 2024 - Aurora Sinai Hospital
- The hospital team consist of **4 incredible Hospital Responders** with one HR position to fill.

Current Community Component Highlights

- YTD (April 2023 to April 2024) there were **241 (hours) violence interruptions**.
 - **110** hours of the interruptions were in the target area and **44** hours were out of the target area.
- Canvassing efforts (April 2023- April 2024) resulted in **943 people being contacted** and **3,553 pieces of public education** distributed.
- **748 hours of behavior change & public activities** were logged.
- In April there were **0** violent incidents in Walker's Point and there were **3** in Old North Milwaukee (1 homicide and 2 non-fatal).
- Staffing
 - The community team consist of 8 amazing VIs/OWs with a total of 3 openings for both Violence Interrupters and Outreach Workers.
 - New Community Program Coordinator starting 6/3/24.

For more information...

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Infographic



Full Report

