



# North Carolina Helps Partners Identify Shared Community & Societal Level Risk and Protective Factors

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North Carolina has applied groundbreaking, creative strategies to reduce the burden of injury and violence across the state by choosing to grant special attention to prevention strategies capable of influencing more than one type of violence outcome.

In 2009, the [North Carolina Division of Public Health's Injury and Violence Prevention \(IVP\) Branch](#) partnered with the North Carolina Coalition Against Domestic Violence (NCCADV), the North Carolina Coalition Against Sexual Assault, the North Carolina Department of Public Safety Division of Adult Correction and Juvenile Justice, and Prevent Child Abuse North Carolina to develop shared definitions of violence and understand shared risk and protective factors. This cooperative effort and strategic planning process has helped them:

1. Strengthen partnerships across violence areas and funding streams (e.g. Core Violence and Injury Prevention Program grant, DELTA FOCUS grant, Rape Prevention and Education grant);
2. Develop tools to promote a shared risk and protective factor approach;
3. Raise awareness of this approach among their partners; and
4. Begin to initiate a paradigm shift in the way violence is addressed across the state.

To learn more about the why, how, and what's been learned from adopting a shared risk and protective factor approach in North Carolina, read on.

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## How did North Carolina apply a shared risk & protective factor approach?

1. **Prevent Violence NC Website:** With support from the state health department, Prevent Child Abuse North Carolina, the North Carolina Coalition Against Sexual Assault, the North Carolina Department of Public Safety Division of Adult Correction and Juvenile Justice, and DELTA FOCUS, NCCADV developed [Prevent Violence NC](#), a website that provides the rationale for why addressing shared risk and protective factors is important as well as resources to apply a shared risk and protective factor approach in communities. These tools include a collection of community stories describing how local communities have applied a shared risk and protective factor approach and a list of evidence-based and evidence-informed strategies that address multiple forms of violence through shared risk and protective factors. The strategies included in this list are organized by shared risk and protective factors, or "key strengths," which makes it

easy for users to identify the factors they want to influence. The site also includes a set of maps that show where different shared risk and protective factor prevention efforts are taking place across the state.

- 2. Trainings:** NCCADV, supported by CDC's DELTA FOCUS grant, provides training for local domestic violence agencies and their community partners to apply comprehensive strategies that include policy- and community-level interventions. This comprehensive approach is especially important for parts of the state that struggle to gain access to schools and funding in order to implement school-based prevention strategies. The shared risk and protective factor approach enables them to think more broadly about how to address domestic violence and other forms of violence at the societal and community levels.
- 3. Mini Grants:** Through DELTA FOCUS, NCCADV also has begun to award "mini grants" to local communities to address shared risk and protective factors at the community and societal levels. One mini grant recipient, the Charlotte Housing Authority (CHA), is collaborating with their local domestic violence service provider to address several community-level protective factors. CHA aims to improve coordination of community resources and services by requiring their staff to receive training on domestic violence and trauma-informed care, encouraging staff to make appropriate referrals for residents, and holding community forums with various service providers after every incident of community violence that takes place on CHA property. CHA is also working with the domestic violence service provider to increase residents' collective efficacy and community connectedness through bystander intervention trainings for members of the resident leadership council and for all residents, as well as a social marketing campaign focused on bystander intervention and building social norms that reject domestic and other forms of violence. The protective factors addressed through this work are associated with at least five forms of violence, including intimate partner violence, sexual violence, child maltreatment, youth violence, and suicide.
- 4. Injury Free Academy:** The North Carolina Division of Public Health's IVP Branch and the Injury Control Research Center at the University of North Carolina at Chapel Hill sponsor an annual Injury Free NC Academy. This academy brings together multidisciplinary teams of local injury and violence prevention practitioners and their community partners from across the southern and southwestern regions to develop, implement, and evaluate comprehensive approaches to addressing injury and violence. To date, the academy has brought together teams focused on teen driver safety, prescription drug overdose prevention, suicide prevention, and child abuse and neglect prevention. Next year's Injury Free NC Academy will bring together local teams to address shared risk and protective factors across multiple forms of violence.

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## How does North Carolina measure the impact of using a shared risk & protective factor approach?

- **Gathering feedback from training session participants.** NCCADV has received feedback from training session participants that overall, the shared risk and protective factor approach to addressing violence resonates at the local level. They also survey

training session participants and ask them how likely they are to incorporate a shared risk and protective factor approach into their work and in what way. Survey responses show that 100% of participants either somewhat or strongly agreed that their work should focus more on one or more shared risk or protective factors and many have reported plans for putting a shared risk and protective factor approach into action. For example, one prevention committee that participated in the training session reported plans to establish a task force to routinely map available services in the city to increase service coordination and connectedness.

- **Measuring website hits** to their Prevent Violence NC website and monitoring their social media presence.
- **Tracking shifts in local agencies** toward a shared risk and protective factor approach. NCCADV is providing technical assistance to local programs that are developing prevention plans and will be monitoring the extent to which this local work shifts toward a focus on shared risk and protective factors.
- **Evaluating the DELTA FOCUS state action plan and local norms change strategies.** The state action plan evaluation will assess the extent to which DELTA FOCUS was able to affect organizational policies across the state to increase North Carolinians' access to safe, stable housing and coordinated resources and services, and to increase strong, positive community ties. The DELTA FOCUS evaluation will also measure local communities' progress toward shifting harmful gender norms and norms that support aggression.
- **Tracking implementation and impact of mini grants** at the local level. NCCADV will be working with mini grant awardees to assess both the implementation and impact of their local shared risk and protective factor strategies. For example, the implementation of the Charlotte Housing Authority (CHA) work mentioned above will be evaluated through pre- and post-tests with trainers to gauge the quality of implementation of domestic violence and trauma-informed care trainings. CHA will also measure the impact of their work through a variety of methods, including surveys for residents after they receive training on bystander intervention, a review of de-identified case management records to assess referrals made related to domestic violence and trauma-informed care, and focus groups with resident leadership council members to assess changes in community connectedness/collective efficacy.

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## How has a shared risk & protective factor approach improved North Carolina's programs?

- **Strengthened partnerships:** This approach has helped North Carolina strengthen partnerships with groups that are working on different forms of violence, including intimate partner violence, child abuse and neglect, youth violence, and suicide. Since the formation of the statewide, multisector Violence Prevention Goal Team in 2009, injury and violence prevention partners have continued to pursue collaborative projects. For example, domestic violence prevention staff from NCCADV participated

in the development of the state's Suicide Prevention Strategic Plan and will join staff from several violence prevention agencies to help plan the upcoming Injury Free NC Academy. This approach has also helped strengthen partnerships with those in other areas of public health. For example, recognizing the risk and protective factors they share with violence, state chronic disease practitioners have expressed interest in future collaboration.

- **Shift in thinking:** The shared risk and protective factor approach is leading to a shift in the way NCCADV and its partners think about prevention. Many partners are thinking beyond traditional classroom-based prevention programs. For example, NCCADV has shifted its focus to identify and share information about a variety of existing community programs across the state that focus on shared risk and protective factors at the community level, such as job training and placement programs to increase economic stability, and community gardening programs to enhance community connectedness. Moreover, NCCADV has provided technical and financial support to local organizations to address shared risk and protective factors at the community and societal level. Also, the North Carolina Division of Public Health's IVP Branch has included a focus on shared risk and protective factors in their new five-year strategic plan for injury and violence prevention across the state.
- **Social determinants of health:** Using the shared risk and protective factor approach has helped bring attention to some concrete ways to address social determinants of health. Social determinants of health are the conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes. Oftentimes, organizations focus on strategies that address individuals and families; however, this approach helps organizations think about ways to address violence from a population approach at the community level, such as through policy or structural change, which address the conditions that put people at higher or lower risk for experiencing multiple forms of violence. In North Carolina, there are numerous examples of coalitions and partnerships working to address these conditions through community development, job training and placement, and support for parents and students.

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## What challenges has North Carolina experienced & how have they overcome them?

**Challenge:** For many organizations, forming ideas about how to address shared risk and protective factors at the community and societal levels (e.g. community support and connectedness, harmful gender norms) is difficult. Working on individual and relationship level shared risk and protective factors (e.g. substance abuse, parent-child relationships) can often seem more manageable because there are more interventions available to address risk and protective factors at these levels.

**Solution:** North Carolina addressed this challenge by encouraging organizations to incorporate community and societal level shared risk and protective factors into their current work. For example, strengthening parent-child connectedness is often thought of at the relationship level. To bring in the community or societal level, an organization can also look at family medical leave policies, policies to support home visitation programs that promote parent-child bonding time, and campaigns to change social norms around parental help-seeking.

**Challenge:** Some partners were concerned that their violence topic would get lost in the shared risk and protective factor approach. A shift toward addressing shared risk and protective factors raised questions about whether specific areas of violence prevention would continue to be valued and maintain their identity, while addressing risk and protective factors common to other forms of violence.

**Solution:** To address these concerns, North Carolina worked with partners across violence prevention topic areas to outline how this integrated approach could be an added benefit to their existing work, versus a replacement of this work. For example, with individual partners they discussed how a shared risk and protective factor approach could help leverage momentum and resources from other violence areas to support prevention efforts that address risk and protective factors for each distinct form of violence.

**Challenge:** When a multisector coalition comes together to work on a shared risk and protective factor approach, it can be difficult to sustain momentum.

**Solution:** North Carolina recommends mirroring the collective impact approach, and in particular, making sure the coalition has a “backbone organization.” At the local level, such coalitions are frequently led by the county health department or a local university. At the state level, NCCADV has played this role through implementation of Prevent Violence NC, with the state health department assuming increasing leadership through the Injury Free NC Academy and the state strategic plan to prevent injury and violence. These organizations lead the effort and help to keep the momentum going.

**Challenge:** North Carolina had a difficult time raising awareness without concrete tools and resources to help implement this approach.

**Solution:** Prevent Violence NC provided a platform to share research and tools to convey the shared risk and protective factor approach, as well as a framework for understanding how diverse organizations' efforts contribute to violence prevention in the state. CDC's [Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence](#) helped to overcome some partners' resistance and make the case for a shared risk and protective factor approach in North Carolina. The new [Strategic Vision](#) developed by CDC's Division of Violence Prevention also helps to make the case of the importance of a cross-cutting approach to violence prevention to partners across the state. NCCADV staff have also shared the Prevention Institute's Collaboration Multiplier tool as an example of one method to develop concrete action steps to implement cross-cutting prevention work.

## What does North Carolina consider to be keys for success when engaging in this work?

- Use tools, such as [Connecting the Dots](#) and Prevent Violence NC, to generate support for and raise awareness about the shared risk and protective factor approach.
- Frame shared risk and protective factors as an approach that complements and enhances existing violence prevention work (e.g. focus on the ways an integrated approach can bring more of a focus and leveraged resources to each individual area of violence).
- Help partners identify community and societal level shared risk and protective factors that align with their individual and relationship level activities (e.g. expand prevention strategies to address policy and systems changes).
- Provide partners with concrete action steps and ways to implement shared risk and protective factors. Partners get enthusiastic about this work when they can see a way to carry it out.

