

Department of Homeland Security (DHS)
FY2020 Targeted Violence and Terrorism
Prevention (TVTP) Grantee Evaluation

Site Profile

University of Denver's Colorado Resilience Collaborative (CRC)



Developed for:



Science and
Technology

Developed by RTI International

List of Abbreviations

CAPO	Compliance Assurance Program Office
CP3	Center for Prevention Programs and Partnerships
CRC	Colorado Resilience Collaborative
DHS	Department of Homeland Security
IMP	Implementation and Measurement Plan
TVTP	Targeted Violence and Terrorism Prevention
PTV	Preventing Targeted Violence

Executive Summary

The Department of Homeland Security's Science and Technology Directorate contracted RTI International to conduct research and evaluation of the University of Denver's Colorado Resilience Collaborative (CRC) FY2020 Targeted Violence and Terrorism Prevention (TVTP) grant implementation to examine accomplishments, challenges, and recommendations. The research team conducted a process evaluation of all components of the grant project. The team reviewed training curricula and recorded training modules, a consultation toolkit, and other materials provided by the CRC and interviewed staff and project partners. A summary of findings is in Table ES-A.

First, the CRC surpassed its preset grant targets for the number of training participants and resources provided, based on data it reported. The research team was unable to establish whether the CRC's trainings and prevention gatherings were effective in increasing participants' knowledge of targeted violence and how to address it, although survey data that the CRC gathered and reported indicated an increase in participants' confidence in their knowledge. Second, the CRC surpassed its preset grant targets for number of targeted violence cases for which it triaged and performed consultation, based on data it reported, providing individuals with resources and referrals as appropriate. The CRC also codified its resources developed through trainings and consultations into a range of online materials, including four recorded training modules and a consultation toolkit. Lastly, the CRC reportedly created an online resource library to share its learnings and approach with professionals beyond the end of the grant period. Researchers' ability to review, evaluate, and verify the CRC's work across these four components was limited by a lack of access to data, as is discussed throughout the report.

This work is supported by funding by the United States Department of Homeland Security, Science and Technology Directorate under contract #140D0418C0012/P00005.

Table ES-A. Summary of Findings

 <p>Objectives</p>	<ul style="list-style-type: none"> • Build community capacity to prevent and address targeted violence through training and educational materials • Implement Colorado Consultation Model for triage of targeted violence cases and delivery of in-depth consultation and disseminate learnings • Encourage collaboration and knowledge sharing for professionals engaged in targeted violence prevention and intervention • Develop and launch an online resource library to share training and technical assistance materials with practitioners
 <p>Outputs</p>	<ul style="list-style-type: none"> • Conducted 30 total trainings at the 101 and 201 levels • Trained 1,501 individuals from a range of professions • Increased self-reported confidence in knowledge of targeted violence among training participants • Developed four recorded training modules • Provided triage and consultation services for 101 cases • Referred 16 cases for clinical services • Developed a consultation toolkit with seven case studies on how to apply the consultation process • Hosted five community prevention gatherings • 157 professionals and community representatives participated in community prevention gatherings • Developed and launched an online resource library with 36 resources* • 2,158 views of the online resource library*
 <p>Challenges</p>	<ul style="list-style-type: none"> • Unanticipated delays due to Department of Homeland Security Compliance Assurance Program Office (CAPO) and Center for Prevention Programs and Partnerships (CP3) reviews shortened the implementation timeline • Launch and maintenance of the online resource library were impeded by staff turnover • Technical issues restricted the online resource library and caused further delays • Unanticipated staff time was needed to gain target audience buy-in • Other actors were skeptical of a mental health Targeted Violence and Terrorism Prevention approach
 <p>Recommendations</p>	<ul style="list-style-type: none"> • Ensure online resources are easily accessible • Incorporate time and resources for community-based research into the program design • Incorporate timing considerations for CAPO and CP3 reviews into the program design • Enhance data sharing

*The Colorado Resilience Collaborative reportedly launched its online resource library in June 2022; however, researchers did not view it before it was taken down.

Site Profile: Colorado Resilience Collaborative

The University of Denver's Colorado Resilience Collaborative (CRC) was awarded a two-year grant by the Department of Homeland Security (DHS) Center for Prevention Programs and Partnerships (CP3) in 2020 and was selected in 2021 to undergo an independent evaluation by RTI International. This site profile reviews the CRC's grant design, implementation, accomplishments, challenges, and relevant recommendations for future programming in Targeted Violence and Terrorism Prevention (TVTP). After completing an evaluability assessment, a process evaluation was conducted on the CRC's FY2020 TVTP grant, the findings of which are detailed in this report. The research team examined the processes the CRC followed when implementing this grant to learn what mechanisms may contribute to a project's effectiveness and detail project accomplishments at the output level.

This report is separated into three sections. The first section examines process-level findings regarding the CRC's grant implementation. The second section details the findings of a survey that researchers conducted of the CRC's project partners. The final section includes an overall discussion of evaluation findings, a discussion of the sustainability of the CRC's grant activities, and recommendations for the TVTP grant program.

For the CRC's full Implementation and Measurement Plan (IMP), which outlines its goals, target audiences, objectives, activities, inputs, time frame, anticipated outputs, performance measures, and data collection plan, contact DHS.

Colorado Resilience Collaborative

The CRC is housed within the University of Denver's International Disaster Psychology: Trauma and Global Mental Health Graduate Program. The CRC provides training, professional mental health consultation, and educational resources to expand awareness and skills for identifying and responding to concerning behaviors related to targeted violence and hate. The CRC serves the entire state of

Colorado but focuses on the Denver metropolitan area. The FY2020 grant was the CRC's first under the DHS TVTP grant program.

CRC's Fiscal Year 2020 TVTP Grant Summary

The CRC's FY2020 TVTP grant consisted of four closely related components to build awareness and strengthen local networks for the prevention of and intervention in targeted violence: 101 and 201 trainings, triage and consultations, community prevention gatherings, and an online resource library. These four components are detailed below, followed by Figure 1, which illustrates how they are interrelated.



101 and 201 Trainings. The CRC developed and delivered 30 trainings (15 trainings at the 101 level and 15 trainings at the 201 level) aimed at educating professionals in the law enforcement, government, health, behavioral health, social work, nonprofit, and education sectors, as well as nonprofessional community members, on targeted violence. The 101 trainings focused on raising community awareness of the threat of targeted violence and resources to intervene, and the 201 trainings focused on incorporating public and mental health perspectives into preventing targeted violence. Training content was customized to the needs and concerns of participating organizations. The CRC developed asynchronous recorded modules that captured this training content to make it accessible after the end of the grant period. To support its work under this component, the CRC partnered with Moonshot, a global technology company, which provided data and analytics to better understand online extremism dynamics across Colorado. The CRC incorporated these findings into its trainings and other resources made available for practitioners and service providers.



Triage and Consultations. The CRC provided triage and consultation services for a total of 101 cases over the grant period. During consultations,

the CRC provided subject matter expertise, licensed mental health expertise, technical and educational prevention resources, threat assessment and management, and referrals for organizations, responders, and community bystanders who were interacting with concerning cases on the pathway to violence. The CRC created a consultation toolkit that describes its professional mental health consultation approach and illustrates its interdisciplinary methods and impacts through seven sample scenarios, based on actual cases that the CRC consulted on. The CRC partnered with two organizations, which it referred cases to when clinical services were required. Specifically, the two organizations were Life After Hate, a nonprofit organization that provides services to individuals—or their friends and family members—who hold violent far-right extremist beliefs, and Nicoletti-Flater Associates, which specializes in providing police and public safety psychological services.



Community Prevention Gatherings. The CRC conducted five community prevention gatherings to engage with local communities dealing with targeted violence and hate. In total, 157 individuals participated in these gatherings, made up of members of—or representatives of organizations working with—LGBTQIA+, Spanish-speaking and Latin, New American, and military and veteran communities, in addition to substance use and rehabilitation programs. These gatherings encouraged information sharing and collaboration between community groups and enabled the CRC to provide these communities with relevant resources in response to their specific needs and concerns.



Online Resource Library. The CRC reportedly developed and launched an online resource library to serve as an accessible and sustainable hub of the CRC's resources for practitioners and community service providers. The CRC reported launching the online resource library in June 2022; however, it was subsequently taken down due to staff turnover. The CRC reported that the library garnered 2,158 views while it was active.

Figure 1. The Colorado Resilience Collaborative's (CRC) Interrelated Grant Components



Design and Methods for Process Evaluation

As part of the process evaluation of the CRC's grant implementation, researchers reviewed all documentation, such as 101 and 201 training curricula, pre- and post-event survey questions, and the consultation toolkit. Researchers reviewed the recorded training modules to understand their format and content and conducted interviews with five program and partner staff members. Interviews underwent a thematic analysis to identify meaningful patterns in the data.

The evaluation of the CRC's grant implementation is limited, as the research team was not able to observe any 101 or 201 trainings or community prevention gatherings. The CRC and its partners did not believe it was appropriate for researchers to observe these events, whether in person, virtually, or as a recording, because of clinical and privacy concerns and sensitivities of the audiences. The research team discussed the possibility of signing a nondisclosure agreement with CRC to mitigate these concerns, but the CRC maintained that it would be inappropriate for researchers to observe the events, as the communities that the CRC worked with had low levels of trust of federal agencies and law enforcement. Confidentiality was very important to the CRC, and it believed having an outsider present at such events could weaken the trust that it built with these communities. Similarly, the research team could not access data regarding the CRC's triage and consultation work, as it contained sensitive information about specific cases. The research team was able to review four of the reported eight asynchronous training videos that were recorded and to observe two trainings that Moonshot led for the CRC's network.

Lastly, researchers only received aggregate data from the CRC. Therefore, this evaluation will discuss only self-reported, overall outputs. The CRC declined to share disaggregated data because there were no data use agreements established during the grant period and it was believed that sharing these data would not be compliant with its approved institutional review board protocols and Compliance Assurance Program Office (CAPO) materials.





Process Evaluation Findings

101 and 201 Trainings

This section examines process evaluation findings regarding the CRC's trainings, which correspond with Goal 1, Objectives 1.1 and 1.2 in the CRC's IMP.

OBJECTIVES 1.1-1.2:

1.1 Facilitate access to targeted violence prevention training and resources to build the capacity of communities to prevent and address targeted violence.

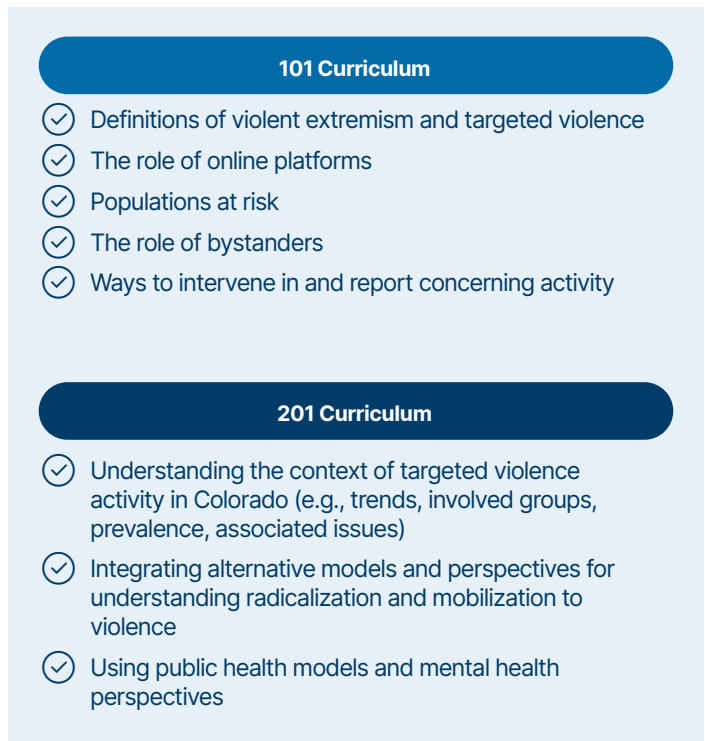
1.2 Provide in-depth educational materials about the nature of targeted violence and ways to use behavioral indicators to assess threats and manage cases.

Trainings Customized to Different Audiences

The CRC offered two types of trainings which they referred to as their 101 and 201 trainings. The differences between these two trainings are described in Figure 2. The CRC developed and updated its training curricula to reflect DHS Community Awareness Briefings.

The CRC held trainings when requested by organizations or as a result of its outreach to particular organizations, in which it discussed the subject matter and importance of the trainings and how they might relate to that particular organization's needs. The CRC adapted each training to meet the needs and interests of the specific group participating. Examples of these adaptations were the CRC shortening trainings in response to time limitations, excluding information that the group was already familiar with, or spending more time on topics of particular concern. Thus, no two trainings covered the exact same content. The training format (in person or virtual) was customized to respond to groups' preferences and to changing COVID-19 pandemic conditions throughout the grant period. The CRC conducted 30 trainings in total during the grant period, split equally between 101 and 201 trainings.

Figure 2. 101 and 201 Training Curricula





Varied Audience

In total, 1,501 individuals participated in a 101 or 201 training during the grant period, which exceeded the CRC's target of 1,000 individuals. The CRC stated in its IMP that it planned to include 50 different organizations in the trainings. The research team was unable to confirm whether this target was achieved, as the CRC declined to share information on participants' organizations. The CRC did confirm, at the aggregate level, that the 1,501 individuals who completed trainings included mental health professionals and administrators, health providers, social workers and case managers, educators and school administrators, community-based nonprofit workers, elected officials, and activists, in addition to government employees working in public safety, health and human services, public health, labor and employment, or resettlement and integration.

The CRC initially set out to collect post-training survey data to capture self-reported confidence in knowledge across 10 questions. It then began to also use pre-training surveys in March 2022, where it asked the same 10 questions to compare confidence in knowledge before and after each training. The pre- and posttest questions asked participants to indicate whether they agreed or disagreed (or neither) with statements such as "I understand how targeted violence and violent extremism are defined" and "I understand the reasons why community bystanders may not report concerning behaviors." As these questions asked for self-reported confidence in understanding and were not empirical test questions, the research team was unable to verify whether CRC's trainings increased knowledge among participants.

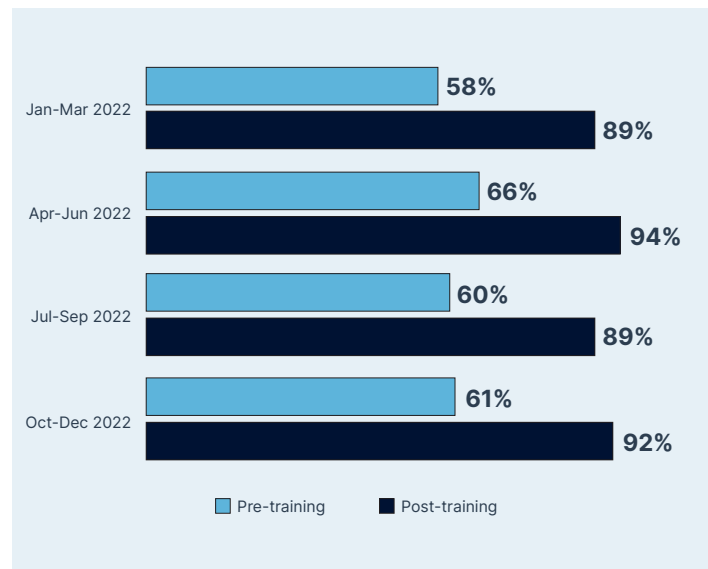
Although researchers could not empirically assess knowledge gain from these trainings, the aggregated survey results did demonstrate an increase in participants' self-reported confidence in their knowledge. For example, as seen in Figure 3, self-reported confidence in knowledge from the trainings that took place from April to June 2022 increased from 66% to 94%.* Although these data indicate a positive trend in participants feeling more knowledgeable, they have three important limitations. First, CRC shared these aggregated data points with the research team, along with an explanation of how they were calculated, but did not share the detailed data. Second, these data points are aggregated at the quarterly level, and each quarter included a different number of trainings,

different distributions of 101 and 201 trainings, and different types of trainees. Therefore, it is unknown how these results varied by training type and audience. Finally, it is important to note that whereas self-reporting of knowledge gain and self-reporting of confidence level can provide useful feedback to trainers, these should not be interpreted as demonstrating an equivalent increase in participants' knowledge.

Participants in the CRC's trainings included the following:

- Mental health professionals and administrators
- Health providers
- Social workers and case managers
- Educators and school administrators
- Elected officials
- Activists
- Government employees

Figure 3. Changes in Training Participants' Self-Reported Confidence in Knowledge, Aggregated by Quarter



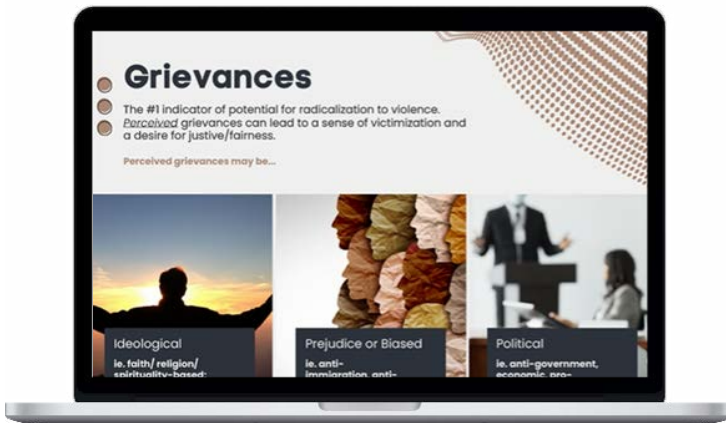
*Note. These aggregate-level percentages were reported by the Colorado Resilience Collaborative and could not be verified by researchers.



Asynchronous Training Modules Offer Sustainable Resources

Although asynchronous online training was not included in its IMP, the CRC produced a series of modules that captured some of the curricula delivered through 101 and 201 trainings. The recorded modules were not an exact translation of the trainings but touched on many of their key points. The CRC intends to publish eight recorded training modules in total, although only the overview and the first four modules were available online as of January 2023.

Figure 4. Screenshot of the Colorado Resilience Collaborative Training Module 2 (Pathways to Violent Extremism)



Note: Module 2 can be found at <https://ourcommunitybroadcasting.com/bh-programs/>.

Modules were narrated, with accompanying visuals to support the content (Figure 4). They ranged from 10 to 54 minutes and were designed to stand on their own so that individuals could watch any module in any order. The focus of each of the currently available modules is listed in Figure 5.

Figure 5. Online Training Module Topics

Module 1: The Problem

- ✓ Why Targeted Violence and Terrorism Prevention is important (includes Colorado-specific data provided by Moonshot)
- ✓ Definition of terms
- ✓ Contexts for grievances
- ✓ Intro to the Preventing Targeted Violence (PTV) approach

Module 2: Pathways to Violent Extremism

- ✓ Pathways vs. profiling
- ✓ Pathways to violence
- ✓ Grievances
- ✓ Trauma and grievances
- ✓ Push and pull factors
- ✓ Potential signs of radicalization to violence
- ✓ Push and pull factors for disengagement
- ✓ Steps to disengagement
- ✓ Risk factors and protective factors
- ✓ Posttraumatic growth

Module 3: Mental Health, Complex Trauma, and Culture: Risk and Protective Factors in Context

- ✓ Public health approach to PTV
- ✓ Social determinants of health and how they can be associated with grievances
- ✓ Multilevel programming
- ✓ Advocacy and involvement

Module 4: Adverse Childhood Experiences

- ✓ Background on adverse childhood experiences
- ✓ Collective trauma
- ✓ Risk and protective factors
- ✓ Push and pull factors
- ✓ Push and pull factors for disengagement



Promote Resources to Prevent Targeted Violence

The CRC's Objective 1.2 was to promote its resources by providing educational materials to at least 50 organizations and 500 professionals in health services, public safety and emergency services, and education who may be in roles to identify, prevent, and respond to threats or incidents of targeted violence. Also included were governmental and nongovernmental agencies that provide health and social services, public safety, education, and resources that support the safety and well-being of communities and society. By the end of the grant period, the CRC reported reaching a total of 1,342 professionals with educational, technical assistance, and outreach materials that offered information and/or recommendations related to the effects of trauma, adversity, and pathways to violence. Materials also discussed how to identify, prevent, and respond to risks, threats, or incidents of targeted violence. The CRC did not share data with the research team about efforts under this objective.

Partner-Led Trainings Supplement the CRC's Program Staff Knowledge

The CRC supplemented its own 101 and 201 trainings by engaging one of its partners, Moonshot, to design and administer two sets of trainings designed specifically for the CRC's context and needs. Moonshot delivered, virtually, the first two trainings directly to the CRC's staff in 2021, discussing (1) online prevention work in violent extremism and (2) ideology and prevention methods. Moonshot then implemented two related two-hour trainings in October 2022 for the CRC's broader network of practitioners. The first training focused on countering online harms and Moonshot's specific approaches to doing so. The second training examined online involuntary celibate (incel) behavior. Moonshot further supported the CRC's staff knowledge by producing two data-informed reports, one focused on violent extremism trends in Colorado and one on online trends among individuals showing susceptibility to violent extremism. Another CRC partner, Life After Hate, additionally hosted a training for the CRC's staff in November 2021 that examined far-right extremism and detailed services provided through the ExitUSA program. This assisted the CRC's staff in conducting triage and consultations, discussed below, by clarifying when and how to best refer cases to Life After Hate.

Triage and Consultations

This section examines process evaluation findings regarding the CRC's triage and consultation efforts, which correspond with Goal 2, Objectives 2.1 and 2.2 in the CRC's IMP.

OBJECTIVES 2.1-2.2:

2.1 Implement Colorado Consultation Model for triage of TV cases and delivery of in-depth consultation.

2.2 Disseminate learnings from applying the CRC consultation approach in practice.

The CRC's Consultation Approach

In addition to training support, the CRC provided triage and consultation services for cases of concern using its consultation model (Figure 6). The triage and consultation process began with an individual or organization reaching out to the CRC with a concern or question. The CRC's Program Coordinator spoke with these individuals to gather more information about their case and, if appropriate, referred them to one of the CRC's three Clinical Leads, who focused on specific areas. One Clinical Lead responded to individuals looking for general resources or education or who had concerns surrounding the mental health of affected communities, gang-related violence, gender-based violence, race- and culture-based violence, and broad interpersonal threats. A second Clinical Lead focused on cases involving individuals who had an affinity for extremist groups or ideologies without having taken action or who were demonstrating preparatory or precriminal behaviors. The last Clinical Lead was referred cases that dealt with rapid escalation of ideology, targeted threats of violence, and threat assessment and management. Clinical Leads used the National Association for Behavioral Intervention and Threat Assessment Tool to assess the level of the threat and determine how to proceed accordingly.

If the CRC determined that it was appropriate to provide additional support, the relevant Clinical Lead held a one-to-two-hour consultation with individuals. During this call the lead offered support but did not make any recommendations and did not provide any clinical services. After the call, the lead discussed the case with the rest of the team, as needed, and followed up with resources and recommendations (which at

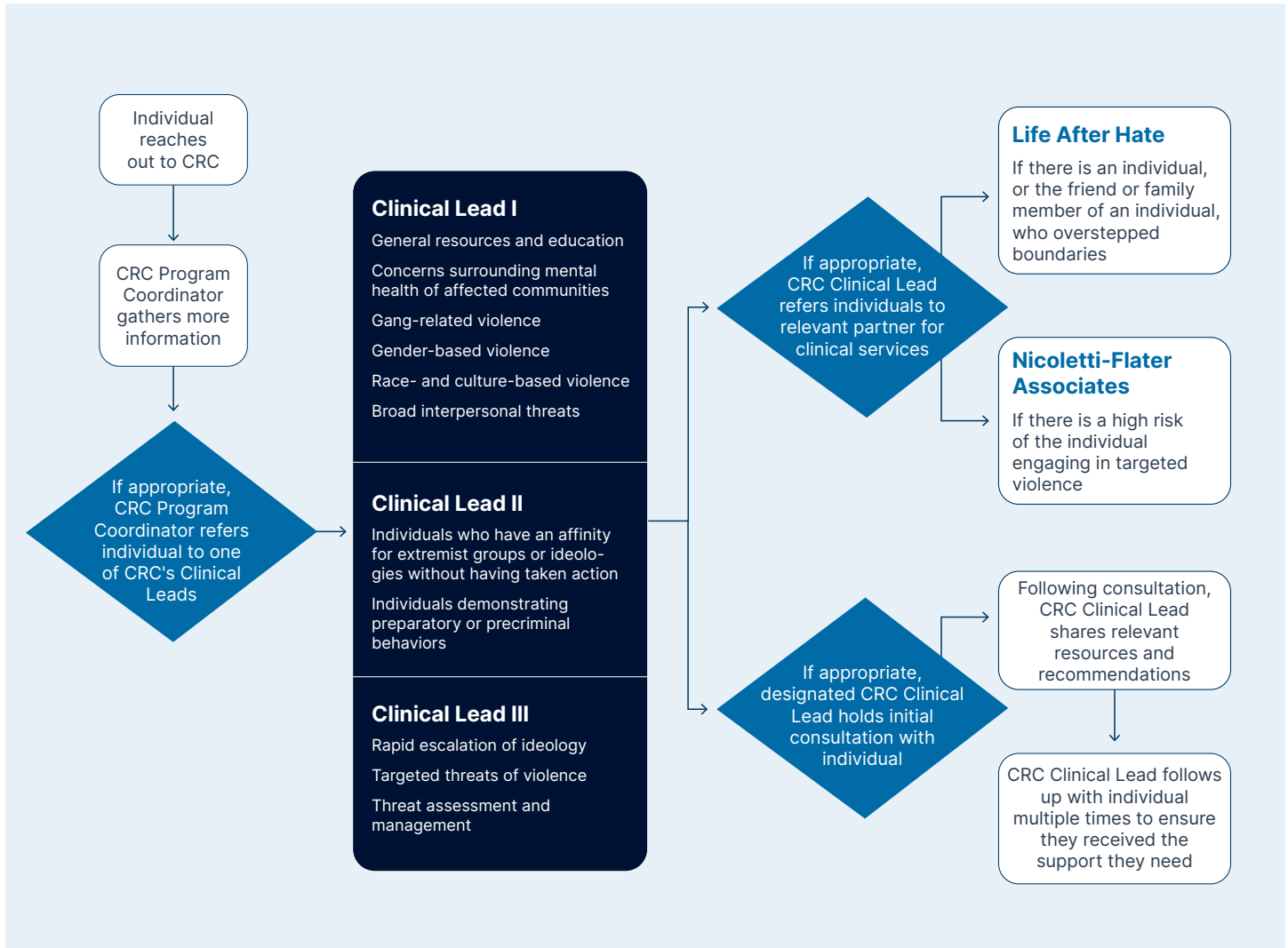


times included a recommendation to participate in one of the CRC's 101 or 201 trainings). Leads generally followed up with individuals multiple times to ensure they received the support they needed.

Cases that needed greater attention or more specific support beyond what the CRC could provide (such as rapid escalation into mobilization to violence or active criminal behavior with ideological intent) were referred to one of two partners, Life After Hate or Nicoletti-Flater Associates, to provide more in-depth support. The CRC would typically refer cases to Life After Hate if the case was brought by a friend or family member of

an individual who may have begun to adhere to an extremist ideology or undertaken minor actions in support of an ideology, or the individual themselves. The CRC referred cases to Nicoletti-Flater Associates if there was a high risk of individuals engaging in targeted violence; Nicoletti-Flater Associates would in turn conduct threat assessment and management directly with cases and liaise with law enforcement and emergency services as appropriate. CRC maintained compliance with its own internal procedures and federal regulations concerning the threshold at which a report to law enforcement must be made.

Figure 6. The Colorado Resilience Collaborative's Consultation Model



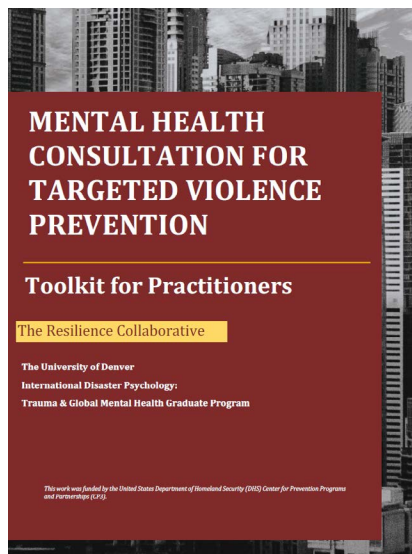


By the end of the grant period, the CRC reported providing triage and consultation services on 101 cases, exceeding their goal of 75 cases, and referred 16 cases to partners. These consultations ranged from one-time meetings, which generally consisted of providing resources, to ongoing consultations that involved the CRC helping with a recurring concern. The CRC received triage and consultation requests organically—that is, individuals contacted the CRC on their own; the CRC did not initiate contact with individuals. Therefore, the types of cases or levels of threats of the cases that the CRC triaged depended on the individuals who came to them requesting support. For each triage and consultation, the CRC documented the number of participants who attended consultations and their organizations, the type of concern, and the consultation service and resources provided.

Consultation Toolkit Disseminates Learnings

To further codify and disseminate its consultation approach, the CRC developed a consultation toolkit for other professionals, organizations, and community practitioners engaged in targeted violence work (Figure 7). The 50-page toolkit, available in English and Spanish, begins by describing the CRC's mission and objectives; the public health framework for targeted violence prevention; background on pathways to violence; accounting for justice, equity, diversity, and inclusion in consultations; and methods and principles of conducting mental health consultations. The toolkit then discusses seven case studies that demonstrate in practical terms how the CRC applied the consultation process and the results of their consultation in these cases. It then ends with recommendations for practitioners. The appendices also include useful links and a suggested list of further reading and resources. The CRC aimed to reach at least 500 professionals, 50 organizations, and 20 community agencies with this toolkit. However, because of delays caused by staff turnover, the toolkit has not been publicly posted yet. Once it is made widely available, this toolkit will provide a new, detailed resource to the TVTP field, particularly as the field continues to look increasingly towards multidisciplinary consultations as part of a public health approach. With few resources currently available that explain how to conduct such consultations, the CRC's toolkit delineates the specific mechanisms, methods, and challenges that other practitioners should consider, based on the CRC's experience.

Figure 7. The Colorado Resilience Collaborative's Consultation Toolkit



Community Prevention Gatherings

This section examines process evaluation findings regarding the CRC's community prevention gatherings, which correspond with Goal 2, Objective 2.3 in the CRC's IMP.

OBJECTIVE 2.3:

Host virtual events for collaboration and knowledge sharing for professionals engaged in targeted violence prevention and intervention.

Community Prevention Gathering Format and Participants

As part of the CRC's second program goal, which was to strengthen local networks and collaboration for the prevention and intervention of targeted violence, the CRC hosted five community prevention gatherings (referred to in the IMP as collaboration and knowledge-sharing events). Gatherings typically lasted for two hours and were held either in a hybrid format or in person depending on participant preferences and COVID-19 pandemic conditions. According to the CRC, gatherings began with participating organizations sharing their needs and concerns, followed by the CRC sharing resources on psychological first aid and mental health service referrals, then discussing relevant consultation scenarios, and concluding with answering questions.



Each of the five sessions brought together organizations and service providers focused on particular communities: LGBTQIA+, Spanish-speaking and Latin, New American, and military and veteran communities, in addition to substance abuse and rehabilitation programs. The CRC reported that a total of 157 individuals participated, ranging from 20 to 45 people per event. The data provided by the CRC regarding these gatherings can be seen in Figure 8.

Figure 8. Community Prevention Gathering Participants



Online Resource Library

This section examines process evaluation findings regarding the CRC's online resource library, which corresponds with Goal 3, Objectives 3.1 and 3.2 in the CRC's IMP.

OBJECTIVE 3.1-3.2:

3.1 Develop and launch an online PTV resource library.

3.2 Expand training and technical assistance through online PTV resource library.

The final piece of the CRC's grant was to create an online resource library of training and technical assistance materials regarding the prevention of and intervention in targeted violence. This library was designed to facilitate access to these resources after the grant's end. According to the CRC, the resource library

was launched in June 2022 but was subsequently taken down because the CRC did not have the resources to maintain it due to staff turnover and has not been relaunched as of April 2023. The CRC reported to researchers that the library received a total of 2,158 views in the past year, which includes unique views of the main page and the subpages combined, and contained a total of 36 resources including training presentations and briefing materials. The research team was not informed that the online resource library had been taken down and did not see the library when it was active.

Challenges

Staff Turnover. The CRC faced challenges in retaining staff who played critical roles in the grant work. For example, the Director of Communications resigned in May 2022, which caused delays in development timelines for the CRC's training recordings and online resource library. Additionally, the CRC initially intended to create a form to be completed by individuals downloading resources from the online resource library, which would enable the CRC to collect data on individuals accessing resources and how they planned to use them. Because of staff turnover and the associated delays, the CRC was unable to create this form and was therefore not able to track and analyze data on individuals using the resources. Additionally, this staff turnover meant that the CRC ultimately had to take down its online resource library.

Technical Issues. The CRC experienced technical issues with the creation and launch of the online resource library. The CRC initially sought to host the library on a third-party website to avoid restrictions from the University of Denver website that would require viewers to create a profile. However, the CRC ultimately determined that it was not possible to use a third-party website because the library would not be structured as needed. Therefore, the CRC decided to host the library on the University of Denver website.

Community Hesitancy. A significant portion of the CRC's grant revolved around engagement with various communities affected by targeted violence. However, staff noted that some community members expressed hesitation about engaging, which required staff to invest significant time into discussing communities' concerns and questions and explaining the importance of engagement on this topic. One staff member indicated that, although concerns varied by community, some hesitations came from either a reluctance to discuss targeted

violence or a concern regarding confidentiality due to the funding source. Additionally, the CRC’s grant sought to include rural areas across Colorado, but due to the effects of the COVID pandemic as well as social, political, cultural and geographic factors within rural communities across Colorado, there was less engagement in training and consultation activities than in the more urban Front Range corridor including Boulder, Denver and Colorado Springs. Navigating the complex dynamics present in these areas was therefore a challenge and required that the CRC spend time to build these ties.

Implementation Delays. Researchers were told at the end of the grant period that the CRC had faced implementation delays because of various DHS approval processes. This included a delay of approximately six months as the CRC awaited review and approval from CAPO, which reduced the time the CRC had to implement its activities. Additionally, the CRC experienced delays due to challenges with DHS administrative and review processes.

Disagreement From Other TVTP Actors. The research team was told that the CRC experienced friction with other TVTP actors who were not familiar with a mental health approach to TVTP, as was the focus of the CRC’s grant. Although researchers were not aware of specific examples, some actors in the prevention space may be unfamiliar, and therefore not agree, with a mental health approach.

IMP Accomplishments

The CRC achieved its objective of providing targeted violence prevention training (Objective 1.1) by training more than 1,500 individuals in its 101 and 201 curricula, surpassing its original target of 800 individuals trained (Figure 9). Without detailed data, researchers were unable to ascertain whether the CRC achieved its goal of providing training to at least 50 organizations or to assess whether the CRC met its goal of 75% of trainees reporting increased knowledge of targeted violence and how to apply these learnings. The survey results that the CRC reported to the research team did indicate an increase in trainees’ confidence in their knowledge, but the surveys administered did not constitute empirical tests of knowledge. The CRC supplemented trainings by providing additional resources regarding the nature of targeted violence and ways to use behavioral indicators to assess threats and manage cases (Objective 1.2) to 1,342 individuals, far surpassing the goal of 500.

The CRC met its objective in the implementation of its consultation model (Objective 2.1) by providing consultation services for a total of 101 cases and referring 16 cases to relevant partners, surpassing its target of providing consultation services for 75 individuals. Additionally, the CRC codified its methods and relevant learnings (Objective 2.1) in the form of a consultation toolkit for practitioners to use beyond the grant’s period of performance. However, the toolkit was not publicly posted and disseminated as of the end of the grant period, so the CRC was not able to meet its distribution targets.

Objective 2.3 shared the same goal of strengthening local networks and collaboration as the CRC’s triage and consultation work and sought to do so by holding collaboration and knowledge-sharing events. The CRC hosted a total of five gatherings with 157 community representatives. Without detailed data, researchers were unable to confirm what professions and counties these individuals represented, whether the CRC achieved its stated target of 75% of participants reporting satisfaction with the events, and whether these events resulted in stronger local networks and collaboration among these communities.

The CRC’s final goal was to create sustainable approaches for the prevention of and intervention in domestic targeted violence by launching its online resource library (Objectives 3.1 and 3.2). The CRC launched the library, containing relevant targeted violence resources, in June 2022. The CRC reportedly surpassed its goal of reaching 1,000 individuals with the library, with 2,158 views while the library was active, although it is not clear how many individuals this figure translates to.

Figure 9. The Colorado Resilience Collaborative FY2020 Grant Outputs



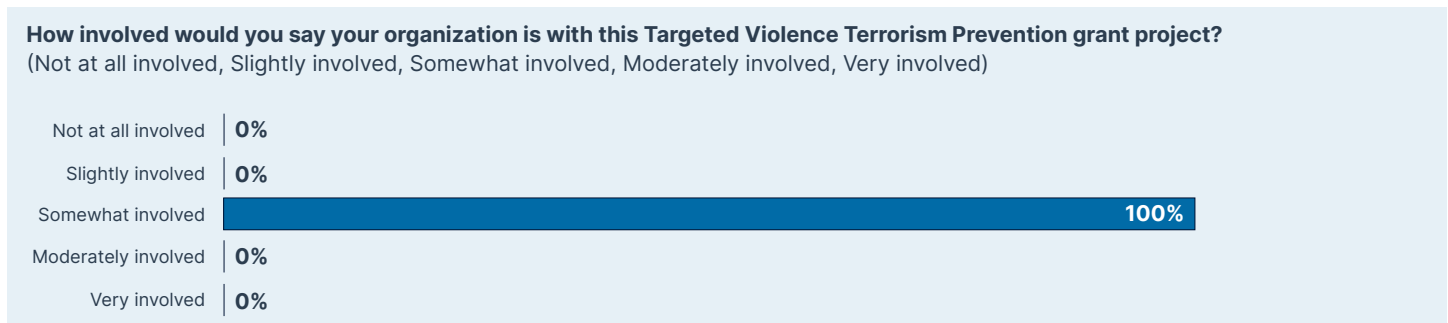
CRC's Partner Survey Findings

The CRC engaged four partners to support its FY2020 grant. Researchers surveyed these partners to understand their collaboration with the CRC and the challenges they faced. This section discusses findings from the survey.

Nature of Partnerships

The survey revealed that levels of collaboration between the CRC and its partners were consistent, even though different partners had varying levels of involvement in the CRC's work. All four partners stated that they were somewhat involved in the grant (Figure 10).

Figure 10. Partner Organization Involvement



Similarly, the four partners stated that they had worked with the CRC prior to the TVTP grant (Figure 11). However, all partners stated that their relationship with the CRC was still developing (Figure 12). When asked about the quality of the relationship with the CRC, one partner stated that the relationship was fair and the other three noted that it was good (Figure 13). Overall, these survey results indicate that the CRC used its existing relationships to support its work under the FY2020 grant in a consistent manner but that no partners were heavily involved in the project and all of them considered their relationship with the CRC as still developing. When asked about positive outcomes of the grant, one partner shared,

“Great professional collaboration and building of relationships that I foresee will be sustained outside of the terms of this grant.”

Figure 11. Prior Partner Collaboration

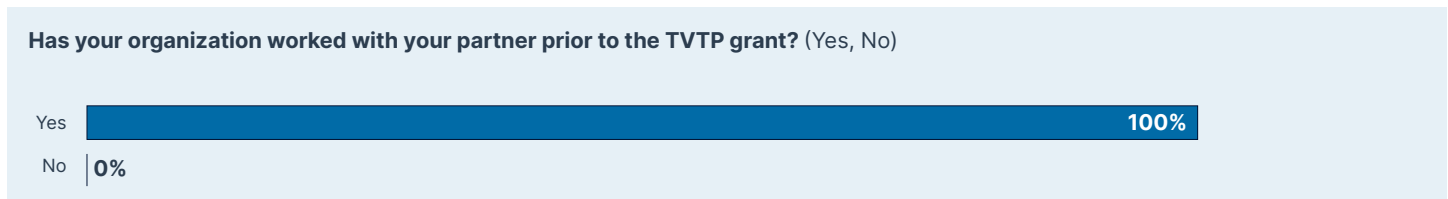


Figure 12. Partner Organization Relationships

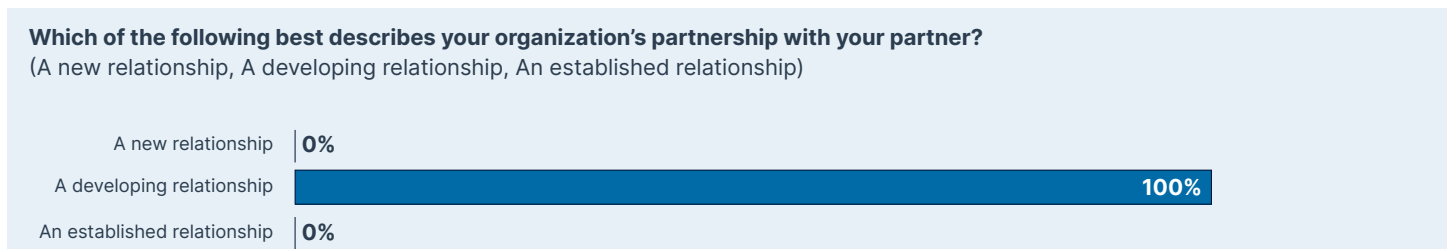
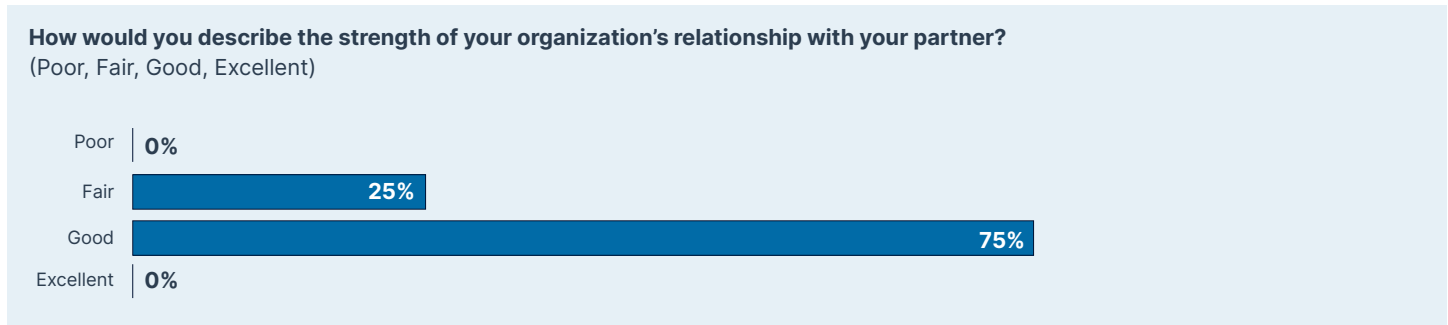
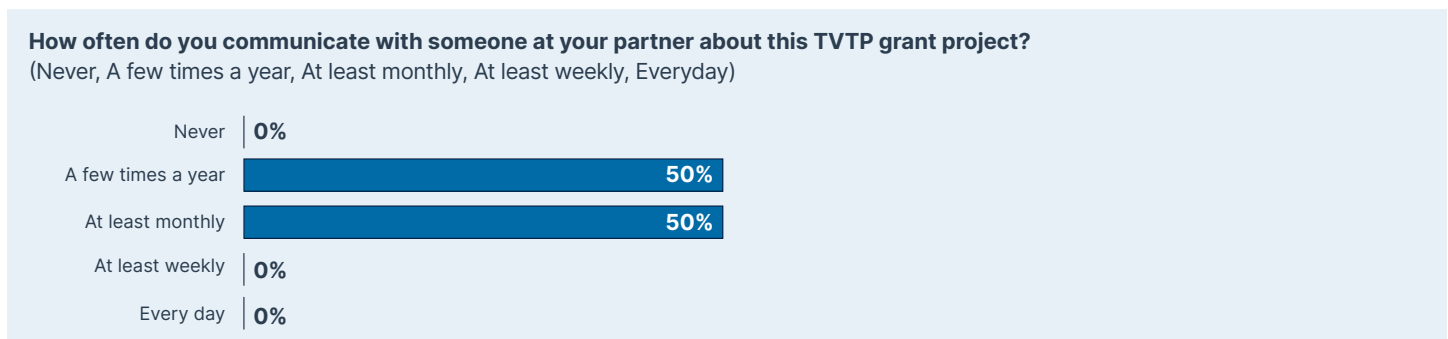


Figure 13. Strength of Partnership

Communication

Half of partners stated that they communicated with the CRC a few times a year, whereas the other half communicated at least monthly (Figure 14). Given that the CRC did much of the work itself for this grant, these responses are not surprising and seem reasonable.

Figure 14. Communication With Partner Organizations

Challenges

In the interest of privacy, researchers were unable to report partner responses on implementation challenges because some participants left these questions blank, resulting in only two responses. However, one partner provided an illustration of the local political climate challenges facing organizations working on TVTP in Colorado:

“There have been quite a few significant cases against local political leaders and law enforcement agencies in Colorado over the past year and a half, which has led to an increase in tension between leaders and community members. This has broken trust and caused the community to be less trusting in general, which makes it difficult to implement programming that requires trust from the community.”

Discussion

The CRC's grant enabled it to implement an approach to TVTP that focused on public and mental health perspectives. Throughout the grant, the CRC placed an emphasis on engaging with a variety of communities across Colorado that are vulnerable to TVT, both to learn what those communities are experiencing and to share information and resources with them. The CRC's 101 and 201 trainings engaged a wide range of professionals in Colorado, including mental health professionals and administrators, health providers, social workers and case managers, educators and school administrators, community-based nonprofit workers, elected officials, and activists, in addition to government employees working in public safety, health and human services, public health, labor and employment, or resettlement and integration. Because of this large variety of professions, the CRC tailored its trainings to each audience to ensure that materials were responsive to their specific context. This responsiveness was important to contend with community hesitancy and gain buy-in. The research team could not verify an increase in knowledge from these trainings, although the CRC-reported data indicate that participants' confidence in their knowledge increased.

The CRC implemented its model for triage and consultation of TVTP-related cases, providing resources and consultation services to many and referring others, when appropriate, to their partners, Life After Hate and Nicoletti-Flater Associates. However, the research team was unable to assess the effectiveness of the CRC's approach because of lack of access to data. The five community prevention gatherings provided additional opportunities to collaborate with vulnerable communities to bring them into the broader TVTP conversation, learn more about their needs, and give them support, including follow-up trainings and consultations.

The CRC captured its approach and learnings through resources, including a consultation toolkit, and disseminated recorded training modules that enable practitioners from outside of Colorado to continue to access and learn from their training. The CRC additionally established an online resource library, although it was subsequently taken down.

Ultimately, the CRC's decision not to allow researchers to observe trainings and community gatherings limits what can be said about those events.

Sustainability

The primary opportunity for sustainability that arose from the CRC's grant lies in the development and dissemination of its resources. The CRC published and shared with researchers four recorded training modules, which discuss the targeted violence problem, pathways to violent extremism, mental health and trauma, and adverse childhood experiences. These videos will continue to be available to practitioners and others working to prevent targeted violence, both inside Colorado and beyond, after the grant's end. The CRC additionally intended to promote the sustainability of its work through the online resource library and a consultation toolkit, detailing the CRC's public health approach and providing case scenarios for practitioners. However, the resource library is not available online as of the time of writing this report. The consultation toolkit provides a detailed explanation of how to conduct multidisciplinary consultations for targeted violence prevention that can assist other practitioners in applying the CRC's practices in their own contexts. However, while the toolkit was produced and translated into Spanish, it is not currently available online. The sustainability of the CRC's work beyond the end of the grant period of performance will therefore be limited until these resources are made publicly available.

It was unclear as of the end of the grant how the CRC's triage and consultation services would continue. Staff indicated that the CRC would continue to provide these services under alternate funding streams, but that the exact focus of these efforts may shift.

Recommendations for the TVTP Grant Program

✓ **Ensure Online Resources Are Easily Accessible.**

As discussed above, the CRC's efforts towards sustainability were limited by inhibited access to the resources that they produced. This limits the reach and impact of these resources. To maximize the viewership and application of these resources, grantees should ensure that online materials are easily accessible through web searches and on relevant web pages.

✓ **Incorporate Time and Resources for Community-Based Research Into Program Design.**

The CRC's staff noted spending significant time learning from various communities about their needs, interests, questions, and concerns. One staff member noted that the grant would have benefited from an initial period devoted to community participatory research before implementation began to better understand these dynamics and more effectively design materials and activities. Additionally, the CRC faced some resistance from communities it sought to work with due to the grant's subject matter and a lack of existing rapport and relationships. Grantees working directly with communities should therefore be encouraged to consider their existing knowledge of community needs and priorities and to incorporate the time and resources needed to deepen this knowledge, if necessary, in their grant design. They should also be encouraged to assess community buy-in and identify potential local champions for their work, as these factors can play a critical role in the success of projects that focus clearly on community engagement. If existing buy-in is weak and local champions cannot be identified, grantees should additionally budget time to overcome these barriers by engaging deeply with communities and key leaders. Grantees should also assess their existing relationships with the communities they seek to engage and, as necessary, budget time and resources for building or strengthening them. Although these practices may require shifting activity timelines backward, they can prevent roadblocks to community engagement, enable

grantees to develop an effective communications strategy, and ensure that activities are responsive to the communities that grantees seek to engage.

✓ **Incorporate Timing Considerations for CAPO and DHS Reviews Into Program Design.**

The CRC was unable to begin grant implementation until six months after its originally planned start date as it awaited CAPO review and approval. This delay significantly reduced the amount of time that the CRC had to implement its activities and achieve its targets. The CRC faced additional delays throughout the project due to challenges with DHS administrative and review processes. The CRC had not accounted for these significant periods of review in its program design, further delaying its implementation timeline. For future grants, DHS should make CAPO processes and guidelines and expectations surrounding CP3 reviews of materials clear to those applying for TVTP grants. This could take the form of a webinar, for example, explaining primary considerations for CAPO, its possible effect on different TVTP grants, and timeline expectations. Any such webinar or similar resource should additionally make clear to prospective grantees that, as a part of TVTP grant requirements, DHS CP3 will review materials developed, which will require a certain amount of time. In turn, prospective grantees should account for these requirements in their program design, adjusting implementation timelines accordingly.

✓ **Enhance Data Sharing.**

The TVTP field is characterized by a limited evidence base, which contributes to a lack of agreement in the broader field regarding what constitutes effective programming. As discussed throughout this report, data limitations significantly inhibit the ability of researchers to document TVTP efforts and assess their outcomes. DHS's TVTP program could build a stronger foundation of data-driven practice by further enabling data sharing among grantees. One way that DHS could encourage greater data sharing is by making sure that grantees are aware that institutional review board protocols can

be amended to allow for data sharing with researchers. This would enable grantees to share detailed data and enable researchers to strengthen the TVTP evidence base. Grantees with privacy and confidentiality concerns should also be made aware that nondisclosure and data use agreements can provide clear safeguards and protocols for handling these data.

Developed for:

The U.S. Department of Homeland
Security (DHS) Science and
Technology Directorate (S&T)



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