

Supporting Collective Healing in the Wake of Harm

# Successes, Challenges, and Lessons Learned

## Introduction

In 2016, the International Association of Chiefs of Police (IACP) was awarded a cooperative agreement to lead and provide training and technical assistance for the Office of Victims of Crime's (OVC's) *Supporting Collective Healing in the Wake of Harm* program, hereafter referred to as Collective Healing (CH). In 2017, IACP selected five police department grantees to develop and implement CH in their jurisdiction, including Baton Rouge, Houston, Minneapolis, Oakland, and Rapid City. RTI International was awarded a grant from the National Institute of Justice to conduct a baseline study and evaluability assessment of the CH, which used a mixed methods design of document review, site visit interviews, a capacity and network survey, and a stakeholder survey. This document provides high level results from the baseline study, including key successes, challenges, and lessons learned.

## The Collective Healing Program

CH is a demonstration program supporting five police department grantees to work collaboratively with community partners and service providers to implement trauma-informed strategies to improve officer and agency wellness and resilience, enhance victim services and assistance, and improve community-police relations and community wellness. Although the sites are working toward the same goal of collective healing, the grantees independently defined what that means and how it can be achieved through a CH program within their own community.

## Key Successes

A major success for the CH sites is the grantees' and partners' increased awareness and knowledge about trauma and vicarious trauma and that everyone is susceptible to the negative effects. Vicarious trauma is the indirect experience of a traumatic event as opposed to a direct or first-hand experience. For example, when a homicide occurs, the officers who respond to the scene or the community members who know the victim may experience vicarious trauma, which can negatively affect them personally and

professionally. Although this may seem simple, the recognition and acceptance that trauma can affect anyone and its impact can be far-reaching is a foundational piece of the program, and it required a culture or mindset shift for many, particularly around vicarious trauma. This shift is helpful in reducing the stigma associated with help seeking and in increasing willingness to access services and supports.

Another aspect of success is the support and buy-in that was garnered from key leaders within the police departments around the importance of strengthening relationships between law enforcement and the larger community. Stakeholders cited leadership buy-in as a key facilitator to program implementation and some noted it was a distinguishing factor from previous initiatives. Having support at the top levels is critical to achieving department-wide culture change and gaining program support from frontline officers and other personnel, which ultimately affects the likelihood that the overall program will be successful.

Another important success is the increased and improved collaboration among CH stakeholders, which included strengthening existing partnerships and establishing new ones. Some police departments had major breakthroughs

building a connection to organizations or entities that they had not been able to in the past. Some partners were also able to form new partnerships with other community organizations or units within the police department as a result of their CH involvement. Most grantees and partners had positive perceptions of CH and their working relationships. Many also reported progress in beginning to break down the silos in their communities.

Improved community engagement by law enforcement is another key achievement. There are long histories of mistrust within each CH site that must be addressed and building trust is a slow process. Improved communication and transparency are critical starting points. The community listening sessions were valuable in opening lines of communication and the grantees and partners have been intentional in using the information gathered in these sessions to plan and prioritize their CH efforts. There remains room for improvement, but an important foundation has been laid from which to continue building.

## Key Challenges

The sites faced several challenges in planning and implementing their CH programs. The primary challenges stakeholders identified were a lack of time and funds to carry out CH activities. Administrative challenges were also a barrier, including the approval process at the federal and local level which delayed contracts and activities, OVC funding limitations (particularly for promotional items), and the lengthy reimbursement process for partners. This was particularly challenging for small, grassroots partner organizations that are not in a financial position to await months for reimbursement.

All the sites aimed to enhance services for victims and the community at-large. One of the primary barriers to this was the police department's lack of knowledge about the providers that serve victims and the services available in the community. Conversely, community service providers lacked knowledge of victim specialists, advocates, or victim/community programs within the police department. Before collaboration can occur, law

enforcement and community service providers need to be familiar with one another and the services that they offer. Simply making these connections is a step forward. Grantees addressed this challenge by leveraging their existing partnerships to learn about and connect with other providers. Forming a relationship with one provider often resulted in a ripple of connections to others. Providers were then invited to present at academy trainings, in-service trainings, and roll calls to explain who they serve, the services that they provide, and the referral process.

Sites also identified other barriers to collaboration. One is a history of tension or mistrust between a provider and law enforcement. Another is the perception that providers and law enforcement have different goals that are in opposition. For some providers, the population that they typically serve is mistrustful of law enforcement and as a result, the provider must carefully navigate their relationship with the police department while ensuring they do not alienate the victims they serve. Several partners noted that the level of involvement exceeded their expectations, and some had difficulty maintaining a high level of involvement in addition to their day-to-day work responsibilities.

## Key Lessons Learned

There are several lessons that have been learned through the implementation of CH that law enforcement agencies should consider when engaging in similar efforts.

It is essential that there is buy-in at the police department's executive leadership level and from officers in supervisory positions. Identifying champions within the department that can assist in building internal support for the effort was an effective strategy for some sites. It is also helpful when the person leading the day-to-day CH activities has autonomy to make decisions. Of course, it is understandable that some decisions require executive level or supervisory approval, but progress can be hindered and time squandered when the lead does not have reasonable latitude to make decisions.

It will take dedicated staff, time, and resources and the allocation of these resources must be supported at the executive leadership level. It is not enough to voice support without real commitment to ensuring that resources are and will continue to be available.

It is important to engage partners and community members as soon as possible and for them be a part of the decision-making process around which strategies and activities to implement. This will likely increase their commitment to the program and cultivate stronger relationships, which aids sustainability. Many community partners noted the importance of including community members in decision making and that not doing so contributes to a lack of support for the project. Many communities have had poor experiences with previous related efforts, and they need to be reassured that your initiative will be different.

While many communities do have the resources to support victims, the underlying need is in improving coordination and communication between law enforcement and providers and between providers themselves.

Building a trusting relationship between law enforcement and the community will involve honest and difficult conversations. It is critical that each be open to acknowledging the other's feedback—this is an important step in the process. Also, achieving collective healing requires long-term strategies. It is an ambitious goal, and all involved should recognize that change will not occur overnight and there will likely be setbacks. Long-term commitment to this work is essential. The quotes below demonstrate the challenges that sites face in overcoming entrenched perspectives from both law enforcement and the community.

A final lesson learned is the importance of identifying measurable outcomes before implementation starts and to collect data throughout the project. Consider what you are trying to change, and how you can measure that with the available resources. For example, if one goal is to increase access to victim services, what activities will be implemented to achieve that

“Officers who have been here for twenty-plus years are jaded and think, no matter what we do or say, people are still going to hate us.”

—*Police Personnel*

“Most of the community do not see hope in building a better relationship with law enforcement. That is why it has to be a constant and continuing process.”

—*CH Partner*

goal, what is likely to change as result of those activities, and how can that be measured? Maybe it is by tracking funding related to victim services that is applied for and received. Or perhaps it is by tracking the number of referrals to services that are provided to victims and the number of victims that access the services. It could be all of these options.

What is critical is that this planning happens before activities are implemented to ensure the capacity exists to collect the identified necessary data. This will help to determine how well the site strategy is working and whether any refinements or adjustments need to be made. Tracking expected outcomes will allow sites to make course corrections in real-time. Being able to document success will also help to leverage and apply for additional funding. To sustain the efforts and achievements of the CH program and similar initiatives, it is essential that programs demonstrate their effectiveness and impact through performance metrics. By doing so, programs will be much more likely to receive future funding and to continue their important work toward collectively healing their community.

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