

2018 CJCC Fall Public Meeting

Violence Prevention in the District of Columbia

Introduction

On Thursday, October 18, 2018, the CJCC's annual Fall Public Meeting took place in Ward 5, at Israel Baptist Church. Approximately 80 persons attended the public meeting and included diverse demographics, including community activists, church members, system involved youth, CJCC Partner agencies, and returning citizens. The goal of the meeting was to explore the realities of violence in the District of Columbia, and to identify ways to establish a "New Normal" in how government entities, community members, and individuals respond to violence. Breakout sessions and a roundtable discussion involving advocates and practitioners engaged meeting attendees in identifying community-inspired and results-oriented approaches to preventing and reducing violence.

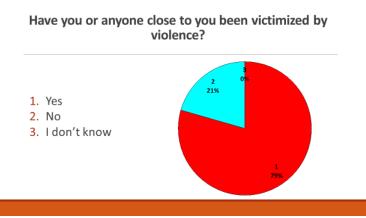
Mannone Butler, CJCC Executive Director, welcomed attendees and CJCC Partners, as well as other agency and community stakeholders. She encouraged everyone to speak candidly regarding their hopes, expectations, and fears. Director Butler emphasized that no individual agency or system can implement solutions on its own, and an effective response must include a collective approach.

Director Butler introduced Israel Baptist Church Interim Pastor, Reginald Green, who offered welcoming remarks. Pastor Green reflected on his experiences growing up in the District and witnessing a variety of changes. He cited the church's commitment to helping the District and the immediate community.

Audience Survey

Meeting attendees participated in an interactive survey designed to measure baseline demographic information and display real-time responses to questions about violence in the District.

Almost 80% of the participants stated that they or someone close to them had been a victim of violence.



Over 80% of the respondents stated they were "very concerned" about violence. When asked about preventative measures, 69% of respondents stated they saw increased prevention and early intervention as an effective approach, and 87% of the audience stated that government leaders, law enforcement,



community organizations, individuals, and public health officials are collectively responsible for changing attitudes and norms around violence.

Personal Testimonial

Khalil Munir, CJCC Policy Analyst, introduced Ryane Nickens, President of the TraRon Center, to provide her personal testimonial on how violence has influenced her life and work.

Ms. Nickens provided a compelling narrative of her life story. She recounted how at age 12, her uncle called at 2:00 am to deliver the news that another uncle had been shot dead in a case of mistaken identity. Two years later, Ms. Nickens' pregnant sister was killed in an argument with a next door neighbor. The neighbor then shot at Ms. Nickens' mother, brother, and another sister, before her mother killed the assailant during a struggle. At age 17, Ms. Nickens learned that a little boy had found her brother dead in the Washington Highlands neighborhood of the District. The recurring violence against her family caused Ms. Nickens to attempt suicide.



productive and healthy lives.

These experiences laid the groundwork for Ms. Nickens' call-to-action to assist others in addressing their grief. As a Howard University divinity student, she organized 15 mothers of murder victims for a conversation about community safety. That gathering resulted in the creation of the TraRon Center to help victims deal with their trauma, including peer counseling and art therapy. The Center works with children in the community who have encountered violence. Ms. Nickens remarked that she believes people who care for each other do not kill each other. Further, she emphasized her belief that it is critical to showcase success stories to children subjected to violence, in order for them to develop an appreciation that the trauma they have experienced is not normal, and that there are individuals within their community who have avoided violence and lead

Ms. Nickens stressed several key points. First, the District should celebrate a weekend without anyone being killed, then strive for a week, a month, and year without a killing. Second, she rejected the notion someone offered about her brother's murder, "he was in the wrong place at the wrong time!" She countered "...had he been in Ward 3, there would be no wrong place or time." Finally, she stated that no place in the District should ever be the "wrong place". Ms. Nickens concluded her remarks by noting that it is critical to instill confidence in children so they can overcome adversity and achieve success. Most importantly, Ms. Nickens stressed the importance of community members working together to achieve a "New Normal" on violence in the District.

Breakout Discussion Group Summaries

A facilitator led each group and posed specific questions to generate community-inspired recommendations to achieve a "New Normal" of responding to violence and its consequences. Each group was asked to explore specific questions.



- Why do some individuals resort to violence?
- Who is impacted by the violence and what are their reactions?
- What practical alternative can be used to de-normalize violent acts in our communities?
- Identify at least once action that each of the following groups can take to help de-normalize violence and shift attitudes about violence in our communities?

Participants provided a range of responses on why people resort to violence, including: lack of self-love; self-defense; accepting violent behavior as normative; trauma; gang-initiated behavior; images portrayed on TV and in the movies could inspire violent behavior. Additional ideas cited the lack of positive male role models as a contributing factor, and, some communities accept violence as a way of life. Many believed that in some communities violence is generational and learned, to the point that violence begets more violence. Further, some communities lack stable family structures. Generally, participants agreed that many stressors contribute to individuals pursuing their own survival instinct of "street justice" through violence. This behavior correlated with the idea that people experiencing pain sometimes resort to hurting other people.

Discussion participants agreed that violence impacts communities, directly affecting males between the ages of 18-24, including a pervasive fatalistic outlook. They do not expect to live a long life, consequently believing there is nothing awaiting them in the future and succumb to a self-fulfilling prophecy of an early death, incarceration, or both.



Further, participants commented that survivors of violence suffer with long-lasting symptoms of trauma. Often, victims develop Post-Traumatic Stress Disorder (PTSD). Children in particular may lose their sense of security and innocence; to cope, they may gravitate to groups that offer a false sense of belonging and protection such as gangs or crews. There, they might learn, internalize, and engage in violent acts. Discussion participants mentioned some residents experience fear and anxiety regarding potential acts of

violence.

Discussion groups indicated law enforcement is affected as well. Some group members said an expectation exists that police are supposed to solve crimes. At the same time, many communities hold a belief that police are the enemy, and "snitches get stitches," so community members hesitate to provide valuable crime-solving information.





Solutions

The groups proposed solutions that touched on all areas of a community, including parents, teachers, organizations, and government services. Discussions emphasized changes in core values surrounding violence, as well as addressing underlying issues that often contribute to a violent culture. Suggestions included: helping community members appreciate the value of better life choices; expanding community programs; promoting healing relationships; and, approaching violence as a public health problem. Additional suggestions focused on teaching communities to care for each other, providing alternative models to violence, and providing trauma-informed practices and care. Other solutions included

developing and implementing community-wide mediation programs, and providing trauma/mental health screenings. Discussion participants highlighted the importance of creating survivor-centered responses, and dedicating efforts to ensure that schools and community spaces are safe spaces. One solution involved ensuring that people have more to live for, so that they will choose life-affirming behavior as opposed to violent actions that can potentially result in death and trauma.

Group participants discussed including restorative justice practices within the adjudicatory process. Other suggestions were: teaching young people conflict resolution at an early age, teaching elementary students

the importance of mindfulness and not resorting to their destructive and violent impulses, and learning the practice of controlled breathing to calm themselves when agitated. Discussion groups also focused on identifying and providing trauma-informed care services, and providing survivor-centered services for victims. A number of discussion members proposed parent mentoring, teaching parents the essentials of child-rearing by providing tangible positive examples. In a mentoring approach, support services, such as supplemental food and health care (both physical and mental) would need to be provided as well. Some highlighted that young parents may lack positive role models, emotional maturity, and practical experience.

Suggestions included ending sensationalized violent images in the media, on television, and the movies, because in some instances people act out what they have seen as a form of entertainment. Additionally, participants posited that alternative positive role models who maintain a different attitude to violence could change community values and responses. In addition, participants believed that fairer media coverage in communities afflicted by violence, specifically highlighting the reality of hard-working families struggling to remain intact, would change perceptions.





Breakout session discussions emphasized that youth and other victims often navigate dangerous communities. To address this issue, some suggested that churches should remain open and serve as "safe spaces" after school, in conjunction with keeping neighborhood schools open.

Other strategies included viewing violence and violent behavior as a public health problem, and utilizing systemic approaches, similar to tackling disease. Utilizing a public health strategy would require an integrative approach across different disciplines, including health and social services, victims' assistance, etc., in addition to identifying and applying collaborative community-based strategies and partnerships. One suggestion proposed that the Department of Human Services (DHS) should incorporate violence prevention as part of its routine healthcare; also, DHS should integrate violence prevention into its basic care strategy.

Discussion groups were asked to identify at least one action that each of the following groups can take to help de-normalize violence and shift attitudes about violence in our communities:

- o Law enforcement
 - Increase community policing
 - Officers should live in the communities they are policing
- Health and Human Service Agencies
 - Incorporate violence prevention as part of their routine healthcare, in addition to integrating

a violence prevention strategy and providing basic care

- Support affordable housing
- Community members
 - Build healthy trusting relationships among groups and communities
- Leaders of non-profit or advocacy groups
 - Teach proportionality in response to aggression or conflict
 - Personally and institutionally, it is important to practice what you preach
- Schools
 - Incorporate restorative justice programs and curriculum
 - Remain open after school and serve as "safe spaces"
 - Provide trauma-informed care
 - Provide healthy masculinity training
- o Families
 - Stop normalizing violence
- Faith-based institutions
 - Become pillars of the community by offering their churches as safe spaces after school
 - Provide services to the people in their communities





Panel Discussion

Following the breakout group discussions, Dr. Roger Mitchell, Jr., Chief Medical Examiner of the District of Columbia, moderated a panel discussion that included:

- Silas Grant, Civic Activist
- Del McFadden, Director, Office of Neighborhood Safety and Engagement (ONSE)
- Lashonia Thompson, Restorative Justice Facilitator, Office of the Attorney General (OAG)
- Ivy Hylton, Youth and Families in Crisis
- Dana McDaniel, Program Manager, Department of Youth Rehabilitation Services (DYRS),
- Ryane Nickens, Director, The TraRon Center



Dr. Mitchell began his remarks by stating that as the CME, he has a heightened awareness of violent deaths experienced by District residents. He recapped the previous discussion highlighting trauma and the need for a comprehensive response. The panel discussion was structured around specific questions posed to the panelists.

The first question asked the panelists how they will incorporate the suggestions from the breakout session into their work.

Mr. Grant commented that no one owns the solution alone, and that each group or organization plays a role in responding to violence and

creating a "New Normal". He remarked that Pastor Green's remarks restored his faith in the church addressing some of the entrenched problems affecting the community.

Mr. Mc Fadden commented that it takes everyone engaged in a coordinated effort to effect change. He mentioned the value of utilizing asset mapping of existing resources to support anti-violence efforts. His suggestions included providing support for those efforts, and that everyone needs to work together with a sense of urgency to tackle the problems existing across District communities.

Ms. Thompson said that it is important to address the "stop snitching" culture, and that this mentality might be a cause of violence, because young people do not feel they can confide in anyone. She explained that this reasoning leads young people to believe their only available response is violence. Ms. Thompson said youth need to know they can confide in a trusted adult and that their actions are not "snitching." She said that employing restorative justice practices and the Cure the Streets initiative helps her work.

Ms. Hylton said the discussion reinforced her belief that we must reexamine the role of the family on the impact of violence and social conditioning. She stated that reeducation, including the restorative justice process, can teach families how to have conversations with each other, which will in turn build deeper family relationships.

Ms. McDaniel said that it is important to look at youth violence as a symptom of a larger problem, and that we must focus less on "fixing" the youth, and instead address the root causes driving their behavior. Their conduct is reflective of a damaged and broken system.



Ms. Nickens commented that resources to change the narrative exist within the room, but lack strong relationships to do the work. She emphasized that we need to build trusting relationships and healthy communities.



In his second question Dr. Mitchell delved into the premise of creating a "New Normal" by changing the narrative. He cited the statistic that 1 in 3 black men have had contact with the justice system. What about the other 2 out of 3 men who don't have contact with the justice system? What is their narrative? He asked what new narrative the panelists want to tell, including events in the community, and what narrative the panelists want to see become a reality.

Mr. Grant said he's never seen a period where people who are at-risk and most susceptible to violent offenses are so open to positive opportunities. He stated that the men engaged in violent offenses say they want and need jobs. Mr. Grant said he believes the community is in a place where the people who need help most are likely to listen. He encouraged everyone to start talking more about success stories and identifying their commonalities.

Mr. McFadden cited the Pathways Program and mentioned 24 individuals who enrolled and completed it. He said 18 of the 24 found jobs. He mentioned that the main thing the program graduates say is they have experienced an individual and global change in perspective. Their mindset has changed, which forms the foundation for creating a "New Normal". Mr. McFadden said the common denominator is that each of the placed program graduates is open to new and different life opportunities, and Pathways opened doors for them to create a "New Normal."

Ms. Thompson expressed that violence spreads like a disease, and therefore can and should be treated like a disease. She explained that if you look into communities you will be able to see that crime is an epidemic. She offered the example of smoking and how it used to be the norm until there was a major effort to prevent smoking by demonstrating its harmful effects; now, it's very rare to see smoking in public areas. Smoking is no longer viewed as normal behavior. She suggested that the same approach should be applied to violence. Further, she explained that youth believe they have to defend themselves because they think it is normal behavior, but that it important for those youth to learn a "New Normal".

Ms. Hylton expressed the "New Normal" required looking inward and utilizing positive thinking before responding outwardly. She stated that the universe is mental, and that if you transform thoughts you can transform the world. She highlighted the need for people to learn how to be kind.



Ms. McDaniel said that to have a new narrative you need a new storyteller. She suggested that violent offenders and victims both should express their truth, as opposed to the narrative provided by journalists, articles, or newscasts. She stressed that the real experts are the people affected by violence.

Ms. Nickens emphasized that in her work she is redefining success and that it should not be measured by material things, but instead, by the positive image you see in the mirror. She said it is important to remove the success images of rappers and movie stars. Success can and should be measured by what you do.

Dr. Mitchell's final question asked what to do next. He expressed that he wanted everyone to walk away with something to do. From your vantage point, what are the best practices on next steps?

Mr. Grant said it is important to understand that when we engage with youth who resorted to violence over something we perceive to be petty, we should never trivialize their conflict because the incident is important to the persons experiencing it.

Ms. Nickens noted that people engaged in anti-violence work must engage in self-care to remain healthy.

Ms. Mc Daniel said we are involved in the business of saving people. She emphasized the importance of engaging young people wherever and whenever you encounter them, and to be sure to inquire about their welfare, even if you do not provide them with money.

Mr. Mc Fadden encouraged all community members, organizations, activists, policymakers, and others interested in creating a "New Normal" to meet people where they are. He emphasized it is important to understand the context of the existing realities associated with violence, such as trauma, lack of education, and personal attainment.

Ms. Thompson encouraged attendees to reach out to the CURE the Streets staff, violence interrupters, and people in the community trying to make a positive difference for District residents. She mentioned the National Association for the Advancement of Returning Citizens (NAARC), and mentioned an initiative where they meet every week to discuss strategies and approaches with community members. Ms. Thompson encouraged everyone to reach out and work with them. She said they have a lot to offer, and to learn from them. "Your staff can learn from them on how to engage the people who are on the streets, because people are reentering society, and people on the outside need to engage with persons who are incarcerated prior to their release back to society."

Ms. Hylton commented on mindfulness and restorative justice, finding balance in life, restoring harm, and repairing relationships. She concluded her remarks by asking everyone to participate in a brief mindfulness breathing exercise.

Closing Remarks

Director Butler concluded the meeting by expressing optimism about establishing a "New Normal" in violence prevention. She acknowledged the hard work being done by all parties across the District, and thanked Dr. Roger Mitchell, Jr., the panelists, CJCC staff, and public meeting attendees for participating in the program.