

Community-Based Violence Intervention Central Hub Model Overview

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Introduction

Community violence is a persistent issue in the U.S. requiring ample support for victims. The Community Violence Intervention (CVI) Hub model is designed to be a victim-centered approach to address the needs of victims. A community-based central hub model for violence intervention serves to coordinate and deliver comprehensive support and resources to victims of violence needing guidance and recovery help. The CVI Hub model encompasses a range of crucial elements to ensure a comprehensive structure for helping victims. The components include an assessment and needs identification for the victim to customized safety plans and progress monitoring and evaluation. A CVI Hub model cannot operate without the cooperation and collaboration of other organizations to ensure a tailored safety plan for the victim's recovery. Each component in the hub model has its own critical role to optimize the recovery for the victim.

CVI Hub Model Components

After the CVI Hub model identifies a victim of violence, a needs assessment is conducted. The assessment involves evaluating the victim's specific needs. Determining circumstances of the victimization, understanding trauma histories, and assessing social risk factors are critical steps in comprehending the victim's life situation and efficiently determining their needs (Beidler et al., 2022). Emergency needs take precedence, and the victim is given the opportunity to identify and prioritize their requirements (Office for Victims of Crime Training and Technical Assistance Center [OVCTTAC], n.d.). The needs

assessment is a dynamic process, as needs may change over the short- and long-term, making it an ongoing engagement with the victim. Gathering this information is essential to create a personalized plan to address the victim's unique situation.

Another component to optimize a CVI Hub model is a comprehensive resource database. Factors associated with negative outcomes like food insecurity and/or housing instability are known as “social risk factors” (lott et al., 2021). Addressing social needs is of the utmost importance to establish a strong foundation in recovery. Selecting an appropriate referral source entails identifying various resources and assessing their quality to ensure suitability for the victim. The database can encompass referral sources for active violence intervention programs (via community organizations) and the services they provide and any specific demographic they serve (for example, 18–25-year-old males). Furthermore, the database should include information on service providers operating in clinical settings, mental health support environments, counseling places, and more. It is essential to note that services are not always permanent, and depending on the frequency of database updates, the listed resources may not accurately reflect what is available for victims (lott et al., 2021). Sharing a comprehensive database with collaborating organizations fosters interorganizational communication, optimizing the availability of existing referral networks and services. The maintenance and routine updating of this database is crucial to facilitate all connections to community resources, aiding patients in navigating complex care systems.

Based on the needs assessment, the hub can begin to orchestrate a customized referral plan for the victim. The referral plan makes use of the central hub database to identify any organizations, programs, and other services that align with the victim's needs.

Referrals facilitate the establishment of connections and networks between the victim and these organizations, allowing for the building of interpersonal relationships and networks, and the sharing of technology (Iott et al., 2021). The referral plan will facilitate and reinforce trust between the victims, the organization, and the central hub. The referral plan is intended to comprehensively address the various needs that have been identified and outline the services best suited for the victim.

A victim is referred to and seamlessly connected to the services outlined in their plan. As the process is in motion, the central hub initiates follow-ups with an organization's contacts working with the victim. Follow-up is necessary to confirm that they have successfully accessed the referred services in order to document their progress. Ideally, the victim will have been guided through the various steps of their referral plan, which may include assistance with identified needs such as employment or mental health counseling. The ultimate goal of the referral plan is to guide the victim towards self-sufficiency, marked by successfully matched referrals and the fulfillment of their identified needs.

The CVI Hub model will also utilize case coordinators to work closely with the victims throughout the process (Giardino & De Jesus, 2023; Iott et al., 2021). The coordinator is there to help the victim and their family navigate the services. Case coordination and

management provides guidance and support to the victim and can communicate any feedback from the victim's experience to the hub (Giardino & De Jesus, 2023). Learning about the quality of services from a feedback loop can help develop a better understanding of where to best refer victims (Iott et al., 2021). The feedback loop is crucial to be able to continuously evaluate the effectiveness of these services and enable adjustments and improvements. Case management is a dire need of many victims, and with proper coordination, the victim's journey can be cohesive and structured to respond to their needs.

Violence can be dynamic and fluctuate over time; it is important for the CVI Hub model to be flexible and scalable. Adaptability enables the model to expand and accommodate increasing caseloads while continuing to respond effectively to the changing needs of the victims and the community. The model needs to embed itself in the locality through understanding and cultivating relationships with the community (Nardini et al., 2022). Forming bonds with other organizations and creating a collaborative structure can broaden the social impact of the program in a given area. Furthermore, investing time, effort, and resources to strengthen relationships with local organizations and the community can empower and foster a sense of community ownership of the program, which can further develop and promote the hub's efforts.

Lastly, a crucial component for the CVI Hub model is collaboration and cooperation with community organizations. The relationships between the hub and community organizations help to perpetuate the functionality of the Central Hub model. The hub

cannot operate or refer victims without organizations to provide services. Databases and communication technologies are beneficial, but it is important that organizations have strong relationships with one another and the Central Hub to facilitate connections and to build trust with the victims (Iott et al., 2021). Collaborating with organizations ensures a team effort to help the victim and uncover additional organizations and services for future referrals. Effective collaboration is pivotal for the victim, as it allows for a seamless handoff from the Central Hub. Additionally, partnered organizations can add progress evaluations and incorporate suggestions for continuous improvement. Furthermore, the sharing of data can be facilitated between organizations and the Central Hub. Leveraging strong relationships, community expertise, and referral databases, partners can exchange information over a secured connection to enhance coordination and support with the most trusted, up-to-date resources for the victim.

Infrastructure Needs

Infrastructure elements are also essential for a CVI Hub to operate effectively. These elements include: the provision of physical space to facilitate unity for victims and staff; and, establishing a reliable source of funding to increase the odds of success (Bradach, 2003). Hub leaders can focus their time on improving the program instead of determining ways to raise funds. Furthermore, making those costs and revenues transparent is important since funders request performance metrics which reflect the costs of providing programs. Additionally, the training and availability of qualified staff is crucial for every component of the process. Without the appropriate staff in the right positions, the victim's

services and ultimate success could fall short. Establishing the case database for victims is critical to ensure current, relevant information on the victim, such as where they are being referred and where they were referred from. Just as important, the victim's progress must be meticulously tracked to ensure the proper evaluation of the model. The maintenance of a comprehensive database for referrals is imperative for the efficiency of the hub's operation. Having access to one database with all up-to-date resources and services allows staff, victims, and partners to contact and refer other organizations to best address the victim's needs.

Challenges

The CVI Hub model can face both expected and unexpected challenges in its development. One anticipated challenge for the hub model is developing and maintaining the resource database (Beidler et al., 2022). The database is expected to expand over time, ensuring that the referral lists are up-to-date and accurate can prove to be time-consuming. Designating staff to update the database, creating a schedule to regularly update it, and using feedback from referred victims can assist with refining and updating the database. An additional challenge is ensuring that the referrals align with the victim's needs. The referrals require an ample amount of knowledge of the victim as well as a significant understanding of the community resources. If caseload exceeds the capabilities of the staff, victims may not be provided with the best services to fit their needs. Integrating a public access portal for the referral database can resolve this problem. Victims can view the options of community organizations based off services like

food, housing, employment, etc. and narrow their options to what they feel would be the best fit.

Conclusion

A CVI Hub model is an ambitious feat that requires each component to operate cooperatively with each other. Failure to operate in harmony will cause the model to fail which in turn will fail to assist violence victims. The needs assessment is crucial to determine the referral plan, build the resource database, and network with organizations for the optimal safety plan of the victim. No program is without its challenges and a CVI Hub model will certainly have obstacles to overcome. However, with a constant feedback loop and participation from organizations, issues can be identified early on and addressed. Violence is a constant, fluctuating public health issue, and a CVI Hub model can prove to be a sanctuary for victims of violence with its network of resources and services to meet their targeted needs.

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