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Long Beach Activating Safe Communities (LB ASC)
Final Report
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I.   Background

The Washing Neighborhood (WN) is defined as a two-by-two block grid from Magnolia Avenue to Long Beach Boulevard and Pacific Coast Highway to Anaheim Street. Located in Central Long Beach, CA 90813, WN is within one of the most economically depressed and least healthy areas in the City of Long Beach (CLB) with a CA Healthy Place Index of 5.6% (The Public Health Alliance of Southern California, 2022). Most residents in the WN live below the poverty level and the median household income is $28,706 as compared to $52,782 citywide. Furthermore, the WN is an area where multiple factions of the City of Long Beach's largest criminal street gangs operate, which often results in territorial firearm assaults. Higher gun-related murder and firearm assault-related arrests in this area speaks to the continuous hostility residents encounter, resulting in persistent community-level trauma that impacts everyday life for WN residents. In 2018, 40.2% of firearm assaults and murders in the City of Long Beach occurred in the West Division where Washington Middle School borders the WN. Over 1,000 children ages 12-14 attend this middle school and are exposed to the threat of community violence daily. Additionally, the WN is predominantly a community of color, comprising of 71.5% Latino and 15.4% Black. According to the Long Beach Police Department (LBPD) from 2014-2019, 83.9% of perpetuators and 77.5% of victims from gun-related homicides and aggravated assaults in Long Beach occur among the Black and Latino population.

To interrupt the cycle of violence and to reduce the incidence of firearm assaults and aggravated assaults that lead to high violent crime rates in the WN, the Long Beach Department of Health and Human Services (LBDHHS) developed the Long Beach Activating Safe Communities (LB ASC) Program. The two main goals of the LB ASC Program were to (1) establish a coordinated citywide gun violence response system and (2) to reduce the incidence of firearm assaults and aggravated assaults by activating the WN through a comprehensive street outreach and intervention model. The City of Long Beach Gun Violence Response System (CLB-GVRS) utilizes a collective impact approach to offer a sustainable system to reduce gun violence by focusing on strengthening collaborations and relationships between organizations and the residents of Long Beach. The public health evidence-based street outreach, life coaching, and case management intervention targeted youth and emerging adults between the ages of 13-24 most at risk for engaging in or becoming victims of violence. The intervention aimed to provide case management and street outreach services to families impacted by gun violence and link participants to life coaching services and engagement in community activities.

Purpose

This final report will provide results of the LB ASC Program including the development and implementation the CLB-GVRS as well as the case management and street outreach intervention from February 2021 to May 2023. The report will summarize findings from both the process and outcome evaluation as outlined in the Local Evaluation Plan. A discussion of the findings is included with recommendations for areas of improvement for future initiatives. Finally, a snapshot of the program's overall outcomes is provided in Appendix A using the template for the Quarterly Progress Reports. This section will include results of the program's participant enrollments, services received and exits, as well as participant outcomes.

II.   Process Evaluation

A.   Methods and Design

The RE-AIM (reach, effectiveness, adoption, implementation, and maintenance) framework (Glasgow et al., 2006) has been used to guide the evaluation of the study to assess the implementation processes and the intervention outcomes. Process evaluation has involved the tracking of all participants reached and the achievement of the program's outputs including performance indicators across all multi-stakeholders, system leaders (city departments), Long Beach Unified School District (LBUSD), non-profit community-based organizations, and community residents participating in the LB ASC program. Service providers, staff members, and other relevant stakeholders have been included in the process evaluation via email messages, meetings with the Evaluator, and structured interviews. Participants were also included in the process evaluation activities specifically in focus group discussion. Focus groups were implemented with participants to further understand the impact the intervention and services provided have had on their lives. Data tracking of participant recruitment, enrollment, participation, retention rates, and exits was ongoing. Research questions guiding the process evaluation are outlined in Table 1.

Table 1. Process Evaluation Research Questions

Goal 1: Establish a coordinated City of Long Beach Gun Violence Response System (CLB-GVRS).	
Reach	1) What is the number of partnerships established with multi-stakeholders and systems leaders for the gun violence response system?
	2) What is the level of involvement of the multi-stakeholders and system leaders?
Effectiveness	3) What are the dynamics of the collaborative process that produce efforts in the intended directions?
	4) What are the dynamics that limit the efforts in the intended directions?
Adoption	5) To what extent and in what ways are the partners implementing the gun violence protocol?
Implementation	6) What are the barriers and facilitators to implementing the gun violence response protocol?
Maintenance	7) What are the solutions to resolving barriers and what are the best practices for maintenance?
Goal 2: Reduce gun related violence by activating the WN through a multi-sector, localized, youth and family-serving collaboration and street outreach model.	
Reach	1) What is the number of participants recruited, enrolled, and retained?
	2) What is the level of partner involvement?
	3) What is the level of participant involvement (dose of strategies received)?
Effectiveness**	4) What are the changes from pre to post in the number of youth reporting gun-related violence incidents?
Adoption**	5) What are the pre to post changes in youth?
Implementation	6) Were the project strategies (street outreach, life coaching, and case management) implemented as intended?
Maintenance**	7) What are the sustained participant changes from pre to post?

	8) What is the prevalence of gun-related violence in the Washington Neighborhood?

** Include research questions relevant to the outcome evaluation methods and design (See Section III).

Evaluation was led by the California State University Long Beach (CSULB) Center for Latino Community Health, Evaluation and Leadership Training with assistance from the LB ASC leadership team. The evaluation team: 1) developed and finalized evaluation instruments and protocols (See Appendices B and C); 2) sought Institutional Review Board approval; 3) trained LB ASC intervention staff and CLB-GVRS members in data collection, tracking and entry; 4) managed data collected and entered into appropriate databases for analysis; and 5) conducted all analyses for reporting results to the project team and to inform progress reports.

Data Collection and Management Procedures

Both qualitative and quantitative data were collected to complete the process evaluation. Process data was primarily collected by the CSULB evaluation team, LB ASC Program Manager, and the Toberman Neighborhood Center (hereafter Toberman) intervention staff. Quantitative data was collected using tracking forms and questionnaires via Qualtrics, a secure online data collection platform. Paper questionnaires were also available upon request. Qualitative data collection included meeting notes and transcriptions from focus group with study participants.

Process measurement tools for the case management intervention included recruitment tracking sheets, enrollment and participant tracking sheets, and participant meeting notes to track topics discussed, referrals made/accessed, as well as goal setting and progress. The evaluation team also used data collection tracking sheets and data summaries to assess reach via the case management intervention.

Additional process measurement tools for tracking community events and street outreach included monthly program calendars and a Qualtrics community event tracker form for partner organizations to complete. Data collection and management procedures for tracking street outreach and life coaching programming were used with Pacific Gateway Workforce Investment Network (PGWIN) and Long Beach Parks, Recreatio and Marine (PRM).

Focus groups were implemented in the final year of the program. The focus groups were conducted to assess the CLB-GVRS response system's implementation, effectiveness to link victims of gun violence to street outreach services, and program effectiveness for improvement in future initiatives. The focus groups were conducted in-person at different community organizations. The focus groups lasted between 45-60 minutes. The Evaluators served as the moderators and use pre-approved guides to provide instructions and direct the discussion. Exit interviews with key program staff were also incorporated as part of the process evaluation in response to an increased staff turnover rate. The interviews were scheduled within one-month of the staff's departure and are facilitated via Zoom or in-person. The interview took 60 minutes and were facilitated by the Evaluator. Exit interview questions were developed by the Evaluator in collaboration with the LB ASC leadership team and were tailored to address program activities specific to their role.

All data collected was managed by the evaluation team at the CSULB Center for Latino Community Health.

Measures

Process measures for data collection included:
  (1) Number of partners in the CLB-GVRS
  (2) Number of case management participants who entered/exited program
  (3) Tracking of participants' program adherence and success
  (4) Documentation of the services provided at Toberman
  (5) Documentation of staff activities and coordination with LB ASC to link participants to services.

Data Analysis

All quantitative data collected via the tracking forms and questionnaires were entered and analyzed using Microsoft Excel and IBM SPSS (Version 26) software. Focus groups were audio-recorded and transcribed by the evaluation team. Transcripts were checked for accuracy and discrepancies corrected under the guidance of the Evaluator. Transcripts and other qualitative data (e.g., open-ended responses from questionnaires) were uploaded into Dedoose (Version 8.3.17) for analysis. Qualitative data was analyzed for specific themes and categories. A coding system of themes and categories was developed by evaluation team to guide the qualitative data analysis. Similarly, qualitative data collected from the exit interview was transcribed and reviewed by the Evaluator. A summary of themes raised was then developed to inform program improvement.

B.   Process Evaluation Results

Summary

The CLB and the LB ASC leadership team established strong collaborations, especially with LBPD, to develop and implement the CLB-GVRS. A total of 10 community partner events including meetings, interviews, and a focus group were facilitated primarily by the Urban Peace Institute (UPI) and CLB to inform the development of the CLB-GVRS protocol. The developed CLB-GVRS protocol was approved by all key collaborating organizations involved and a "soft" launch of the protocol was established in August 2022.

Efforts towards meeting Goal 2 were consistently problematic throughout the project period. Problematic implementation was due to a variety of reasons outside the control of the LBDHHS including: 1) unforeseen challenges related to COVID-19, 2) staff turnover at LBDHHS as well Toberman, 3) red tape hindering contract development and onboarding that delayed implementation of the case management intervention and street outreach model, and 4) inconsistent implementation of project protocols and case management by Toberman staff due to varying community participant needs and interest in enrolling to the project.

A total of fifteen (15) participants successfully enrolled in the case management intervention facilitated by Toberman. Table 2 provides a snapshot of process evaluation results.

Table 2. Process Evaluation Results

RE-AIM Constructs	Research Questions	Progress To Date
Goal 1: Establish a coordinated City of Long Beach Gun Violence Response System (CLB-GVRS).		
Reach	1) What is the number of partnerships established with multi-stakeholders and systems leaders for the gun violence response system?	A total of **17** partner organizations were involved in the development and establishment of the CLB-GVRS protocol. Organizations include: 1. LBDHHS 2. Urban Peace Institute (UPI) 3. Long Beach Police Department (LBPD) 4. Long Beach Unified School District (LBUSD) 5. CSULB Center for Latino Health 6. Toberman Neighborhood Center 7. Washington Neighborhood Association 8. Habitat for Humanity 9. Restore Inc. 10. Homeboy Industries 11. Centro CHA 12. PGWIN 13. Books and Buckets 14. Long Beach Fire Department (LBFD) 15. The Guidance Center 16. Memorial Care Hospital 17. St. Mary's Hospital From the 17 partnerships established, **7** organizations played an active role in the CLB-GVRS protocol. Organizations included: 1. LBDHHS 2. LBPD 3. Toberman 4. LBUSD Washington Middle School (only when incident involves or is close to school) 5. The Guidance Center 6. Memorial Care Hospital 7. St. Mary's Hospital
	2) What is the level of involvement of the multi-stakeholders and system leaders?	All 7 organizations included in the protocol were directly involved in the development and "soft-launch" of the CLB-GVRS protocol. The LB ASC Program Manager held monthly leadership meetings with LBPD to discuss the design and implementation of the CLB-GVRS protocol; additionally, LBPD provides updates on incidents in the WN.

			The LB ASC Program Manager also held monthly meetings with the Toberman Case Manager and Peacekeepers at Washington Middle School and other LBDHHS facilities.
			All partner organizations in LB ASC were invited to assess the effectiveness of the CLB-GVRS protocol during monthly LB ASC Leadership Meetings, as well as through focus groups.
Effectiveness	3)	What are the dynamics of the collaborative process that produce efforts in the intended directions?	Established trainings and one-on-one meetings between partner organizations and the LB ASC leadership team provided a foundation by which to expand the collaborative process across all partner organizations. Monthly leadership meetings began in November 2022 to establish a stronger collaboration between partner organizations involved in LB ASC.
	4)	What are the dynamics that limit the efforts in the intended directions?	One of the primary barriers early on in developing and implementing the CLB-GVRS protocol was COVID-19. COVID-19 led to delays in onboarding staff and limiting in-person activities. Staff turnover at Toberman Neighborhood Center as well as delays in subcontract set-up greatly affected deliverables at Toberman.
Adoption	5)	To what extent and in what ways are the partners implementing the gun violence protocol?	All organizations involved with the CLB-GVRS approved the protocol and agreed to their roles. LBPD, especially, was active using the CLB-GVRS protocol since August 2022.
Implementation	6)	What are the barriers and facilitators to implementing the gun violence response protocol?	The LBPD was able to activate the CLB-GVRS protocol and reported incidents to the LBDHHS staff for deployment of Toberman peacekeepers. Barriers to implementation included lack of awareness of CLB-GVRS by all police officers and staff and lack of standardized procedures for activating the protocol. See focus group findings on page for more detailed findings.

Maintenance	7) What are the solutions to resolving barriers and what are the best practices for maintenance?	Solutions mentioned in focus groups include creating standardized protocol at LBPD for all to follow.

Goal 2: Reduce gun related violence by activating the WN through a multi-sector, localized, youth and family-serving collaboration and street outreach model.

Reach	1) What is the number of participants recruited, enrolled, and retained?	**Case Management Intervention (Goal=30)** Number of participants recruited: 19 Number of participants enrolled: 15 Number of participants retained: 10 **Life Coaching (Goal=75)** Number of participants enrolled: 47 youth **Be Safe/PRM Activities (Goal=400)** Number of youth/adults engaged: 197 **Street Outreach (Goal=750)** Number of WN residents reached: 1,306 Number of youth: 589 (included in total reached)
	2) What is the level of partner involvement?	**Case Management** Toberman was onboarded to implement the case management intervention and they were directly involved in the implementation of the intervention. However, Toberman experienced multiple delays in fulfilling their responsibilities due to an increased rate of staff turnover. Since being onboarded, Toberman had eight (8) staff leave the organization including key leadership. Staff turnover at Toberman led to delays in hiring and training the two Peacekeepers and Case Manager needed to implement the intervention which delayed the implementation of the intervention activities. The Peacekeepers and Case Manager were very active in program planning and street outreach since being onboarded in February/March 2022. They met with the LB ASC Program Manager on an ongoing basis and participated in multiple trainings and events for LB ASC.

		The intervention team successfully began enrolling participants and engaging them in intervention activities in August 2022. In September 2022, the Case Manager left LB ASC, leaving only the two Peacekeepers to continue intervention activities. **Life Coaching** PGWIN was successfully onboarded to implement the life coaching component of LB ASC. PGWIN participated in LB ASC activities including the CLB-GVRS protocol kick-off meetings as well as attending multiple planning meetings with the LB ASC leadership team. PGWIN began engaging youth/young adults from the WN in their Youth @ Work program in July 2022, this program replaced the previously proposed Success Track. **Be Safe/PRM Activities** PRM was successfully onboarded to enhance youth and family focused events at the Seaside and 14th Street Parks in the Washington Neighborhood. Additionally, PRM events for LB ASC were scheduled and a calendar of events shared with the LB ASC Program Manager. PRM also participated in multiple meetings with LB ASC leadership for planning and tracking of LB ASC events. **Street Outreach** A few partner organizations were involved in facilitating street outreach community events. PRM and Toberman each hosted at least one of the community events in collaboration with LB ASC.
	3) What is the level of participant involvement (dose of strategies received)?	**Case Management** From the fifteen (15) participants enrolled in the case management intervention, participants were engaged in an average of 6.8 meetings (standard deviation 4.9) with a range between 2-20 times.
Effectiveness**	4) What are the changes from pre to post in the number	**Case Management** Although Toberman staff received training in evaluation procedures, no post data collection

		of youth reporting gun-related violence incidents?	occurred with case management participants. Only participant partially completed the post survey.
Adoption**	5)	What are the pre to post changes in youth?	No post data collection has occurred.
Implementation	6)	Were the project strategies (street outreach, life coaching, and case management) implemented as intended?	**<u>Case Management</u>** The case management intervention was not implemented as intended. First, staff turnover at Toberman led to several delays in hiring and training intervention staff, development of the intervention curriculum and protocols, and implementation of the intervention. Second, the intervention curriculum was not fully developed and guidance to case management was unclear. Toberman established a client journey map, however details of what each participant was exposed to in each meeting were not consistent across participants. Data collection instruments are capturing general topics discussed and referrals made in each meeting, however, a guide for the intervention staff to follow in facilitating these meetings was not provided. Third, participant recruitment efforts were difficult, peacekeepers disclosed difficulty in getting at risk youth to enroll in the project. Referrals from other partner organizations such as LBPD, PGWIN, PRM, Washington Middle School, and other community-based organizations were not established as intended. Aside from these challenges in implementing the case management intervention, the Peacekeepers have been effective in creating partnerships within the WN and completing street outreach activities. Both Peacekeepers are well integrated into the community and have provided invaluable insight to developing program protocols. **<u>Life Coaching</u>** Different from what was initially proposed, PGWIN replaced the Success Track programming with Youth @ Work. Of the 75 expected only 47 youth were enrolled. The

		Youth @ Work program provided work experience, training, and support services to program participants. **Be Safe/PRM Activities** To date, the program activities for this component have been implemented as intended. The only area for improvement includes participant tracking in efforts to eliminate double counting youth participating in multiple events facilitated by PRM. Referrals between PRM, Toberman and PGWIN may also be seen once the monthly leadership meetings are established and opportunities for collaboration are increased. **Street Outreach** Street outreach community events are being facilitated as intended. However, clearer methods for linking events to LB ASC are necessary. For example, a calendar of events should be created with lead facilitators. Improved data collection protocols (e.g., distributing raffle tickets) are needed to better report the number of community members reached through the events. Additionally, if possible, data collection should be tailored to measure whether the community members reached live in or spend the majority of their time in the WN.	
Maintenance**	7) What are the sustained participant changes from pre to post?	No post data collected.	
	8) What is the prevalence of gun-related violence in the Washington Neighborhood?	No post data collected.	

** Include research questions relevant to the outcome evaluation methods and design (See Section III).

Community Stakeholder Focus Group Findings

Community stakeholders were recruited by the LBDHHS LB ASC program staff. A total of five (5) community stakeholders participated in debrief focus group on June 29th 2023. Stakeholders represented the following organizations: Long Beach Police Department (2), Toberman Neighborhood Center (2), and the Guidance Center (1). The focus group was held via Zoom to

facilitate participation by different stakeholders. A moderator's guide was used to lead the discussion focused on the implementation of the CLB-GVRS. Dr. Melawhy Garcia, Director of Evaluation conducted the online focus group. Limitations to the discussion include the small sample size which can limit the depth of conversation and insight to the intended topics.

Activation of CLB-GVRS in Washington Neighborhood
Long Department Police Department staff reported using the CLB-GVRS to report incidents in the Washington Neighborhood which included contact Eduardo Garcia at LBDHHS in a timely manner to activate the protocol. Staff person expressed that enough information was given to LBDHHS to activate protocol and call in peacekeepers. Toberman Neighborhood staff reported receiving at most five (5) calls. In their role the Toberman staff primarily dealt with victims and families to link them to services. The Guidance Center representative wasn't directly exposed to the implementation of the response protocol however reported receiving "a couple of referrals" from Toberman specifically stating they were victims of gun violence.

Implementation of CLB-GVRS in Washington Neighborhood
Long Beach Police Department staff expressed concern over the lack of "no real framework or policy" to allow LBPD to give more information in a quick manner to LB ASC staff. Another recommendation was to develop a protocol to receive statistics related to violent crime incidence. From the perspective of Toberman peacekeepers, they reported not actually needed full details and only needing cross streets due to connections in the neighborhoods. Peacekeepers reported receiving calls from community members before getting notice from LBDHHS LB ASC staff. A major barrier reported by Toberman staff was the delay in receiving notifications before deploying to the areas where crime took place. "The problem was finding out 24 hours later and getting deployed 7 hours later." Other barriers noted by Toberman staff were the referral process for referring participants to city resources, from their perspective "there was not clear process although discussed in many meetings" as well as barriers to receiving services due to medical eligibility.

Recommendations for Future Programming
From the Toberman peacekeeper perspective it is important to show respect to the community in order to gain trust. Also, it is important to be mindful of the target audience being engage in terms of age, gender, language, and experiences with crime as different terminology is required to approach different individuals in the community. Lastly, Toberman staff shared the age criteria is restrictive as there may be way older gang members that can use intervention. From the LBPD perspective, there are several factors that delay notice such as lack of PD awareness to GVRS outside of those involved, "there needs to be internal mechanism" to quickly report an incident to the peacekeepers. The Guidance Center expressed interest in serving participants especially if there is separate funding to avoid barriers related to insurance coverage.

Solutions to Barriers to Implementing the CLB-GVRS
LBPD recommends an internal protocol at PD where watch commander should make an immediate notification to LBDHHS LB ASC staff as well a process to gain access to crime statistics to observe change over time. Toberman peacekeeper expressed concern over safety due to lack of companion when going to the neighborhoods. A solution proposed was to go in pairs. Another recommendation was to receiving training about street behaviors do's and don'ts including working with community members as well gang members. Peacekeepers need training in identifying gang members of today that don't fit the typical characteristics of older gang

members. The Guidance Center representative suggested the Unite Us application (a cross-sector collaboration software) a platform that allows doctors, stakeholders, make referrals and manage patient cases. Another suggestion was to empower community members to use the system report crime. The Homeless Management Information System (HMIS) was also mentioned as an example platform for communication and management.

Other Recommendations for Programing
Toberman staff recommended opportunities for at risk you to engage in arts (mural painting) and also to have for program visibility in the streets. To ensure that the community learns and about and accepts the program. This could be in the form of a social gathering without explicitly calling out violence prevention programs. Others recommendations from Toberman are to carefully screen those being hired to ensure they have the heart, confidence, and willingness to engage gang members and really care for doing this type of work. Hire within the community to ensure the peacekeepers gain access and get respect.

Additional Results for Goal 2 Activities

The multi-sector, localized, youth and family-serving collaboration and street outreach model established through the LB ASC program is implemented by the LB ASC organizational partners, including:
1. LBDHHS
2. LBPD
3. PRM
4. PGWIN
5. UPI
6. CSULB Center for Latino Community Health
7. Toberman Neighborhood Center
8. LBFD
9. LBUSD
10. Memorial Care Hospital
11. Saint Mary's Hospital

Additional collaborating organizations include Washington Middle School, the Washington Neighborhood Association, Habitat for Humanity, and The Guidance Center. Although collaborating organizations may not have an established MOU, the organizations have agreed to assist with referrals of potential intervention participants as well as help with street outreach at LB ASC community events.

Intervention Staff Trainings

LB ASC staff trainings for implementing the case management intervention began in March 2022, once the Toberman Case Manager and Peacekeepers were successfully hired. First, UPI facilitated two trainings in collaboration with the LB ASC Program Manager as well as guest speakers from several violence prevention organizations. UPI's trainings focused on providing the Toberman intervention staff and the Evaluator with an overview of the LB ASC program and its public health approach to violence prevention. UPI also outlined the role of the Peacekeepers and provided best practices for engaging with community participants. Second, a series of four

evaluation trainings were implemented by the Evaluator with the LB ASC Program Manager and Toberman intervention staff. The initial evaluation training provided an overview of evaluation and data collection needs for the LB ASC program. A total of eight (8) training sessions were implemented with Toberman staff to promote accurate participant recruitment, enrollment, and data collections. Table 4 outlines the details for all intervention staff trainings facilitated.

Table 4. Intervention Training Details (n= 6)

Training Date	Training Facilitator(s)	Training Purpose / Materials Reviewed	Participating Organizations	Number of Staff Trained
March 28, 2022	UPI, LB ASC Program Manager	Overview of the Public Health Approach to Violence Prevention, LB ASC Program, and Role of a Peacekeeper	LBDHHS Toberman CSULB	6
March 30, 2022	UPI, Guest Speakers	Rumor Control, Maintaining Consistent and Effective Communication, Strategic Collaborations and Referral Process	Toberman CSULB	6
June 2, 2022	CSULB Evaluator	Intro to Evaluation and Data Collection Protocols	LBDHHS Toberman	5
June 6, 2022	CSULB Evaluator	Review of Data Collection Instruments and Protocols	LBDHHS Toberman	4
June 13, 2022	CSULB Evaluator	Review of Data Collection Instruments and Protocols	LBDHHS Toberman	5
July 18, 2022	CSULB Evaluator	Review of Data Collection Instruments and Protocols	LBDHHS Toberman	4
April 5, 2023	CSULB Evaluator	Review of Data Collection Instruments and Protocols	LBDHHS Toberman	5
April 12, 2023	CSULB Evaluator	Review of Data Collection Instruments and Protocols	LBDHHS Toberman	6

Case Management Participant Activities

The primary component of the LB ASC case management and street outreach model is the case management intervention facilitated by Toberman. Implementation of the case management intervention began in August 2022 following the successful completion of all intervention staff trainings and updates to data collection instruments and protocols in response to feedback received from the Toberman intervention staff during the evaluation-specific trainings.

The case management intervention reached twenty (19) registered potential participants and successfully enrolled five (15) participants eligible for case management. The sections below will provide additional details on participant recruitment, enrollment, and retention, as well as a

snapshot of participant characteristics. Details regarding intervention activities such as the most popular topics discussed during case management meetings and referrals made/accessed by participants are also included.

Case Management Participant Recruitment, Enrollment, and Retention. Toberman staff began recruiting participants in August 2022. Participant recruitment methods have primarily included street outreach (100%) with the referrals to the LB ASC case management intervention made either by the participant or by Toberman staff . From the 19 potential participants recruited, 12 adults completed the adult consent form, and five (5) completed the child assent for minors under the ages of 18 years of age. of the 17 consented participants, only 19 completed the baseline survey and of those 15 participated in case management activities Table 5 outlines the frequencies of recruited potential participants, recruitment methods used, agencies providing referrals for recruitment, and participants enrolled.

Table 5. Overview of Participant Recruitment and Enrollment

	Frequency (%)
Potential Participants Recruited	19 (100%)
Recruitment Method	
Street Outreach	19 (100%)
Referral	0
Flyer	0
Social Media	0
Other	0
Referral Agency	
Self	5 (26%)
Toberman	7 (36%)
School	0
Probation Officer	0
LBPD	0
PGWIN	0
Hospital	0
PRM	0
CBO	0
Other	9 (47%)
Not Applicable	0
Recruited Potential Participants Enrolled in Intervention	15 (78%)

      Participant Characteristics. Of the five (15) participants enrolled, 80% (n=12) self-identified as male, two self-identified as female (13%) and one did not disclose. The mean age of the participants was 17.07 years (SD=4.11, range 12-27), one participant did not meet age at time of enrollment. The majority of participants in the case management sample self-identified as Hispanic/Latino (46.6%, n=12), with five participants (33.3%) describing their race/ethnicity as Black or African American, and two White/American (13.3%), while one participant did not disclose. Overall demographic characteristics of enrolled participants are outline in Table 6.

Table 6. Demographic Characteristics of Case Management Participants (N=15)

| Demographic Characteristics	n	%	Range
Gender			
Male	12	80.0	
Female	2	13.0	
Did not disclose	1	7.0	
Age (years)	17.07 (mean)	4.11 (SD)	12 – 27
Hispanic or Latino	7	46.6	
Race/Ethnicity*			
Black/African American	4	26.7	
Asian	0	0	
Native Hawaiian/Pacific Islander	0	0	
White	2	6.7	
Other- Hispanic/Mexican	7	46.7	
Other- Did not disclose	1	6.4	
Enrolled in School			
Yes	12	80.0	
No	3	20.0	
Enrollment Status			
Junior High/High school	5	33.3	
Continuation School	2	13.3	
Technical/Vocational school/Some college or university	2	13.3	
Did not disclose	6	40.0	
Household Characteristics	**n**	**%**	**Range**
Living Establishment**			
House	4	26.7	
Apartment	10	66.7	
Did not disclose	1	6.7	
Household Structure**			
Mother	14	93.3	
Father	5	33.3	
Mother's boyfriend/girlfriend or partner	3	20.0	
Grandmother	3	20.0	
Older brother(s)	6	40.0	
Younger brother(s)	11	73.3	
Younger sister(s)	9	60.0	
Other (boyfriend, daughter)	2	40.0	
Not enough money in the household	6	40.0	

Case Management Results

Recruited individuals were consented, screened, and enrolled in the intervention, the participant was scheduled to complete baseline data collection during their initial meeting. A $25 gift card incentive was provided by Toberman to all participants who complete their baseline survey data

collection. All 15 (100%) enrolled participants completed the baseline survey and received their gift card incentive. Toberman case management staff and peacekeepers were instructed to use case management system to track meetings, discussion, goals, and any referrals to services. A total of 102 meetings were held with participants (range 2-20). During the initial meeting, a Toberman pre-assessment was conducted to identify areas for needed support such as income, housing, education, legal, mental, and other support services (e.g., food, childcare, school supplies. Pre-assessment revealed the following needs:

Figure 1: Areas for Needed Support (N=15)
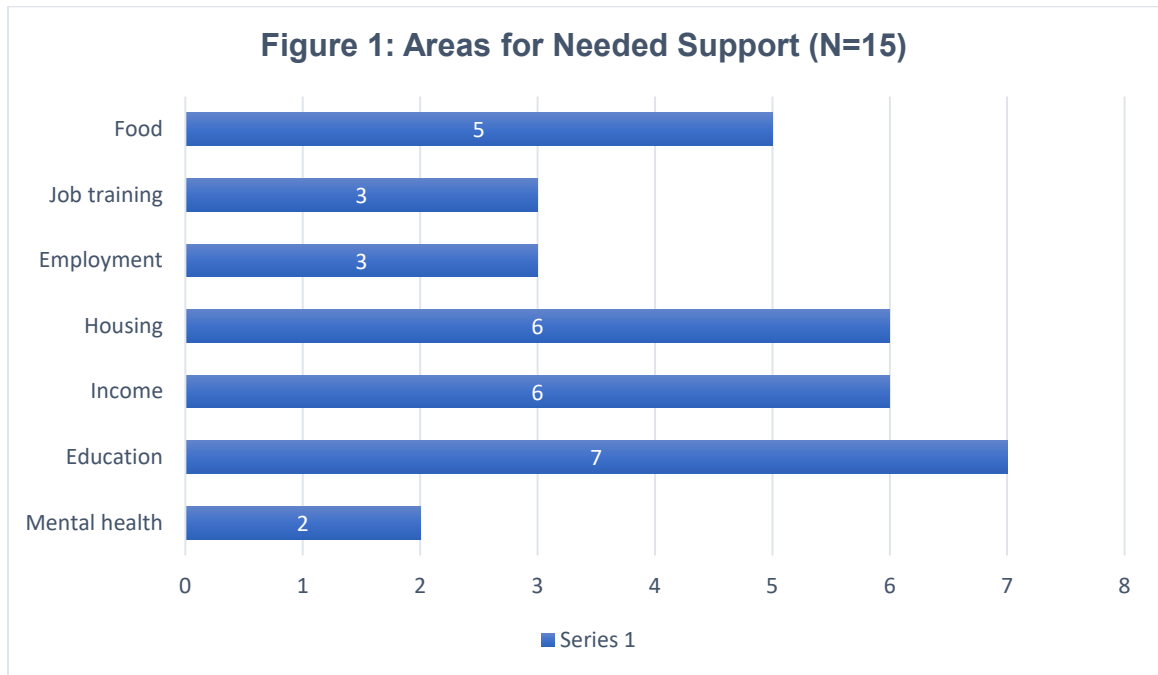
Participants were also asked to disclose any history of arrest, and affiliation with a gang squad, tagging crew, clique or other groups.

Figure 2. History of Arrest (N=15)
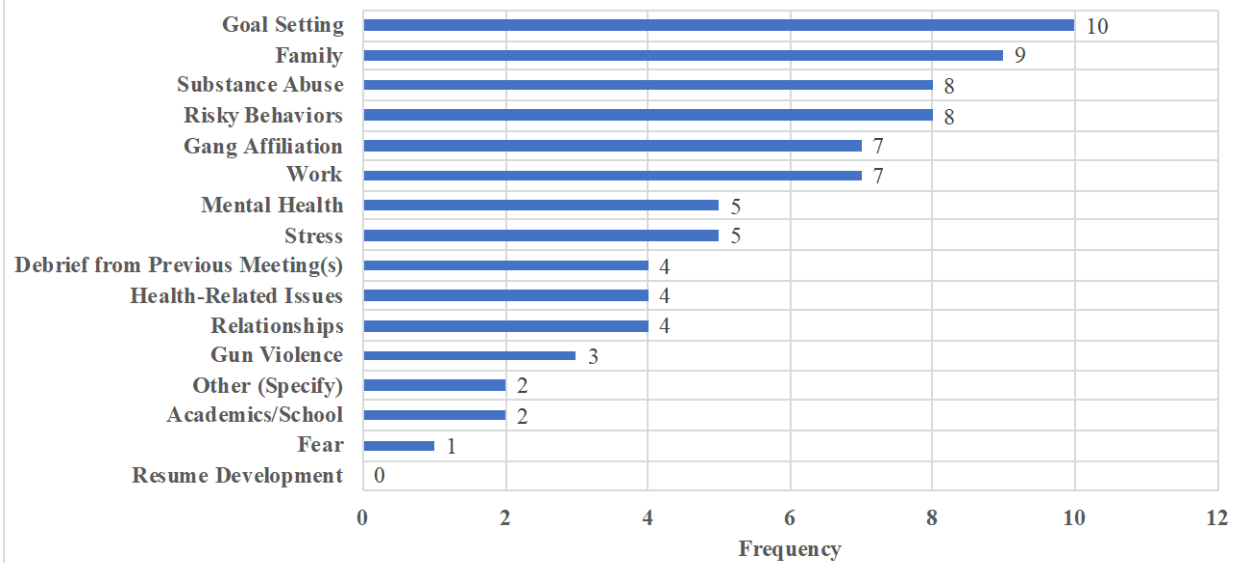

Gang Affiliation (N=15)
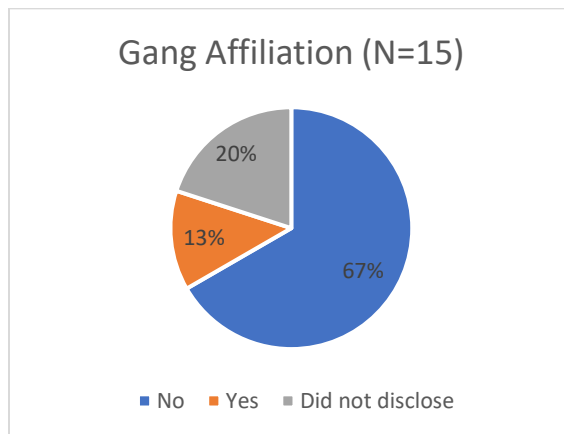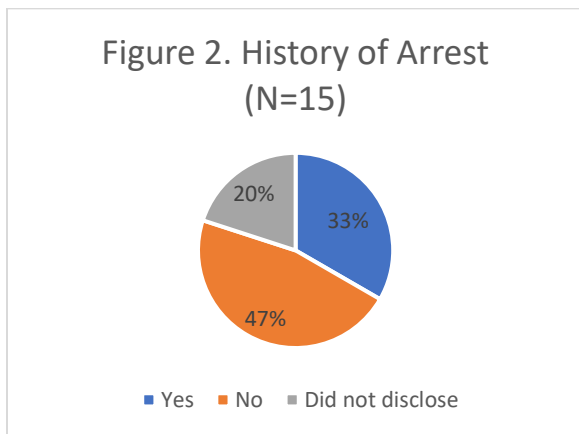
Goal setting was the primary topic discussed with participants within the one-on-one case management meetings. Participants were expected to set up to four goals and discuss progress during meetings. Participants goals focused on the following topics:

- Regular attendance at school
- Completing community service
- Enrolling in summer program
- Completing job training
- Earning good grades
    - completing assignment
- Gaining employment
- Receiving mental health services
- Appearing to court
- Financial stability
- Comply with parole requirements

**Table 7. Main Topics and Referrals Discussed During Case Management Meeting s**

	Primary	Secondary	Tertiary
Topics Discussed	Goal Setting	Family	Risky Behaviors / Substance Abuse
Referrals Made	Toberman	General Health Services	PGWIN Life Coaching
Referrals Accessed	Toberman	General Health Services	Other (Unspecified)

Figure 1. Frequency of Topics Discussed During Case Management Meetings

Goal Setting — 10
Family — 9
Substance Abuse — 8
Risky Behaviors — 8
Gang Affiliation — 7
Work — 7
Mental Health — 5
Stress — 5
Debrief from Previous Meeting(s) — 4
Health-Related Issues — 4
Relationships — 4
Gun Violence — 3
Other (Specify) — 2
Academics/School — 2
Fear — 1
Resume Development — 0

Frequency

Life Coaching Activities

The Pacific Gateway Workforce Investment Network provided a total of 47 youth in the Washington Neighborhood with meaningful workforce development activities such as employment preparation training, paid work experience, and support services. Their Youth @ Work Program provided work experience with a comprehensive and strategic set of employment, training, and support services. The program helped prepare a resume, provide hands-on job training, and practice interview skills to 28 youth. Two of the PGWIN program pathways used for hands-on job training include Long Beach Youth Climate Corp and The Beauty Program, both looking at climate change and conservation efforts, a pivotal youth priority in Long Beach. PGWIN's Long Beach Youth Climate Corp served provided 7 youth with meaningful work experience and basic work skills in efforts related to reducing climate change and food insecurities. Fellows gained structured and well-supervised training experience, professional development opportunities, job coaching, supportive services, leadership, and mentoring. The Beauty Program provided youth with paid work experience opportunities geared toward beautification projects that included waste diversion, trash collection, recycling practices, and other beautification efforts. The program served 12 Washington Neighborhood youth.
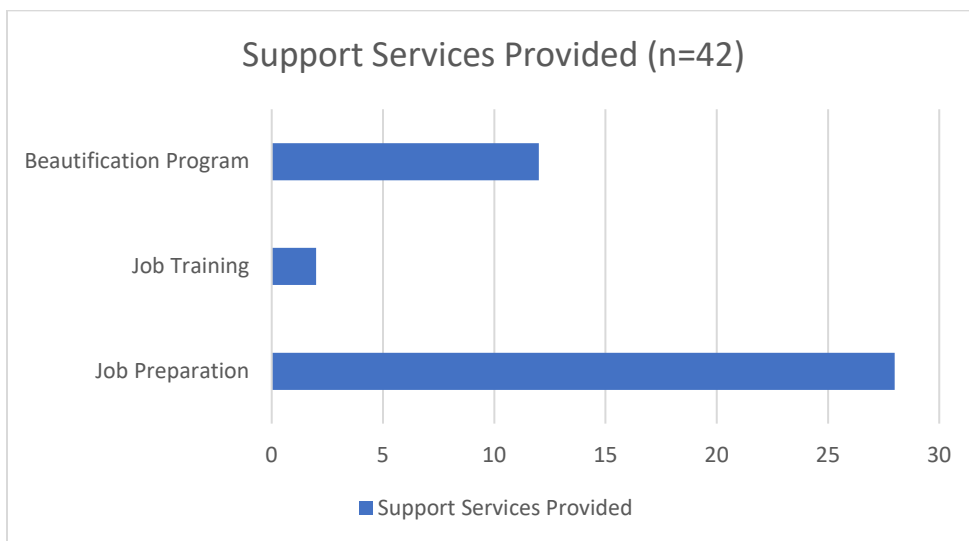
Be Safe/PRM Activities

A total of 400 families were expected to participant in Be Safe Park activities during the project period. This number was exceeded as a total of 1,306 total engagements were recorded including a total of 589 youth. Activities included field trips, swimming, spring fun days (e.g. arts and crafts), games, project, outdoor games, tournaments, homework assistance, dance and sports play. To accommodate varying schedules activities were held evening and weekend hours

Figure X. Example Be Safe/PRM Activities

Field trips	Sports Play	Projects
•Parks	•Swimming lessons •Basketball clinic •Tournaments	•Arts and crafts •Mother's Day cards

Dance	Education	Free Activities
•Zumba	•Homework assistance •Afterschool programming •Back to school giveaways	•Lunch •Movie night

Results from Exit Interview

Only one exit interview was completed. The exit interview was facilitated by the Evaluator via Zoom with the previous Toberman Case Manager on October 10, 2022. The Case Manager's last day on the LB ASC Program was September 12, 2022, however, communication of her departure was not provided by Toberman to LB ASC leadership until September 21, 2022. The Case Manager decided to leave the program because she was not satisfied with the program's progress and leadership, and because she was concerned about job security. The Case Manager also shared that she would remain at Toberman under a new project/role.

Overall, the Case Manager's satisfaction with the LB ASC Program and her role was poor. The Case Manager primarily reported not being satisfied with the lack of support and communication received from the LB ASC leadership team at the LBDHHS. Issues raised by the Case Manager are summarized into 5 main areas: 1) lack of communication; 2) disconnect with LB ASC partner organizations; 3) Toberman's lack of presence in Long Beach; 4) blurred roles and responsibilities between the Case Manager and Peacekeepers; and 5) delayed implementation of the intervention and data collection. When asked to share what worked well, the Case Manager reported that she really enjoyed working with the community and the Peacekeepers. She found working with the community and participants to be rewarding and wished she could have done more of that.

The Case Manager also shared recommendations for program improvement. First, she recommended that the LBDHHS take a more involved and hands-on approach to working with the case management intervention team. For example, she suggested that the LBDHHS facilitate connections between Toberman and Long Beach agencies, forward information on Long Beach events, attend Toberman-led outreach events, and engage in ongoing communication, meetings, and check-ins. Additionally, she recommended that the LBDHHS be more transparent. Second, the Case Manager recommended additional training once the program is fully up and running. She suggested that the training should be tailored to the needs of the LBDHHS and their goal for the LB ASC program. Third, she recommended that there be more communication and collaboration between the Toberman staff and partner organizations. Having an opportunity to bring everyone together to talk face-to-face would be preferred. Finally, she recommended that there be clearer goals and expectations set for the LB ASC program and the intervention team.

III.   Outcome Evaluation

A. Methods

Outcome evaluation was planned to assess the program's effectiveness in reducing gun related violence by activating the WN through a multi-sector, localized, youth and family-serving collaboration and street outreach model (Goal 2). The primary outcomes for evaluating the program's effectiveness were achieving a reduction in gun related violence include a decrease in firearm and aggravated assaults within the WN. Secondary outcomes for assessing the program's effectiveness focus on participant-level changes due to the LB ASC street outreach intervention (e.g., decreased involvement in at-risk behaviors). Research questions guiding the outcome evaluation are outlined in Table 10.

Table 10. Outcome Evaluation Research Questions

Goal 2: Reduce gun related violence by activating the WN through a multi-sector, localized, youth and family-serving collaboration and street outreach model.
1) What are the changes from pre to post in the number of youth reporting gun-related violence incidents?
2) What are the pre to post changes in youth (e.g. changes in at-risk behaviors)?
3) What are the sustained participant changes from pre to post?
4) What is the prevalence of gun-related violence in the WN?

Study Design

A quasi-experimental study design with no control group was planned to assess the program's effectiveness from pre to post. First, data from the LBPD was to be used to assess changes in gun related violence. Second, participant surveys are were planned to be used to assess changes from pre to post as a result of the LB ASC intervention. A total of 30 youth participants were to be recruited to participate in the street outreach intervention. LB ASC is a voluntary program. Referred and interested youth and young adults are first consented (including assent from minors and parental consents) and then screened for eligibility. Eligibility criteria follow criteria from the National Council on Crime and Delinquency (2009) and include: 1) between the ages of 13 and 24; 2) resident or spend the majority of their day/week in the WN; 3) meets one of the following risk criteria: prior history of arrests; evidence of affiliation with a gang, squad, tagging crew, clique, or other groups; been in prison/juvenile detention; victim of a shooting; and/or involved in high-risk street activity. Eligible participants were assigned a Case Manager and Peacekeeper. Once enrolled, intensive multi-generational case management would support the whole family and connect them to essential social services, such as mental health counseling, job training, mentoring, and more. The Case Managers worked with each participant to create individualized plans and identify life goals.

Data Collection and Management Procedures

Quantitative data from the LBPD and participant surveys were collected to complete the outcome evaluation. Data measuring the prevalence of firearm and aggravated assaults is collected annually using LBPD databases. The LB ASC Program Manager facilitated data collection from LBPD.

A baseline survey including demographic data and a post survey were planned to gather data on participant characteristics and to measure changes in secondary outcomes. Data collection instruments were developed by the evaluation team in collaboration with the LB ASC Program staff (including the Case Manager, Peacekeepers, and the LB ASC leadership team). All surveys were available in English and Spanish. The Toberman Case Manager and Peacekeepers were trained by the evaluation team on all data collection procedures including informed consent on numerous occasions due to staff turnover and incorrect data collection. The Case Manager and Peacekeepers facilitated all participant data collection. Data was primarily collected via Qualtrics, with paper evaluations available as needed. The baseline survey was collected from participants during intake, and although planned for each participant, only one intervention participant completed the post-survey.

All quantitative data was collected via Qualtrics and entered into SPSS databases secured by individual passwords to access the system as well as by limited file access. Additionally, each participant has been assigned a unique identification number that was used on their assessments for program evaluation to maintain confidentiality. The use of Qualtrics allows for data to be entered directly, minimizing staff data entry time and errors.

Measures

Table 11 outlines the measures that will be used to address primary and secondary outcomes.

Table 11. Outcome Measures

Outcomes	Measures
Primary Outcomes	
Firearm assaults	Number of firearm assaults annually
Aggravated assaults	Number of aggravated assaults annually
Secondary Outcomes	
Adherence to service plan	Number of referrals accessed
Life coaching milestones	Number of life coaching sessions attended Number of participants successfully completing life coaching as measured by: - Number of participants continuing school - Number of participants entering trade or tech school - Number of participants enrolled in community college or university - Number of participants obtaining gainful employment
Intention to engage in at-risk behaviors	5-point Likert scale response items measuring how likely they are to engage in at-risk behaviors
At-risk behaviors	Involvement in firearm assault
	Involvement in aggravated assault
Recidivism	Number of officially recorded criminal justice events such as arrests, convictions, supervision violations and commitments to jail or prison

Data Analysis

Quantitative descriptives were be conducted using SPSS and no inferential statistics were conducted due to missing post data form participants. Analyses to assess pre-post changes for evaluation of the intervention were not possible.

B. Results

Goal 1. Establish a coordinated City of Long Beach Gun Violence Response System (CLBGVRS)	
Outcome Objectives	**Results**
By July 2021, 100% of gun related incidents within the Washington Neighborhood (WN) will be assigned to the Long Beach Activating Safe Communities (LB ASC) Program Manager for linkage to assessment and services	Since implementing the CLB-GVRS, the LBPD reported 10 incidents linked to gun related violence in the WN.
Goal 2. Reduce gun related violence by activating the Washington Neighborhood (WN) through a multi-sector, localized, youth and family-serving collaboration and street outreach model.	
2a.By June 2023, 20% decrease fire arm assaults and aggravated assaults in the WN.	According to data provided by the Long Beach Police Department, in the Washington Neighborhood (Reporting Districts 111, 112, 183 and 184), there were a total of 33 hit shootings from October 1st, 2020, to June 30th, 2023. There were 18 hit shootings from 10/01/20-06/30/21, 8 hit shootings from 07/01/21-06/30/22, and 7 hit shootings from 07/02/22-06/30/23. Over the course of the Activating Safe Communities Program, there was a 61% decrease in hit shootings from Year 1 (10/01/20-06/30/21) to Year 3 (07/01/22-06/30/23).
2b.By Dec. 2021, 90% of referred youth and families impacted by gun violence are connected to a case manager to create a personalized plan and link to services (yearly outcome).	No referrals to Toberman were reported during the project period. Toberman conducted their own street outreach and recruitment.

IV. Discussion

Though the LB ASC Program experienced several setbacks in its first two years, one of the program's greatest accomplishments is the multi-sector collaboration established across public and non-profit organizations to inform the development and implementation of the CLB-GVRS protocol and the case management and street outreach intervention. A total of 17 partnerships were established to participate in the LB ASC Program either as a service provider, key player in the CLB-GVRS protocol, or stakeholder. All partners are dedicated to gun violence prevention efforts and share the goal of reducing gun related violence in the WN. One partner that has been fundamental to the program's success in meeting its goal to establish a coordinated CLB-GVRS protocol is the LBPD. Support from Deputy Chief Ty Burford, former LBPD West Division Commander, was especially helpful in gaining buy-in from LBPD officers and staff to participate in the protocol. Another success of the program was the reach of the Be Safe Park activities during the project period. The expected 400 families were surpassed, as a total of 1,306 total engagements were recorded including a total of 589 youth.

Program Barriers/Challenges

As previously stated, the LB ASC Program experienced several barriers and challenges. One of the main barriers that led to early delays in setting up the LB ASC Program (e.g., onboarding program staff, establishing partnerships) and implementing program activities is the COVID-19 pandemic. COVID-19 stay-at-home orders and social distancing guidelines enforced by the LBDHHS from March 2020 through early 2022 required that many program activities be restructured for virtual implementation. Therefore, additional program planning was needed at the beginning to reimagine program activities, such as onboarding of staff and partners and establishing the CLB-GVRS meetings. For some program activities such as the case management and street outreach intervention, implementation was delayed until COVID-19 guidelines were less restrictive since virtual implementation would be less feasible.

Another key barrier that stalled timely progress for the LB ASC Program is delayed onboarding of staff and partner organizations. Onboarding staff and establishing Memorandums of Understanding (MOUs) with partner organizations was an ongoing struggle for the LB ASC Program as it is housed within the LBDHHS. Bureaucratic red tape along with dated protocols at the health department have led to delays in obtaining approvals for creating job postings and hiring program staff, as well as establishing MOUs and purchase orders for processing invoices.

Although the LB ASC Program has been successful in onboarding a diverse group of partner organizations invested in reducing gun related violence in the WN, minimal efforts have been made to establish lines of communication between partner organizations to promote collaboration. One reason for this can be linked to COVID-19 and delays in implementing in-person meetings, which can be integral for establishing partner collaborations organically via face-to-face communication and trust building. Additionally, delays in onboarding key partners such as PGWIN also led to missed opportunities in facilitating communication between partner organizations. Facilitating partner collaborations is essential to the program's success as the street outreach model requires cross collaboration for participant referrals, especially, between different service providers.

Finally, an unforeseen barrier for the LB ASC Program was the high staff turnover across partner organizations, including key programmatic staff such as the LB ASC Violence Prevention Manager and Toberman. A total of 13 staff across 4 organizations have left. Staff turnover was highest at Toberman accounting for over 50% of the staff that left. Turnover at Toberman was problematic as several staff that left were in leadership roles that were integral in the development of the case management intervention. Additionally, a few staff departures at Toberman were sudden or with minimal notice, which did not allow for effective handover of work and knowledge on the LB ASC Program. Finally, departure of the Case Manager was poorly managed by Toberman as notification of her departure was not provided to the LB ASC leadership team until nine days after her last day in the role even though her re-assignment was coordinated internally, and there was no plan offered to replace this role with another full-time employee. Toberman instead assigned the tasks of the Case Manager to one of the Peacekeepers for a shared role. Table 13 outlines the timeline for all staff departures.

Table 13. Staff Turnover Timeline

Organization	Date of Departure	Title	Name	Reason for Departure
Toberman	10/5/2021	Associate Executive Director	Rondre Jackson	
	1/10/2022	Chief Executive Director	Darlene Kiyan	
	1/12/2022	Director of Social Justice	Sandra Spagnoli	
	1/12/2022		Tricia Mastali	
	6/6/2022	Intervention Manager	Russell Martinez	Removed from supervisory role
	7/13/2022	Interim Executive Director	Lorenzo Hernandez	Unknown
	8/30/2022	Intervention Manager	Russell Martinez	Removed from Program Manager role
	9/12/2022	Case Manager	Mariela Luna	Resigned Case Manager role; New role at Toberman
LBPD	12/31/2021	Chief	Robert Luna	Retired
	3/30/2022	Administrator, Office of Constitutional Policing	Ruby Marin-Jordan	Promoted to PD Bureau Chief
	5/21/2022	LBPD West Division Commander	Ty Burford	Promoted to Deputy Chief
LBDHHS	2/15/2022	LB ASC Violence Prevention Manager	Adam Lara	New job
CSULB	3/31/2022	Assistant Project Coordinator, Evaluation	Jacqueline Garay	New job

	8/30/2022	Assistant Project Coordinator, Evaluation	Denise Sandez	Moved; New job

Recommendations

Gun Violence Response System (CLBGVRS)
- Use of an automated platform to alert different organizations of incidents in the Washington Neighborhood.
- On-going communication and collaboration between all partnering organizations.
- Defined roles by partner organizations.
- Revised protocols and training for LBPD to ensure all staff are aware of protocol and buy-in to reporting incidences through automated platform or telephone.
- Identifying ways to receiving ongoing timely data for crime in the Washington Neighborhood

Intervention/Case Management
- Collaboratively develop an intervention protocol to define minimum dose required per participant (e.g., six sessions/1 hour duration + referrals) to establish a standard of case management.
- Collaborative develop or identify intervention content to be agreed upon by LBDHHS and case management organization to ensure buy-in from case managers and peacekeepers.
- Ongoing training and monthly meetings with case management staff and peacekeepers to ensure ongoing and timely data collection for required outcome data.
- Establish a referral system to the case management staff by other collaborating organizations to allow for greater outreach and enrollment.
- Ensure case management protocols include safety procedures (e.g., two peacekeepers working together during street outreach).
- Identify ways to promote program through social activities in the Washington Neighborhood, for example the Be Safe activities including mention of the project to establish trust in community.

Limitations

There are a few limitations that should be acknowledged. First, one limitation is that there was limited data collected to date, especially, for evaluating the impact of the case management and street outreach intervention. A second limitation in evaluating the case management intervention is the enrollment of participants that do not meet the eligibility criteria. One participant enrolled in the intervention to date was younger than the age criteria listed for the intervention. Stronger screening protocols will be put in place to ensure that this does not occur in the future. Additionally, protocols for providing services to individuals that do not meet the eligibility criteria should established to ensure that these individuals are still assisted through the LB ASC Program, but not included in the research participant pool.