



BRIGHT STAR
COMMUNITY OUTREACH

Strengthening hope and saving lives



TURN
CENTER

Risk and Protective Factors Report

CHICAGO
CENTER *for*
YOUTH
VIOLENCE
PREVENTION

THE UNIVERSITY OF
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SCHOOL OF SOCIAL SERVICE ADMINISTRATION

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Goal of the TURN Center Community Data Assessment Workshop

Last March 2016, the data assessment workshop started the beginning of Phase 3 of the *Bronzeville Communities that Care* (CTC) process, the development of a community profile. The goal of the workshop was to review the risk and protective factor and youth outcome data from the **TURN Center's Communities that Care (CTC)** effort, review the collected public data and to recommend priority risk and protective factors.

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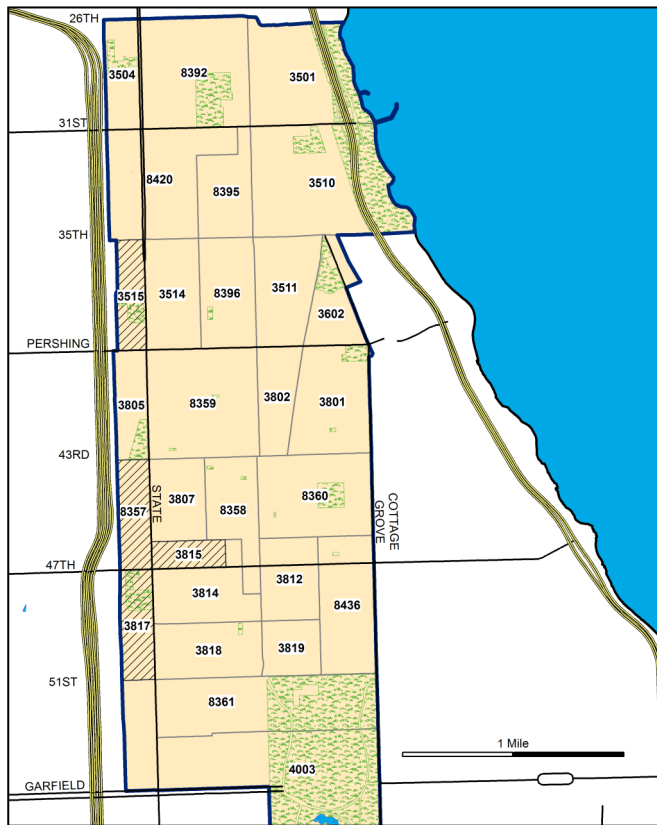


Pre-Assessment Workshop Preparation

In advance of the workshop, the Chicago Data Portal was used to generate the available public administrative and crime data for the workshop. Mapping and Census Tract summaries were prepared for the target Bronzeville community, approximately 3.5 miles x 1 miles large, in order to present the public data. The maps initially divided the target community into the 28 Census Tracts (approximately 2,000 people per tract) with boundaries in the order North, East, South and West (N, E, S, W) of: 26th Street, Cottage Grove/Lake Michigan, Garfield Boulevard/ Washington Park and the Dan Ryan Expressway (I 90/ I94)/train tracks). The tracts were combined in the public data maps to form seven sectors of roughly a ½ mile N to S and 1 mile E to W in size.

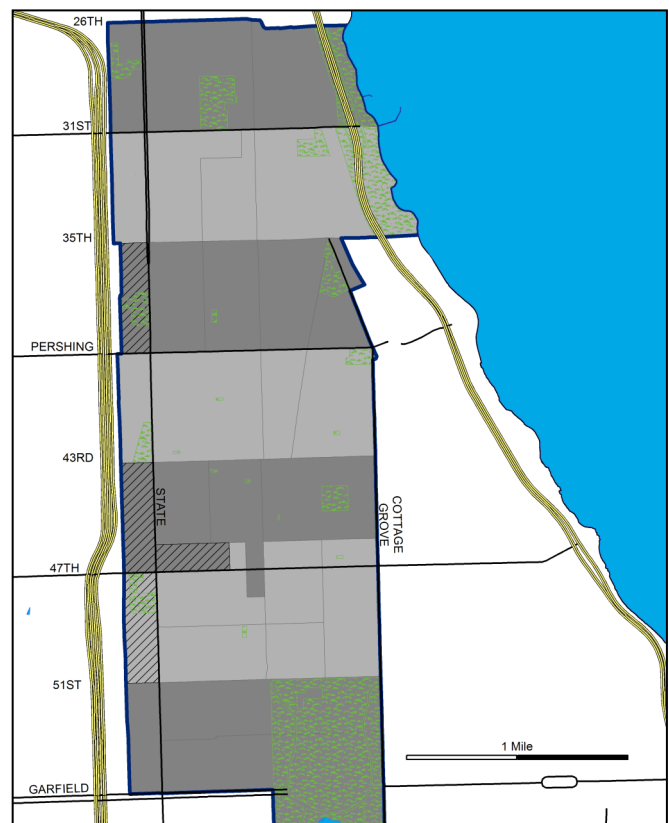
Maps included public data on the following for the Bronzeville Community:

1. Violent Crime Incidents (2015) and Density (Incidents per square mile) – included homicides, aggravated assaults/batteries, criminal sexual assaults with robbery excluded;
2. Shooting Incidents (2015) and Density;
3. Homicide Incidents (2015) and Density;
4. Owner-Occupied Housing (from US Census Data) - percentage of housing units (home, apartment, condo) lived in by the owner of the unit;
5. Lived in the Same Location 1 Year – percentage of people who have lived in the same house/apartment for at least 1 year;
6. College Degree – percentage of residents 25 years and older with a college degree (Associates degree or higher);
7. Employed – percentage of residents available for work who are employed;
8. Income Greater Than Twice Poverty the Rate – percentage of residents who live above twice the poverty rate as determined by household income and number of people in the household.

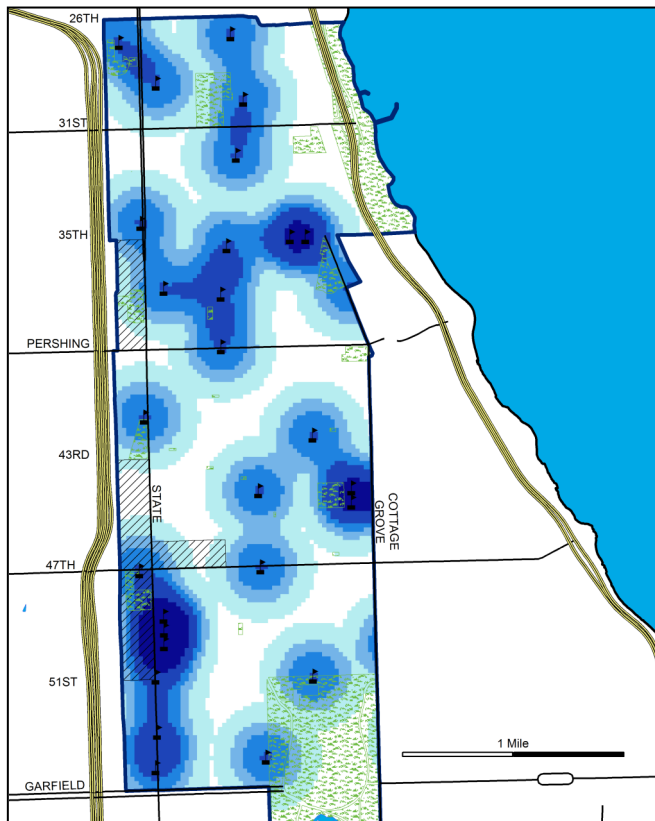
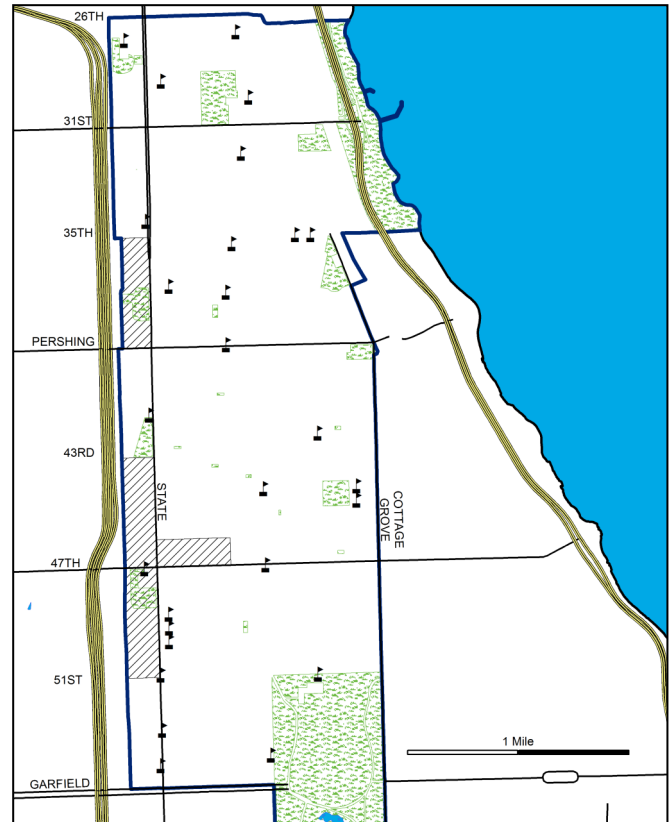


Bronzeville Census Tracts

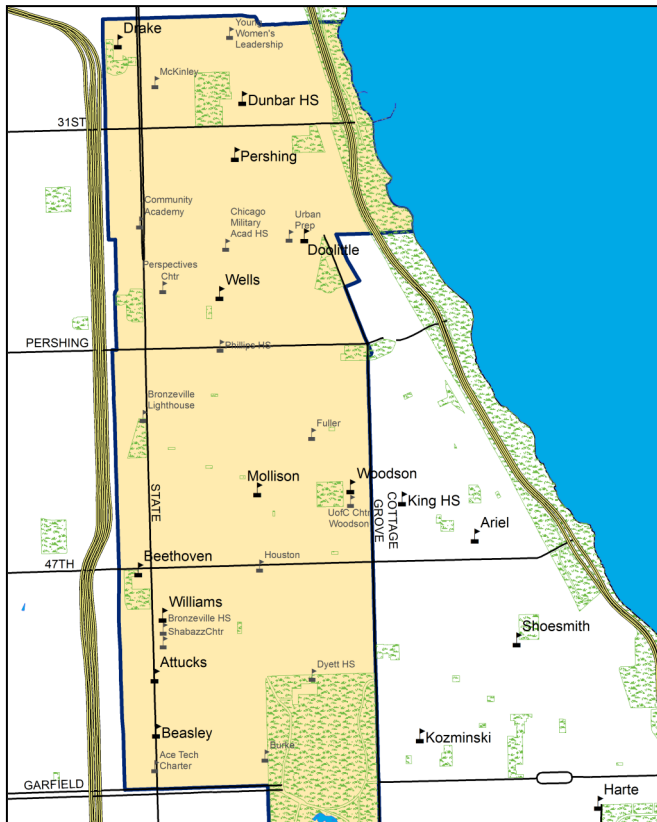
Seven “Sectors”



Schools

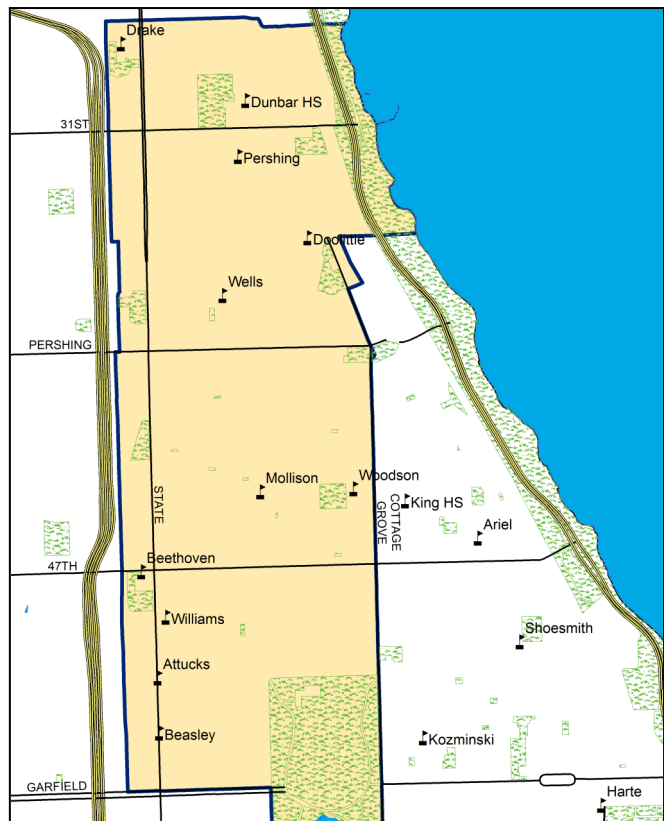


School Densities

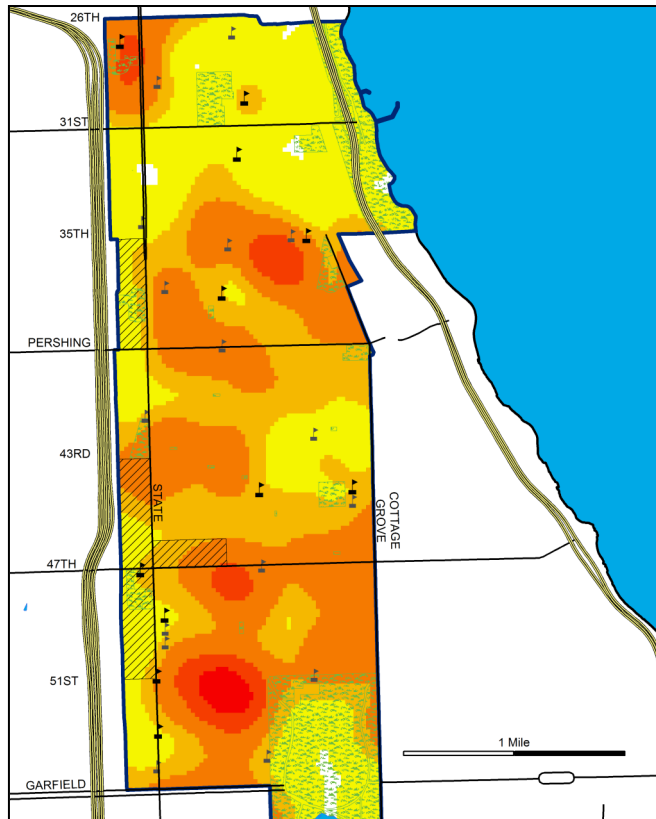
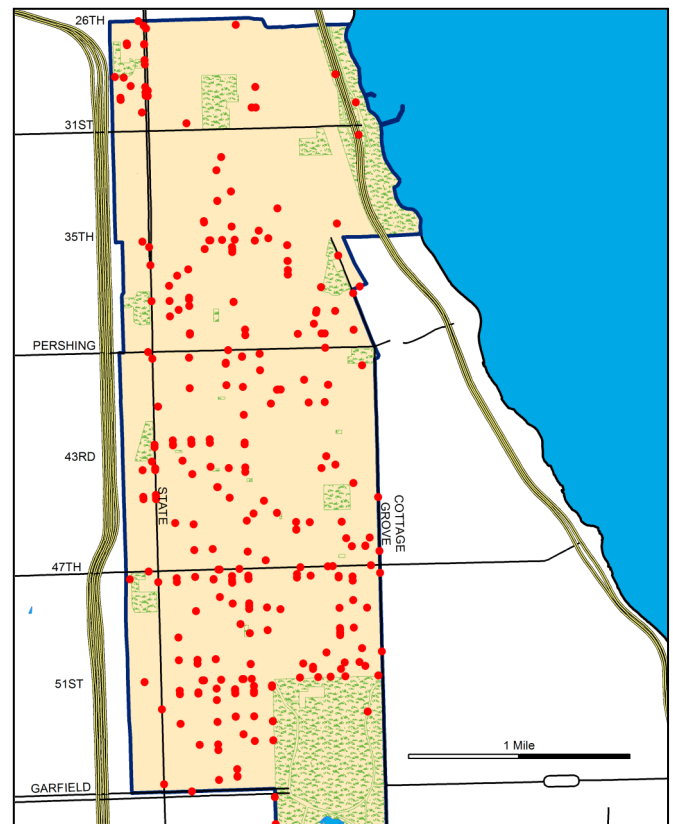


Schools in Bronzeville

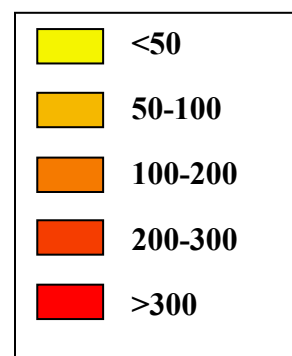
Surveyed Schools

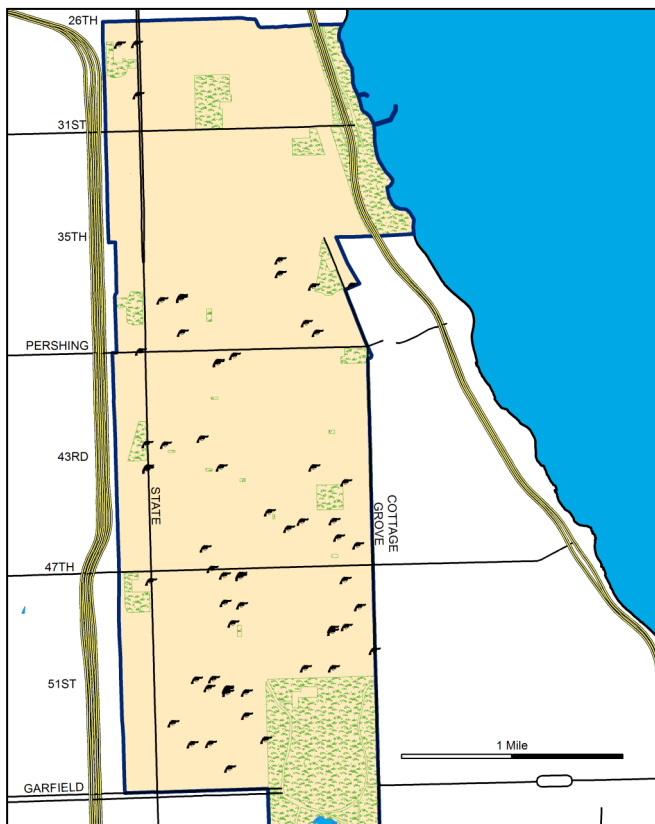


Violent Crime Incidents (2015)



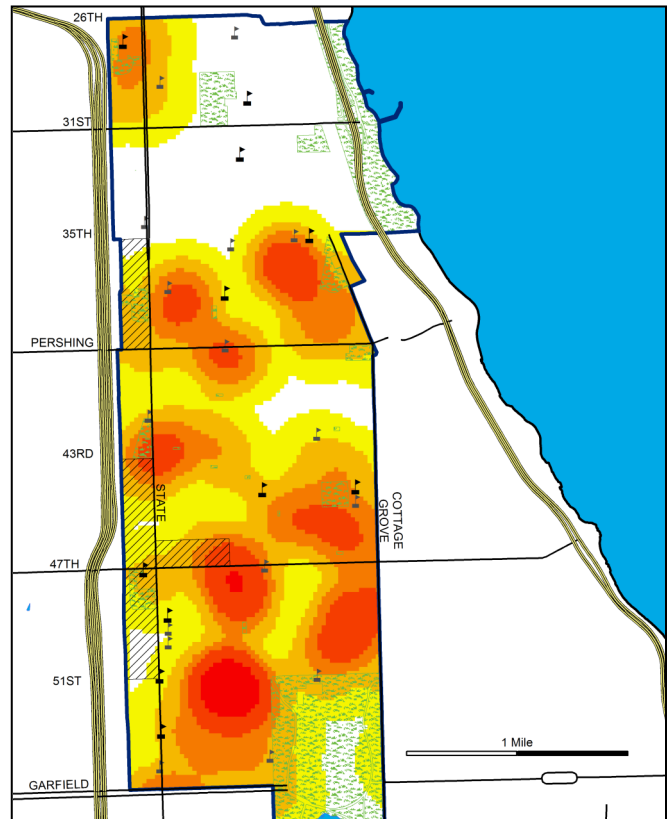
Violent Crime Density (Incidents per square mile)



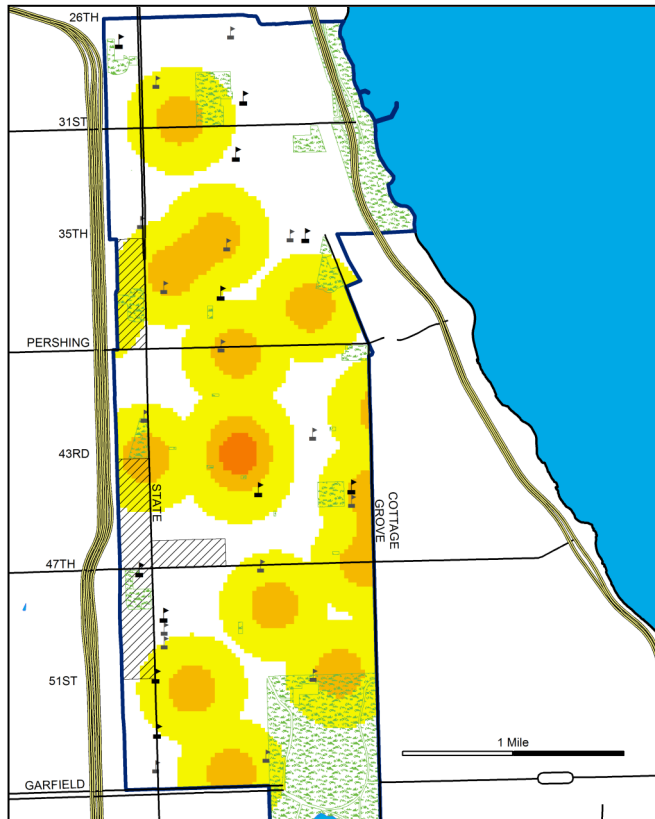
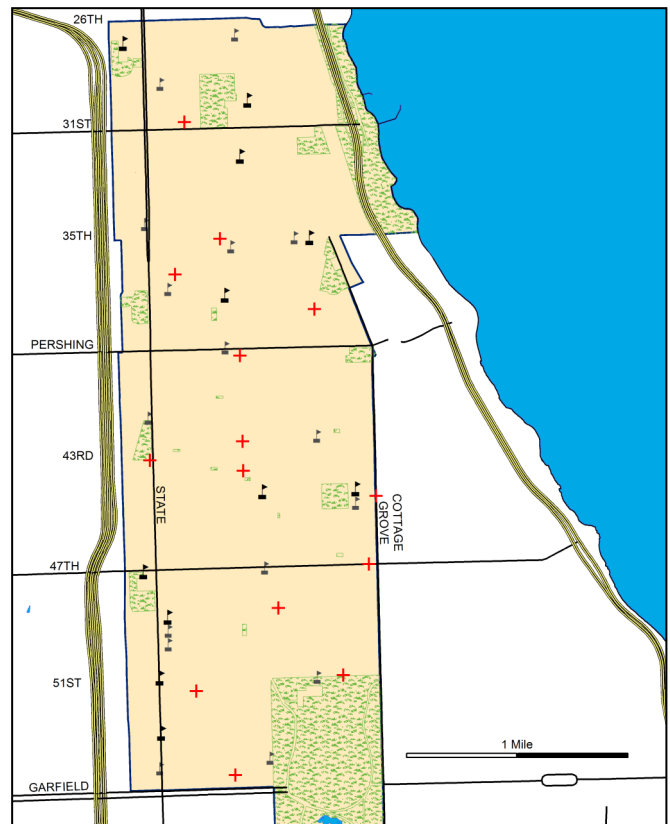


Shooting Incidents (2015)

Shooting Density
(Incidents per square mile)

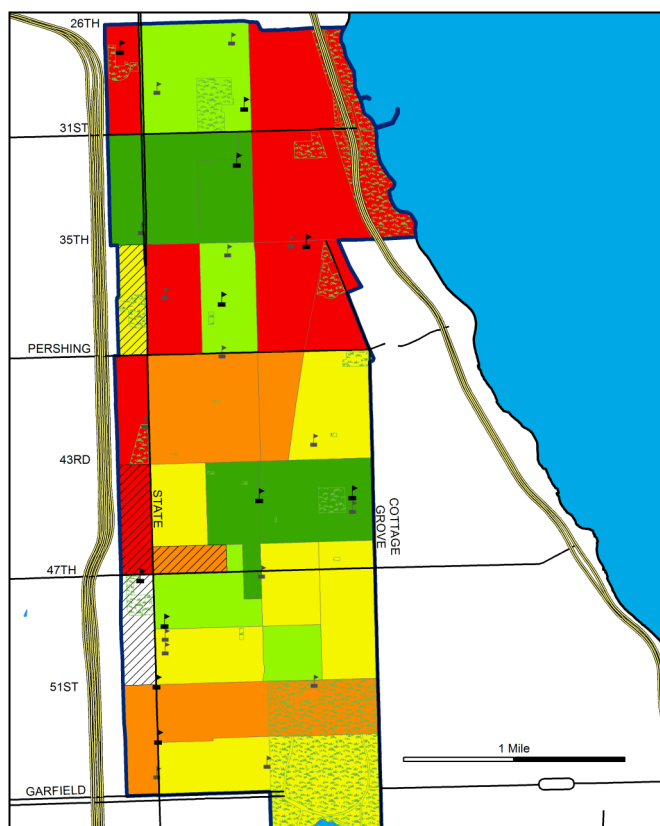


Homicide Incidents (2015)

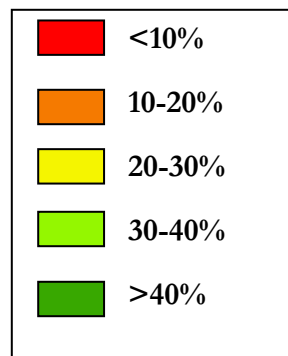


Homicides (Incidents per square mile)

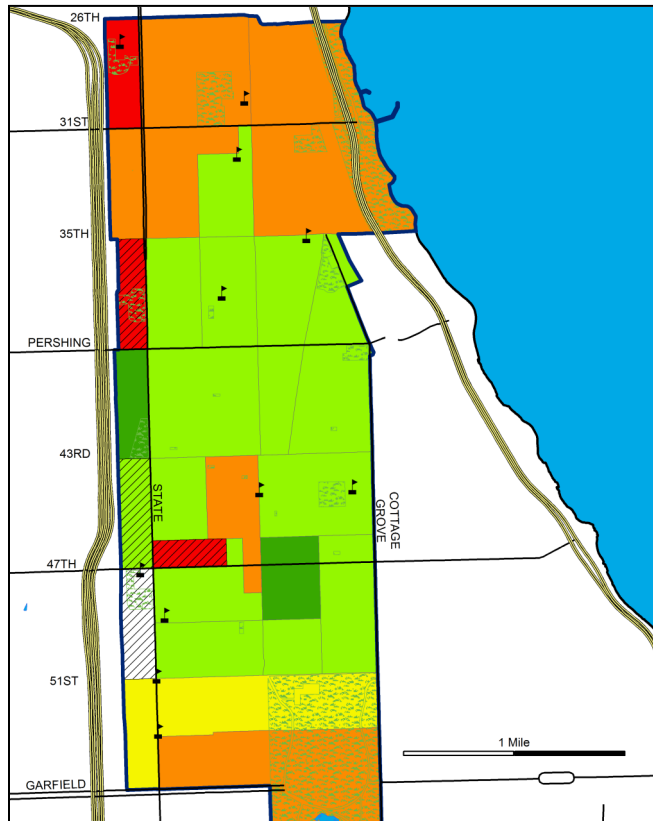
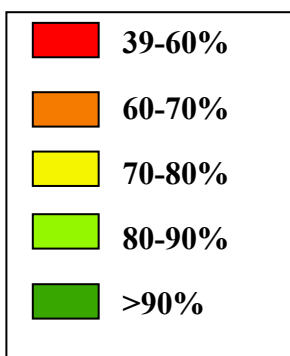




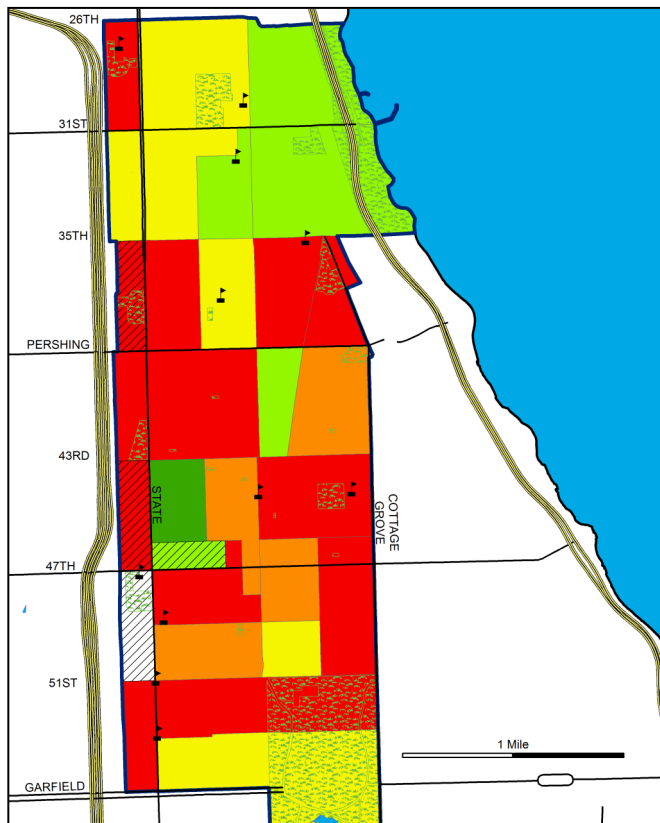
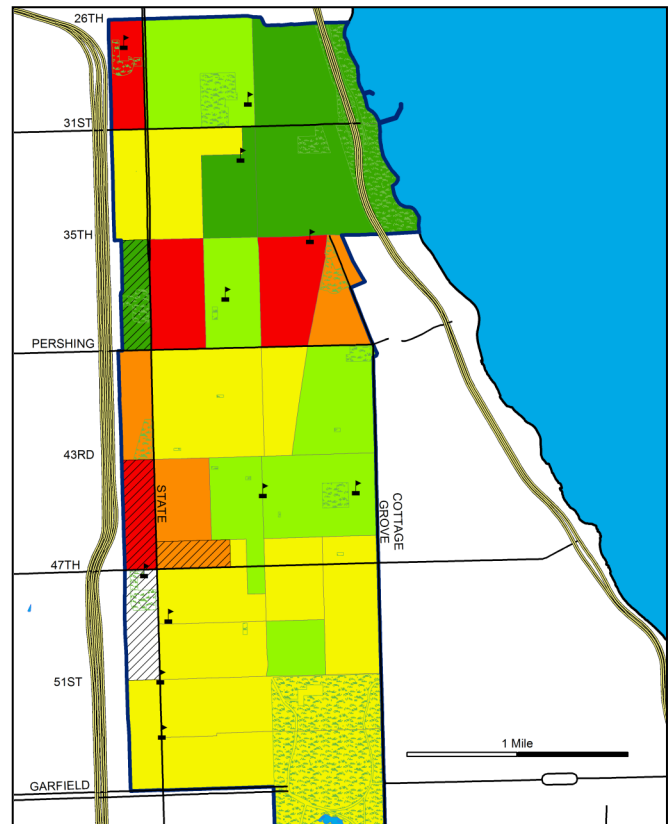
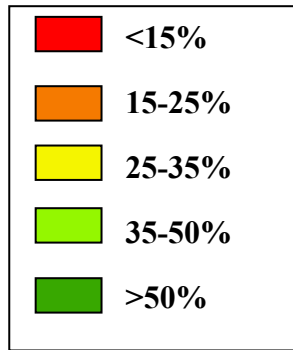
Percent of Owner-Occupied Homes



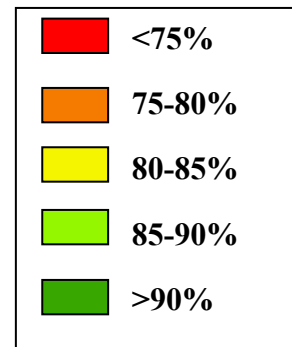
Lived in Same House at Least 1 Year

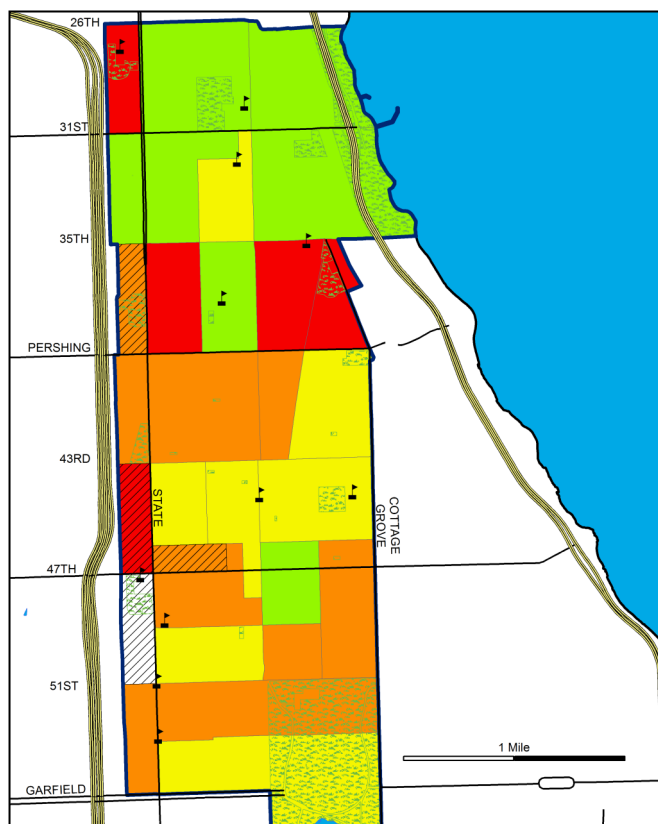


College Degree (age 25 or older)

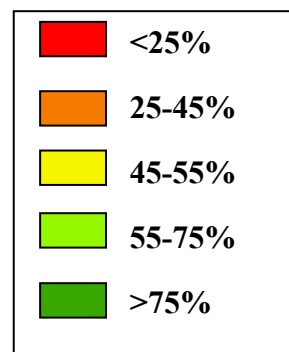


Employed





Income Greater than Twice Poverty Rate



In addition, members of the assessment workgroup were pre-assigned to refresh their understanding of the CTC's basic prevention science concepts by watching four videos on the CTC website prior to attending the workshop. Participants were asked to complete the short quizzes at the end of each video.

The 3-5 minute long videos included:

1. The Science of Risk Factors
2. Community Risk Factors
3. Family and School Risk Factors
4. Peer/Individual Risk Factors

Bronzeville TURN Center Community Data Assessment Workshop

The assessment workshop was executed through the use of four modules:

Module 1

Module 1 included an overview of the workshop activities, objectives and a Prevention Science review.

Module 2

The assessment group viewed a series of videos to better understand the CTC survey and briefly reviewed the CTC survey report to note how it is organized. A series of videos highlighting how to read the report and what to look for was viewed. From the videos, the assessment workgroup noted that each risk factor shows percentage at risk for problems due to that risk factor and that each protective factor shows percentage protected by that protective factor. It was noted that response rates of less than 60% may not represent the population. In addition, it was noted that “prevalence” = percentage. The report was reviewed coupled with the Executive Summary.

Workshop participants counted off by 5 to form five groups with a section of the report randomly assigned to each group according to the following:

Group 1: Survey methodology and demographic profile

Group 2: Protective factors

Group 3: Risk factors

Group 4: Substance use

Group 5: Other antisocial behaviors

Community Data Assessment Workshop, cont.

All five groups were given the Survey Review & Report-Out worksheet for the section of the report assigned along with the Completing Survey Summary Worksheet. Videos were viewed on how to identify and choose priorities.

Each group answered the questions regarding their assigned section of the report on the Survey Review & Report Out for Protective Factors worksheet. Answers were provided for all grades, as applicable, naming the factor(s) and indicating how each factor compared to similar factors in the target community and in comparison to state/national data identified by orange diamonds on the bar graphs.

Workshop participant groups reported on their outcomes and the information was used to complete the Completing Survey Summary Worksheet.

Module 3

During Module 3, the workgroup team members who gathered and prepared the public data reviewed the public data collected with the data assessment team and answered any questions that arose .

Module 4

Equipped with the public data, the group viewed additional videos on identifying and choosing priorities. The guidelines for identifying and choosing priorities were discussed. Next, the group used the public data, the CTC survey report, the Executive Summary and the information on the Survey Review and Report-Out worksheet to complete the Survey Summary Worksheet. To record community strengths on the worksheet, the group identified the health and behavior problems with the lowest overall prevalence rates and noted the comparison of those data with the state comparison data. The group also identified the most elevated protective factors, and the most suppressed risk factors.

Community Data Assessment Workshop, cont.

Module 4, cont.

To look at community challenges, the group identified the health and behavior problems which had the highest overall prevalence rates and noted their comparison with the state data. The most suppressed protective factors and the most elevated risk factors were identified from the data.

In order to identify the priorities, the groups looked for the most prevalent risk factors across the reports and data, used comparisons to other risks, and looked across grades while considering what was realistic. It was determined that the group would identify three priority risk factors and one priority protective factor.

In choosing priorities: the group identified those factors that were most prevalent, looked at how the factors compared to the national data from Monitoring The Future (MTF) survey who reported a specific behavior, looked for consistency across grades, identified any upward or downward trends, avoided factors such as family with response rate of 60% or less, and again considered what would be realistic.

TURN Center Recommended Priorities

The goal of the Community Data Assessment Workshop was to review the risk and protective factors and youth outcome data from the **TURN Center's Communities that Care (CTC)** effort, review the collected public data and to recommend priority risk and protective factors. The goal was accomplished.

The recommendations for prioritization are below:

Recommended health and behavior problems to focus on - Substance abuse and violence.

(Cont. page 15)

TURN Center Recommended Priorities, cont.

In phase 3, the BSCO CTC work group began to create a Greater Bronzeville community profile. To begin to create this community profile, the work group used the youth survey results to identify and prioritize risk and protective factors that influence the health of Bronzeville youth. The risk and protective factors prioritized were:

1. **Community Engagement:** How residents support each other and encourage positive community values and beliefs. Examples include keeping an eye out on the neighborhood (e.g. youth, neighbors, property) and the likelihood to do something that goes against community rules.
2. **Community Connection:** How residents feel about their social commitment to their community. For example having a feeling of sense belonging or pride in their community including neighbors, organizations or aspects of the community.
3. **Peer Relationships:** How youth (ages 8-18) are influenced by attitudes, beliefs and behaviors of their peers.
4. **Positive Early Development Childhood Experiences:** Children who avoid harmful behaviors (e.g. drugs, crimes, dropping out of school) are more likely to avoid struggling with those behaviors as they get older.
5. **Community opportunities for recognition:** Community members have knowledge of available resources that provide opportunities for youth to actively be involved, create bonds, develop skills and be recognized for those skills.
6. **Family Engagement:** How families can be supported towards reaching developmental, academic, and behavioral goals for their children. Examples include effective strategies to strengthen parent-child bond, effective communication techniques, setting rules with fair and consistent consequences, successful strategies to improve parent's involvement in child's education, and building supportive networks within the community.

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