

Leonard Jahad, New Haven- Testimony in support of HB 5677

I am Leonard Jahad, Executive Director of Connecticut Violence Intervention Program (CTVIP) located in New Haven, Connecticut.

CTVIP's work within the community is multi-pronged. We collaborate with local school systems, local/state/federal law enforcement agencies and trauma centers. While our goal is to reduce community violence, we understand that this cannot be done unless we address the factors that contribute to urban violence. To this end, we employ a group of Violence Prevention Professionals or (VPPs). CTVIP currently employs 4 VPPs, three Black males and a bi-lingual Latina. They have grown up in New Haven and have not only endured extended periods of incarceration, but also have been victims and perpetrators of community violence, each being a victim of gunshots. Due to their high-profile experiences in street life their name resonates with those that are engaged in risky activity including truancy, gang activity, and shooting. They also work with victims of violence to assist in their trauma and zeal to retaliate. They encourage community resilience through individual and group mediations, restorative practices, mentoring, and referrals based on risk/need.

These credible messengers utilize four strategies:

1. Interrupting the transmission of community violence
2. Reducing the highest risk individuals or groups
3. Changing community norms around the use of violence
4. Data collection and measurement

These messengers, once known as the Street Outreach Workers are now known as Violence Prevention Professionals (VPPs). The VPPs recently completed a national certification through the Health Alliance for Violence Intervention (HAVI). HVIPs and VPPs bring trauma-informed care to the patient while in a hospital-based setting and continue upon discharge to the community.

Because victims of interpersonal violence are at elevated risk for re-injury and violence perpetration, reaching them during these "teachable moments" are key to a successful hospital-based intervention. Victims are provided links to community-based services, mentoring, home visits, follow-up assistance, and long-term case management during these interventions by VPPs.

Unconditional care

The VPPs provide unconditional care for their clients: consistent services and uninterrupted relationship building capacities. Our youth that are engaged in the criminal justice system often have histories that are plagued with neglect, abuse, and abandonment.

Importance of Violence Prevention Professionals

Many high-risk people who have suffered violent injuries are extremely distrustful of mainstream institutions like the healthcare and criminal justice systems. Using a trauma-informed approach, violence prevention professionals can often break through this distrust. Who CTVIP hires as a VPP is a strategic consideration. VPPs must fit into the community, they cannot have questionable alignments or labels that favor one neighborhood over another nor can they favor a group/gang/neighborhood over another. They must be able to navigate through cultural groups or neighborhoods freely without conflict. They have gained legitimacy in the community where they had 'lived the life.' They had been in trouble, turned their lives around and now want to help. These highly trained paraprofessionals, who reside in communities in which they are working, can quickly engage violently injured patients and their families in the emergency department, at the hospital bedside, or soon after discharge.

How passage of HB5677 can assist VPPs

Advancement of the bill will assist CTVIP through expansion of staff. We are currently staffed at 7 paid employees which includes 4 Violence Prevention professionals, a program coordinator, and data analyst- all employed part time. Our VPPs currently execute intake, assessment, and referral as well as case management and discharge planning. They also review social media, mediate conflict, and maintain a presence within the community including visits to trauma centers, schools, and meetings. Funding will allow us to hire Violence Intervention Professionals (VIPs) who will work alongside the VPPs and respond to hospitals after community violence. Another challenge of agency's like CTVIP is the inability to have a proper debriefing and de-escalation due to being 'BOOTS ON THE GROUND'. My Lead VPP accurately states that 'there is no time for reflection or self-care- we simply re-charge our cellular telephones and head back to the streets'. Expansion will not only allow for self-care and assistance from mental health professionals trained in crisis management, bereavement and measure our resiliency but also assist in utilizing our individual protective factors that will allow us to sustain and continue the work.