Project Ujima: Changing Lives by Reducing the Reoccurrence of Violence for Victims of Violence

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Learning Objectives:

1. Describe the experience of violence in Milwaukee, including incidence of street/gang violence.
2. Provide a brief history and current program/service components of Project Ujima.
3. Understand the innovative approaches and community partnerships working in Milwaukee to stop the cycle of violence for victims and families.
4. Learn about their success as highlighted in program evaluation and key findings.
5. Obtain answers to your questions in a lively Q&A session with presenters.
Over a century of service
More than a hospital

- Primary & Specialty Care Clinics
- Dental and mental health services
- Foster care and adoption
- Community health and education
- 40+ locations throughout the state!

Children’s vision…Wisconsin’s kids be the healthiest kids in the nation!
“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

- World Health Organization, 1948
Factors that define a child’s health.

Staying healthy is mostly about what happens outside the doctor’s office.

- **10%**: In fact, only 10% of our health comes from access to quality health care.
- **20%**: The rest comes from: The world around us. (home, school, community)
- **30%**: What we’re born with. (family history)
- **40%**: The choices we make. (food, exercise, safety)

Health outcomes for children and families

Milwaukee
Understanding our community

Milwaukee
- 4th most impoverished U.S. city
- Most segregated city in the U.S.
- Children living in poverty are about 7 times more likely to be in poor or fair health
Milwaukee County

- **Financial stress**: 43.28 percent of Milwaukee children live in households with income below 100 percent of the federal poverty level.
- **Adult substance abuse**: In 2014, 22.5 percent of Milwaukee County adults were binge drinkers.
- **Adult mental health**: In 2015, 18 percent of Milwaukee County survey respondents reported having a mental health condition.
- **Neighborhood safety**: In 2015, 5 percent of Milwaukee County survey respondents reported their child was seldom or never safe in their community.

Acknowledgement: Children’s Hospital of Wisconsin, Community Health Needs Assessment 2016
Violence in Milwaukee

• In Milwaukee in 2016 there were 139 lives lost due to homicide.

• From 2010 to 2016, there has been a 76% increase in firearm-related homicide victims, a 38% increase in nonfatal shooting victims, and a 43% increase in combined victims.

• More than a third of high school students (37%) got in a physical fight in the previous year.

• According to the 2016 Milwaukee County Community Health Survey, 42% of respondents rated violence as a top community health issue.

Acknowledgement: City of Milwaukee Blueprint for Peace; 414LIFE; & Children’s Hospital of Wisconsin 2016 Community Health Needs Assessment
Approach to innovation

Redefining, redesigning and connecting systems & community assets while improving health outcomes
Violence has Health Consequences throughout Life

- Injury
  - Head Injury
  - Fractures
  - Burns
  - Internal Injury

- Mental Health
  - Depression and Anxiety
  - PTSD
  - Suicide
  - Assault
  - Fetal Death
  - Unintended and Adolescent Pregnancy
  - Pregnancy Complications

- Communicable Disease and Risk Behaviors
  - Alcohol and Drugs
  - STDs
  - HIV
  - Multiple Partners
  - Unsafe Sexual Practices
  - Smoking
  - Physical Inactivity
  - Alcohol
  - Obesity
  - Diabetes
  - Chronic Lung Disease
  - Cancer
  - Heart Disease
  - Stroke

Violence has Health Consequences throughout Life.
Victims of Violence

- Initial recovery from physical injuries
- Poor medical follow up for injuries
- High risk for repeat injury
- Premature death

- Acute Stress Reaction
- Post-traumatic stress
- Aggressive or avoiding behaviors
- Poor school or job attendance
- Chronic illness into adulthood
When Jason was 12 years old, he was brought to Children’s Hospital Emergency Department for injuries after a fight. At 14 years old, he suffered a gunshot wound to his leg. At 15 years old, he was shot and died in our trauma room.
Program Overview

• Project Ujima is a community-based program and multi-disciplinary collaboration addressing youth and adult community, interpersonal violence.

• Project Ujima is committed to stopping the cycle of violent crimes by reducing the number of repeat victims of violence through individual, family and community intervention and prevention strategies.
Collaborative effort

Medical partnership:
• Medical College of Wisconsin & Children’s Hospital of Wisconsin-Community Services

Community partnership:
• City of Milwaukee: Milwaukee Public Schools, Milwaukee Homicide Review Commission, Milwaukee Police Department, Milwaukee Health Department
• Many local community-based organizations
Populations served

Program entry criteria:

- Youth ages 7-18 who are victims of peer-to-peer violence who seek treatment at Children's Hospital of Wisconsin's emergency room for:
  - Intentional Injury
  - Firearm Injury
  - Excludes child abuse, suicidal attempt, and peer violence within the home

- Referrals for adult services are also received from the Milwaukee Homicide Review Commission.

- The average family is involved with Project Ujima for 15 months.
Entry and Flow Process

Youth seen at CHW
Or community referral

Crisis Intervention

Family Support

Family Follow-up
48 hours

Home visit within
30 days

Care Plan Developed

Youth Development Program
Boys and Girls Groups
Summer Day Camp
Key elements of programming

• **Hospital-based services** that are culturally and developmentally appropriate, including medical care, peer support, crisis intervention and social and emotional assessment.

• **Home-based services**, including medical follow-up of injuries, evaluation of primary health care needs, psychological screening for patients and families, and ongoing individual, group or family counseling.

• **Community-based services**, including mentoring, youth development, family and youth support groups, gang interventions, summer camp, job preparedness and advocacy to address legal, education and housing issues.

• **Community and professional education** about youth violence, including seminars on youth violence and youth development, participation and support of community-based activities and forums, crisis support and debriefing, and trauma-informed care practices.
Project Ujima - 2017

Referrals: 338 Crime Victims
- Crime Victims (55%)
- Families of Homicide Victims (37%)
- Youth Victims (55%)
- Firearm Related Incidents (42%)

Programming & Development Groups:
- 120 Youths
- 2,500 Hours of Direct Services
  - Mentoring & support group
  - Summer camps
  - Family events

EDTC: 100+ Youth & Families
- Voluntarily Enrolled (80%)
- Youth & Families (20%)
Measuring the results

Impact and value
Outcomes

- Decreased repeat injuries within a 12 month period from 8% to 1%
- Approximately 300 youth and 500 adults served each year are served through Project Ujima
- Decreased financial costs to treat and hospitalize assault victims
- Compassionate care in the emergency setting for community victims of violence
Change in PedsQL™ Score

- School: 5
- Social: 3.77
- Emotional: 5.26 (p=0.026)
- Psychosocial: 4.65 (p=0.032)
- Physical: 3.11
- Total: 3.5

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Resources

Reducing Violence in Your Community
What can we do?

- Work with our communities to plan solutions
- Mentor a young person!
- Support young families in non-violent discipline methods
- Promote anti-bullying efforts in our schools
- Advocate in our legislature for laws that reduce gun violence
- Support victims of violence through crime victim services, including mentoring
National Network of Hospital-Based Violence Intervention Programs

- NNHVIP.ORG
- Provides resources for hospitals interested in starting a hospital-based violence intervention program
- Mentoring for programs
- Annual conference that provides workshops for leaders and community workers

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Thank you
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