



LOUISIANA

Gaining Momentum on Shared Risk and Protective Factors

SHARED RISK AND PROTECTIVE FACTORS (SRPF)

Many injury and violence-related issues are complex, interconnected, and often share the same root causes, such as poverty, inequity, and historical trauma. Understanding the overlapping or shared causes of injuries and violence can help public health professionals better address injuries and violence in all its forms.

A variety of factors can increase or decrease the likelihood of injury and violence. Risk factors make it more likely that people will experience injuries and violence. Examples of risk factors include rigid social norms about what is “masculine” and “feminine,” a lack of education and job opportunities, and family conflict. Protective factors can increase resilience when encountering risk factors and make it less likely that people will experience injuries and violence. Examples of protective factors include connections to caring adults or access to mental health and substance abuse services.



The Louisiana Department of Health, Office of Public Health, Bureau of Family Health (OPH-BFH) has a long history of work in maternal and child health (MCH), making issues like intimate partner violence (IPV), sexual violence, and child abuse and neglect natural fits for the program. Through their work on the CDC's Core State Violence and Injury Prevention Program ([SVIPP](#)) grant they assembled a working group made up of partners seeking to prevent child abuse and neglect, IPV, and sexual violence. They noticed that many of the same players were involved in these issues, leading them to begin the process of identifying the common risk factors that could unify and strengthen their efforts. Together they used CDC's [Connecting the Dots](#) document to guide discussions about shared risk and protective factors (SRPF) and how they could address many types of violence by taking a SRPF approach. The information from CDC was compelling and helpful for giving a common language to their ideas, however, the challenge was in figuring out how to translate the theory of SRPFs into practical action.

ACEs EDUCATION

Even before the SVIPP funding sparked conversations about shared risk and protective factors (SRPF), Louisiana was implementing an Adverse Childhood Experiences (ACEs) initiative to address the underlying factors that impact many types of injury and violence. In 2014, the Louisiana ACE Initiative was started by a collaboration between the OPH-BFH and Tulane University's Institute of Infant and Early Childhood Mental Health. Out of this joint initiative came the ACEs Educator Program, a program staff described as, "build[ing] community awareness around ACEs, trauma, and resilience science across the state," by training community members to become ACE educators.

The ACEs Educator Program, based out of the OPH-BFH, uses a copyrighted curriculum to teach about ACEs, including information about what protects someone from ACEs at different levels of the social ecological model such as individual resilience, family attachment, and community connectedness. Since ACEs predispose a young person for risky behavior, there is a clear connection to how ACEs relate to other types of violence. The staff at OPH-BFH make the case for how ACEs are connected to many other injury risk factors including drug and alcohol abuse and unsafe driving behaviors.

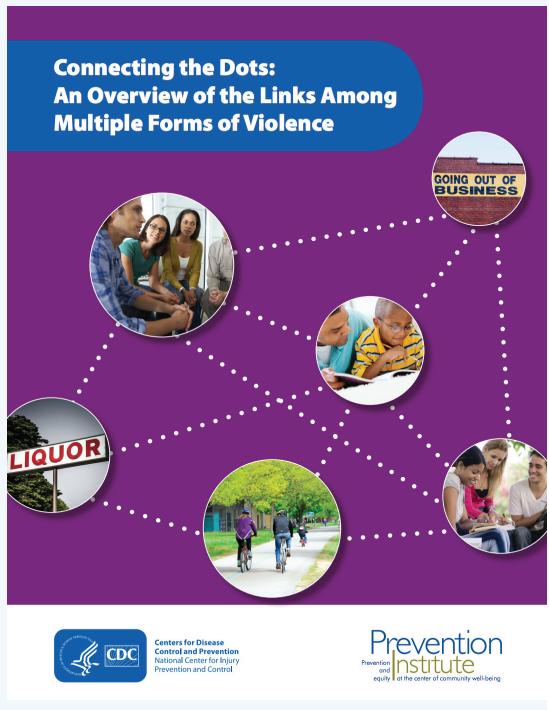
The ACEs Educator Program trains individuals to become ACE educators in different regions of the state, and in turn, these educators train agencies, organizations, and community groups. As of mid-2018, ACE educators had completed over 200 trainings and reached over 5,000 individuals.

STATE-TO-STATE CONNECTIONS IMPROVE PRACTICE

OPH-BFH's key partners, Prevent Child Abuse LA, suggested engaging a consultant to assess how the collaborative group could best incorporate a SRPFs approach. Shortly thereafter, OPH-BFH injury staff attended the Safe States Alliance Annual Meeting and saw a presentation by North Carolina on their Injury-Free NC Academy (the Academy) that offers training around SRPFs, leading Louisiana to send a multi-agency team¹ to **North Carolina**. After attending the the Academy, Louisiana was inspired to start a "mini Academy" in a community served by a local domestic violence agency who was a part their North Carolina Academy team.

Employing an activity learned at the Academy that was based on the CDC's Connecting the Dots document, Louisiana's training curriculum will illuminate how a SRPFs approach can

I. LA team members include: PI for the SVIPP program, program director for the ACEs Education Program, executive director of Prevent Child Abuse LA, director of education for the LA Foundation Against Sexual Assault, representative from the Children's Trust Fund, executive director of LA Coalition Against Domestic Violence, and training coordinator of a local community crisis center for survivors of domestic and sexual violence.



strengthen local efforts to prevent violence, injuries, and other health issues. The activity involves mapping SRPFs onto current community activities to reveal potential points of leverage and gaps, identifying where communities should focus their efforts. Louisiana anticipates centering their training around the protective factor of community connectedness because it was emphasized in the ACE educator curriculum and local partners are already familiar with the idea. The training will be evaluated by collecting baseline data against which progress can be measured. The Louisiana Academy team, in partnership with a group of local stakeholders, will identify a community group to receive intensive training on SRPFs and public health skills that will involve multiple training sessions and active coaching. The local trainees will be expected to develop and implement a plan to reduce violence through addressing SRPFs in their community, as well as conduct an evaluation of their work. After completing their first “mini Academy” in one community and gaining more understanding about what works, the multi-agency Louisiana team plans to replicate the model statewide.

While current activities are funded by SVIPP, Louisiana's OPH-BFH and their partners expect to identify local and state funders to support, scale up and sustain efforts around SRPFs going forward. One possible avenue for funding they anticipate is with the Children’s Trust Fund (CTF), an agency with a representative on the team that is charged with funding public and non-profit organizations to implement community-based child abuse and neglect programs. This connection may lead to funding from the CTF or other funders in the state that are linked to violence prevention work.

CATALYZING ACES AND SHARED RISK AND PROTECTIVE FACTORS FOR NEW APPROACHES TO PREVENTION

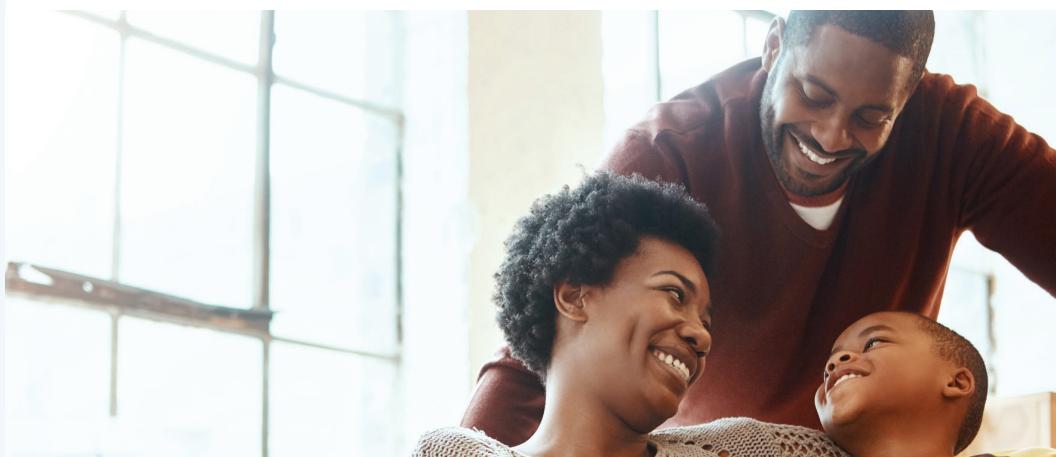
The ACE Educator Program and the Louisiana team that attended the IFNC Academy are collaborating to build momentum across the state for a shared risk and protective factors approach. The ACE Educator Program has already started the conversation about early childhood trauma and its long-term health impacts, and because many people understand those connections, the dialogue can also prompt discussion of what leads to adverse experiences in the first place. The program manager noted, “A lot of folks have taken up the ACEs mantle in an individual or treatment level, and I’m really hoping the [new Louisiana] Academy will be able to engage communities and have a greater, more upstream impact.”

“How do early experiences affect people down the road and what is the role employers and businesses have in building resilience and creating family friendly policies?”

In the midst of the LA team attending the Academy, the OPH-BFH identified their first opportunity to fund the next steps in their process. They started writing their application for the CDC [Essentials for Childhood](#) grant, which promotes “safe, stable and nurturing relationships and environments” to prevent child abuse and neglect. Staff at OPH-BFH felt that “attending the IFNC Academy prepared us well for Essentials because we already had organized our violence prevention workgroups, then we did the [IFNC] Academy, further galvanizing us...so then the [IFNC] Academy was a catalyst for a lot of the things that are going on.” In their Essentials grant application, OPH-BFH focused on two SRPFs: positive parenting, and economic support for families, both of which also have strong connections to reducing ACEs, as well as many other injury and violence issues such as, substance abuse/opioid overdose, suicide, teen dating violence, and others. One of the ideas that came out of the training at the IFNC Academy was to engage community businesses to encourage their involvement with supporting families through positive parenting and economic stability.

If funded by Essentials or other sources, Louisiana plans to engage the business community to understand the role they play in preventing child abuse and neglect, and violence by supporting family stability. As staff who worked on shaping the Essentials grant application explained:

How can we build communities that are more friendly to people and [address] racism, economic supports, paid leave, [and] gender equality? How can we improve community-level factors [and] help build safer, more healthy environments? [The ACE Educator Program has] trained over 5,000 people [and] the next step is to move this into the business community. How do early experiences affect people down the road and what is the role employers and businesses have in building resilience and creating family friendly policies?



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September 2018

ACES ARE A SPRINGBOARD TO SHARED RISK AND PROTECTIVE FACTORS

Many states working on SRPFs find that ACEs are a good entree into SRPFs because many people intuitively understand that ACEs can relate to poor health outcomes later in life. With ACEs providing concrete data to show that connection, they are a great explanatory and quantification tool.

ACEs are just one aspect of a broader SRPF frame and approach. The adverse childhood experiences quantified by the ACEs survey place individuals at higher risk for experiencing other forms of violence, but these ACEs themselves are the result of other underlying SRPFs that families have experienced. ACEs are a tool that can help explain the health burden created by trauma and the need for a SRPFs approach. With SRPFs, the goal is to address multiple health outcomes, such as suicide, motor vehicle crash, or child maltreatment by bringing diverse groups together to work on addressing common risk and protective factors such as community connectedness or economic security. As the ACE Educator Program manager explained:

“So there is all of this folk wisdom around ACEs. People will say, ‘I already knew that...it’s not rocket science.’ But now we have some language to describe it and we all know what we are talking about. This is an opportunity to use the language of the SRPF framework, and... specifically to reach people through ACEs education to build this common understanding that what can protect us from one kind of violence can also protect us from another [via] the underlying causes.”

SUMMARY

Recognition that many of the same risk factors contributed to a variety of violence and injury outcomes, led the OPH-BFH to an interest in a Shared Risk and Protective Factors (SRPFs approach). In the last several years three activities have coalesced to enhance and expand Louisiana’s use of SRPFs. First, their ACE Educator Program supports a SRPF approach by emphasizing how traumatic experiences in youth can influence myriad health issues throughout the lifespan, and it helps participants to start thinking about the risk factors that lead to ACEs in the first place. Next, Louisiana’s participation in the IFNC Academy inspired a plan to train communities throughout the state to start using a SRPF approach. And finally, the opportunity to respond to the funding announcement for Essentials helped the OPH-BFH and its partners clarify their thinking about how to strengthen their work around SRPFs. Louisiana is still early in development of these initiatives, but is already planning to capitalize on their strong foundation to apply for funding that will support their goal of engaging local businesses in building resilient, economically stable families within connected communities. With their ability to build partnerships, capitalize on training opportunities from North Carolina, and make strategic connections across all of their work, LA has a strong foundation on which to build their SRPF approach to preventing injuries and violence.