The Begun Center for Violence Prevention Research and Education at Case Western Reserve University

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Abstract
Established in the year 2000, the Begun Center for Violence Prevention Research and Education is a multidisciplinary center located at a school of social work that engages in collaborative, community-based research and evaluation that spans multiple systems and disciplines. The Center currently occupies 4,200 sq. ft. with multiple offices and individual workstations and is comprised of a staff of over 30 content experts in the areas of applied research, rigorous program evaluation, scientific investigation, policy/program development and community-based practice implementation. Our responsibilities for dissemination efforts lie not only in the area of moving project findings into the scientific literature but also in following up that dissemination by working directly with community providers and policy makers to advance and improve violence prevention efforts. We are currently working toward integrating the Center’s research activities and outcomes with the Mandel School curricular activities and field experiences into the undergraduate, master’s, and doctoral programs. Given our substantive work and relative areas of strength, we are also working toward increasing training activities with our law enforcement and justice system partners who play a critical role as “first social responders” to the many family and interpersonal problems that are related to violence perpetration and violence exposure.

Keywords
prevention, field of practice, trauma, evidence-based practice, literature review, children, population, adolescents, adults, criminal justice

History
The Begun Center for Violence Prevention Research and Education was founded at the Jack, Joseph and Morton Mandel School of Applied Social Sciences, Case Western Reserve University on June 10, 2000. The donor, Dr. Ruth Begun, established an endowed chair, the Semi J. and Ruth W. Begun Professorship, to serve as the director of the center. Additionally, initial start-up monies were provided by the donor. The Begun Center was located at the Mandel School building and provided with newly renovated office space to accommodate approximately six persons. The focus of the new center was to conduct interdisciplinary research into the causes and prevention of violence and to engage in the design, implementation, and evaluation of school and community evidence-based programs for violence prevention.

After hiring a director, among the early activities taken on by the Center was the establishment of a course in violence prevention in the Netherlands and violence prevention consultation/education with Turkey (more specifically, the Turkish National Police). Both of these international efforts continue.

In 2009, another search for a director was launched. Fortuitously, this search eventually focused on the director of an existing violence prevention institute at the nearby Kent State University, the Institute for the Study of the Prevention of Violence (ISPV). Established in 1998, the Institute was comprised of several faculty members, senior researchers, and staff, totaling approximately 25 individuals and had national prominence. Rather than concentrating on hiring only the Institute’s director, the Mandel School dean and the Institute’s director began a series of discussions that culminated in the hiring of the core of the Institute’s personnel including 2 tenure-track faculty, 6 senior research faculty, 6 research assistants, and 2 administrative employees for a total of 16 individuals. The ISPV faculty and staff formally moved to the Mandel School in July 2011 to reinvigorate and expand the Begun Center. In addition to the new personnel, the Begun Center (and the Mandel School) acquired almost all existing grants held by ISPV at that time, totaling approximately to US$2 million.

Currently, the Begun Center engages in collaborative, community-based research and evaluation that often involves multiple partners and spans multiple systems and disciplines.

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We work closely with law enforcement, schools, treatment providers, and public systems such as child welfare and juvenile court. The Center established expertise in applied community-based evaluation, in research on violence and mental health, in working with multisystem involved youth and adults, and in the implementation of evidence-based treatment protocols for at-risk youth and families. Our multidisciplinary staff represents diverse work that we undertake as well as the complexities of addressing violence as a multifaceted social problem.

**Organizational Structure**

The Begun Center is comprised of staff members representing two general areas of activity (1) research and evaluation; and (2) training and technical assistance (TA). Currently the center includes several Mandel School faculty members, senior research associates, research associates and assistants, graduate students, and support staff. Senior research associates are typically doctoral-level staff or others that hold senior administrative positions with at least 3 years of postdoctoral professional experience. Research associates are typically individuals in the first few years of postdoctoral experience. Research assistants are master-level prepared research or training/TA staff. Along with faculty, the senior research associates are most responsible for resource generation, although there is no formal expectation for staff to generate a certain amount of funding relative to their position or salary.

The Begun Center is directed by a faculty member who holds the Begun endowed chair (Flannery). The chair is formally connected to the directorship, which provides release time for the director to be engaged in the administration of the Center. Another faculty person holds the position of deputy director of the center (Singer) and, in addition to participating in research, supports daily operational activities, in particular maintaining and facilitating the Center’s relationship with the rest of the faculty and staff of the Mandel School. Two associate directors provide support for Center research activities and oversee the Center’s training and technical assistant activities via the Center for Innovative Practices (CIP). The Center has a full-time department administrator and a full-time department assistant. We employ student hourly wage staff on an as needed basis. All other staff participate as members of multiple research or training/TA teams depending on their role and the types of projects that support their position. As appropriate and as resources permit, the Center often has postdoctoral fellows and regularly welcomes international scholars, typically for a semester, who are seeking exposure to research on violence or want experience in conducting multidisciplinary research. The Center is also a certified field placement site for master’s students in social work.

**Physical Resources of the Center**

From its 2011 inception at Case Western Reserve University occupying a six-person office space, the Begun Center has expanded its staff and activities and is currently housed in the Jack, Joseph and Morton Mandel Community Studies Center Building on campus. This two-story building was formally donated to the Mandel School by the Mandel Family Foundation in July 2013. The Center operates in approximately 4,200 sq. ft. of office and research space on the second floor of the building. We occupy 4 single offices, 4 shared offices, and 20 individual workstations/cubicles. In addition, there are two 10-person conference rooms and a full-service kitchen and outdoor patio deck available to the staff. Currently there are 30 individuals at the Center. The first floor of the building has several meeting rooms, classrooms, and an open atrium area that are regularly utilized by the Center for receptions or meetings.

**Funding Sources**

The Center engages in grant and contract-funded activities that range from US$10,000 to several hundred thousand dollars per year generated in a variety of ways. Like most research centers, we encourage faculty and staff to pursue investigator-initiated funding from a variety of sources. The bulk of our funding, however, has increasingly come from larger projects that require collaboration with community partners rather than from traditional investigator initiated proposals. One of the challenges is that these collaborative initiatives often require that the applicant be a local education system, a law enforcement agency, or a public system (e.g., child welfare), but many of these entities lack the capacity to write competitive proposals for federal funding. Hence, Center faculty and staff are often substantially involved in the preparation of grant or contract proposals. We may write the bulk of a proposal for funding but not be the primary applicant; rather, we may be the identified research or evaluation partner, a role that is often restricted to 10% or 15% of the total award and with a lower percentage of overhead recovery compared to most federally funded grants. This type of funding is reflected subsequently as federal partner funding (Table 1).

In addition to federal funding, the Center receives funds for research and training from local and national foundations and from state and local governments. A significant portion of our income (about 35%) comes from training and TA contracts, with the remainder from research and evaluation activities. Our present funding is approximately US$2.8 million.

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<th>Table 1. Begun Center Funding Sources by Percentage Annual Allocation.</th>
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<td><strong>Type of Funding</strong></td>
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The selected projects summarized subsequently represent the diversity of Begun Center projects and initiatives, but almost all reflect our commitment to working with community partners on an array of issues broadly related to violence and violence prevention. The work reflects our multidisciplinary, multisystem focus necessary to effectively address violence as a complicated social phenomena. Effective prevention and intervention is not just a mental health or behavioral health issue or an issue confined to law enforcement or policy. Violence is a community public health problem that requires a diversity of sustainable efforts to achieve any kind of measurable, significant outcomes. These projects reflect our most common role as research or evaluation partner. All of the projects have extensive project reports or related publications available via the Center’s website at http://begun.case.edu.

Completed Projects

Cuyahoga County Children Who Witness Violence Initiative

Funded by the U.S. Department of Justice, the goal of the Cuyahoga County Children Who Witness Violence Program was to develop a crisis intervention and referral model for children of age from birth through 17 exposed to domestic violence (DV) incidents. Police officers, the primary referral source, undergo training on the effects of violence and trauma on children. For incidents of DV that involve children as witness, a crisis intervention worker makes contact with the family within 72 hr to provide intervention and potential ongoing services. Operational since the mid-1990s, the model has evolved to include special services for children who have witnessed homicide. In addition, it has become an intervention utilized by the National Child Traumatic Stress Network. In the first several years of the initiative Begun Center staff gathered information on the nature and characteristics of incidents as well as the impact of violence on child mental health and trauma from a sample of approximately 1,800 children and families (Drotar et al., 2003; Spilsbury et al., 2007, 2005, 2008).

PeaceBuilders School-Based Violence Prevention

PeaceBuilders is a universal school-based violence prevention program. Initially designed and implemented with youth in Grades K–5, in a school-level randomized trial funded by the Centers for Disease Control and Prevention, PeaceBuilders was shown to significantly improve social competence and reduce aggressive behaviors (Embery, Flannery, Vazsonyi, Powell, & Atha, 1999; Flannery, Singer, & Wester, 2003; Vazsonyi, Belliston, & Flannery, 2004; Flannery, Vazsonyi, Liu, Guo, Powell, Atha, Vesterdal, & Embry, 2003). Improvements over 2 years of intervention were noted for both teacher and student self-reports from over 4,000 predominantly Hispanic and Native American children. One of the first universal school-wide culture changing interventions to focus on improving student social skills and competencies, PeaceBuilders has now been implemented in over 1,200 schools nationally and includes programs for preschools, high schools, and afterschooltime. Current versions of the PAX Good Behavior Game, a widely implemented evidence-based violence prevention program in elementary schools, utilize several core concepts and principles from the original PeaceBuilders program. The Center’s school-based violence prevention work has also included partnership on several Safe Students/Healthy students grants (Blankenmeyer, Flannery, & Vazsonyi, 2002; Farrell & Flannery, 2006; Hussey & Flannery, 2007; Jeffersis, Brewer, Flannery, Dogutas, & Mosgo, 2006).

The Louis Stokes Greater Cleveland Consortium for Youth Violence Prevention

Funded by the National Institute of Child Health and Development (NICHD), the Stokes Consortium was a community-based participatory research project focused on increasing community awareness of the problem of youth violence and developing strategies for a comprehensive plan for prevention and intervention. The Consortium was a collaborative effort with the Partnership for a Safer Cleveland and included a community advisory board of system leaders. Annual meetings were held that focused on various aspects of violence prevention, and national speakers were invited to share their expertise with local partners. The Consortium also partnered with other federally funded initiatives in the community including Project Safe Neighborhoods and the Defending Childhood Initiative, efforts related to Promise Neighborhood development, and a city-led health initiative that included a focus on youth violence.

Adult Treatment Drug Court

The Adult Treatment Drug Court (ATDC) project sought to improve outcomes for 18- to 32-year-old opiate users referred by the Cuyahoga County, Ohio Felony Drug Court. The project focused on closing gaps in the treatment continuum and enhancing existing services via culturally competent, evidence-based case management and age-appropriate, substance-specific alcohol and other drug (AOD) treatment. The Begun Center conducted an evaluation of the ATDC including data gathered with the Global Appraisal of Individual Need (GAIN-I), Government Performance and Results Act (GPRA) and process data. More than 1,100 people successfully completed the drug court program. ATDC clients exhibited decreased substance use behavior 6 months after program intake, including statistically significant declines in alcohol, marijuana, and opiate use. Declines in substance use were maintained 1 year after program intake. We also found significant declines in the average number of problems associated with substance use as well as significant improvements in depression and related behaviors. While the subset of clients with 12-month data committed an average of three criminal acts during the year before program intake, these individuals committed no criminal acts during the 90 days prior to the 12-month follow-up.
Youth and Family Community Partnership (YFCP) Study

The YFCP study assessed the impact of diverting juvenile justice involved youth who had previously been housed in a residential treatment facility to community-based treatment. Program evaluation included baseline and posttreatment information gathered from youth, caregivers, and providers to determine whether community-based care could be as effective as institutional care without increasing recidivism or reducing community safety. The Begun Center study from intake to 6-month follow-up of 142 youth showed overall improvement in mental and behavioral health and functioning characterized by reductions in victimization from violence, trauma symptoms, drug and alcohol use, and improvements in family functioning. Recidivism rates for YFCP youth were similar to comparison youth who had previously been housed in a residential treatment facility, despite the YFCP group having more complex mental and behavioral health diagnoses prior to treatment.

The Myth of Prison Rape

Under a grant from the National Institute of Justice to support research mandated by the Prison Rape Elimination Act (PREA), Begun investigators and colleagues conducted in-depth interviews with more than 500 randomly selected male and female inmates in diverse prisons from different parts of the country. Their study assessed inmate perception, belief, opinion, and explanation of their own behavior as it relates directly and indirectly to sexual life and sexual violence. They found that prisoners overwhelmingly see most sexual relations in prison as normal, predictable, and voluntary and that they have little fear of the kind of violent sexual attack that media and others suggest is an everyday common occurrence (Fleisher & Kreinert, 2009).

The Strengthening Communities-Youth (SCY) Project

Funded by Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Treatment (SAMHSA/CSAT), the SCY project was designed to improve outcomes for adolescent juvenile offenders with serious alcohol and drug addiction problems. This initiative focused on youth between the ages of 12 and 17 referred to juvenile court as the result of a new arrest. Over 3 years, we gathered information from youth, caregivers, and public systems (e.g., treatment data and juvenile offending) at intake and at 3, 6, and 12 months post-intake. Significant reductions in alcohol and marijuana use were maintained at 12 months, and youth who stayed in treatment were less likely than youth who did not stay in treatment to recidivate (and there were more days until they recidivated). The SCY project was one of the first system-of-care (SOC)-oriented studies to illustrate the high levels of comorbidity in juvenile justice youth including high rates of DV charges and high rates of sexual victimization among female offenders (Hussey, Drinkard, Falletta, & Flannery, 2008; Hussey, Drinkard, & Flannery, 2007).

Current and Ongoing Projects

Behavioral Health Juvenile Justice (BHJJ) Program

Juvenile justice-involved youth with serious behavioral health issues often have inadequate and limited access to care to address their complex and multiple needs. Ohio’s BHJJ initiative is intended to transform and expand the local systems’ options to better serve these youth. Since 2006, a dozen Ohio counties have participated in BHJJ including the six largest counties that send the highest number of youth to the state prison system. BHJJ seeks to divert youth from local and state detention centers into more comprehensive, community-based mental and behavioral health treatment. BHJJ enrolls juvenile justice-involved youth between 10 and 18 years of age who meet several of the following criteria: a DSM IV Axis I diagnosis, substantial mental status impairment, a co-occurring substance use/abuse problem, a pattern of violent or criminal behavior, and a history of multisystem involvement. Since 2006, over 2,500 youth have received community evidence-based treatment as opposed to incarceration.

Participating youth have reported a significant decrease in trauma symptoms, substance use, and victimization from intake to termination. Caregivers, workers, and youth also have reported improved youth functioning and decreased problem severity. In a previous study, nearly 70% of the youth were suspended or expelled from school in the year prior to their enrollment. At termination, 83% of youth who were attending school regularly. Successful treatment completion in BHJJ produced lower percentages of subsequent juvenile court charges, felonies, misdemeanors, and delinquent adjudications than unsuccessful completers. In a matched comparison, 2.2% of youth who completed BHJJ successfully were committed to an Ohio Department of Youth Services (ODYS) institution 12 months after their termination, while 19.0% of youth released from an ODYS facility were recommitted to an ODYS facility in the 12 months following their release (Butcher, Kretschmar, Flannery, & Singer, 2012; Kretschmar & Flannery, 2011; Seck, Singer, & Flannery, 2010).

Research on Violence Exposure and Mental Health

Since the early 1990s, our team has conducted multiple studies that have assessed the relationship between violence exposure (as witness or victim) and mental health symptoms (anger, anxiety, and depression) and risk for perpetrating violence (Flannery, 2006; Flannery et al., 2007; Flannery, Vazsonyi, & Waldman, 2007; Singer, Anglin, Song, & Lunghofer, 1995; Singer et al., 1999; Singer, Slovak, Frierson, & York, 1998). We have demonstrated a significant link between exposure to violence and clinical levels of trauma symptoms (Flannery, Singer, Williams, & Castro, 1998; Flannery, Wester, & Singer, 2004; Singer et al., 1999; Singer, Flannery, Guo, Miller, & Liebrandt, 2004), between threats and violent behavior (Liau, Flannery, & Quinn-Leering, 2004; Singer & Flannery, 2000), and between high violence exposure and risk for suicide via anger and depression in dangerously aggressive, violent youth.
We have also developed and tested instruments to assess violence exposure and violent behaviors (Singer, 2008; Singer and Flannery, 2000; Van Dulmen, Belliston, Flannery, & Singer, 2008). Most recently, we have written specifically about the relationship between violence, school shootings, and potential mental health issues (Flannery, Modzeleski, & Kretschmar, 2013) and about issues related to the use of the Trauma Symptom Checklist for Children (TSC-C) in juvenile justice samples (Butcher, Kretschmar, Lin, Flannery, & Singer In Press).

Defending Childhood Initiative

Children’s exposure to violence, whether as victims or as witnesses, is often associated with long-term physical, psychological, and emotional harm. Violence-exposed children are also at a higher risk of engaging in criminal behavior later in life. In 2010, the U.S. Attorney General Eric Holder launched the Defending Childhood Initiative to address children’s exposure to violence. As research partner for Cuyahoga County, Ohio’s initiative, Begun staff serve on the core management team of the project and oversee all research and evaluation activities. Three main components of the initial implementation have been maintained: (1) screening youth from juvenile justice, child welfare and the community on violence victimization and trauma (n = 14,000) using a screening instrument developed by Begun staff; (2) providing in-depth assessments to referred youth based on high levels of victimization and trauma (n = 600); and (3) providing trauma-informed care to youth and families in need of additional services (n = 400).

Fugitive Safe Surrender (FSS)

The FSS program encourages persons wanted for nonviolent felony or misdemeanor crimes to voluntarily surrender in a church, where the entirety of the justice system is setup to process the cases of individuals with open warrants (Flannery & Kretschmar, 2012). Authorized by Congress in July 2006, FSS is believed to be the first program of its kind in the nation. FSS was created as a way to reduce the risk to law enforcement officers and the community from persons who flee when an arrest attempt is made. The rationale was that a church would be viewed as a safe haven by fugitives who often mistrust law enforcement. To date, over 45,000 individuals with active warrants have voluntarily surrendered to a local church in over 30 cities around the country. The majority of individuals report that they are tired of running and that they just want to reenter society. Many of them reported that a main reason they stayed on the run (for an average of over 2 years) was that they did not have money to pay a fine or post bond. A major motivator for some to surrender was to get their driver’s license back. Nearly 20% of those who surrendered did not have an open warrant that could be located, and only 2% of all individuals who surrendered were taken into custody. Wanted on Warrants: The Fugitive Safe Surrender Program (Flannery, 2013) chronicles the history and impact of the FSS program from 2005 through 2010.

The Police Assisted Referral (PAR) Program

The PAR program is an evidenced-informed collaboration among the Begun Center, the Cuyahoga Metropolitan Housing Authority (CMHA) Police Department, community treatment providers and the Partnership for a Safer Cleveland. The initiative focuses on children and their families who have experienced violence as a witness and/or victim. PAR creates a conduit for CMHA police officers to connect these families to immediate crisis intervention services and longer term care as needed. The program is designed to strengthen the trust between police and public housing residents and connect youth and their families to services that prevent violence and build resiliency. Data demonstrate both officers’ and citizens’ willingness to embrace/use the program and a more positive view of police officers by residents who have received PAR services (Bartholomew, Singer, Gonzalez, & Walker, 2013).

The Ohio Department of Mental Health and Additions Services Drug Court Medication Assisted Treatment Program

The Center is evaluating the effectiveness of Ohio’s US$5 million statewide pilot addiction treatment program for individuals referred for treatment by the courts. The treatment program is described as a “certified drug court program,” where municipal and county courts establish special courts to hear drug-related cases involving opioids, alcohol, or both to decide if the individual would benefit from treatment instead of incarceration. The evaluation involves assessing how the treatment program addresses the addiction problems of 500 offenders in drug courts located in six Ohio counties. Individuals participating will have personalized plans with specific goals and objectives. The evaluation monitors participants’ adherence to their plans, use of therapeutic services, and substance use outcomes.

Cuyahoga County, Ohio Tapestry System of Care (SOC)

Built upon a 6-year grant received from the SAMHSA in 2003 to develop an SOC, Tapestry as a sustainable model continues to utilize a community wraparound model to service more than 600 families each year via system care coordination and family and youth advocacy. Currently Tapestry SOC is housed in the county’s Department of Children and Family Services. It is a strength-based model that utilizes both formal evidence-based treatment programs and informal community supports with an emphasis on cultural competency and family engagement. Begun staff continue to provide TA and data management and analysis services to the Tapestry SOC initiative. This SOC project is an example
of a model that was sustained at the county level from initial grant funding.

**MyCom (My Community, My Commitment) Youth Development Initiative**

Since 2007, Begun Center staff have been working with Cuyahoga County Family and Children First Council (FCFC), the Cleveland Foundation and multiple community-based organizations to provide TA and direct data collection services for MyCom, an out-of-schooltime youth development initiative. MyCom focuses on eight neighborhoods with activities in six core areas including youth advocacy, neighborhood mobilization, youth engagement, transitions for at-risk youth, employment/job readiness, and out-of-schooltime. A main goal is to increase school age youths’ access to programs and services while increasing the quality, capacity, and accessibility of those programs and services. A significant challenge has been to increase neighborhood-based organizational capacity for information gathering for accountability and to implement strategies that contribute to program sustainability. The broad goals of MyCom are to prepare young people to reach their full potential and become active, productive citizens with the skills needed to compete in a global economy.

**Offender Reentry Program for Juveniles (ORP-J)**

This Begun Center collaboration is a 3-year program funded by the SAMHSA and headed by Catholic Charities of Greater Cleveland. ORP-J is an innovative juvenile offender reentry program that sought to reduce criminal offending and substance use and improve behavioral health for a group of high-risk youth transitioning back to their communities after incarceration. Salient ORP-J program features include a focus on early engagement, motivation, the therapeutic relationship, retention, and sufficient dosage. The success of ORP-J is due in part to the continuity, coordination, and comprehensiveness of care, specifically including evidence-based programming, ongoing monitoring, and effective communication and coordination. Both pre- and post-release components integrate corrections, parole, and court staff with treatment providers through a reentry court platform. At 12 months post-intake, we found statistically significant decreases in marijuana use and drunkenness, significant decreases in multiple types of criminal offending and improvements in behavioral health.

**Adult Offender Reentry (Second Chance Act)**

Ohio has one of the largest state prison systems nationwide, and Cuyahoga County has the highest number of committed prisoners (14.3%). Through the Bureau of Justice Assistance, the Second Chance Act funds the Cuyahoga County Office of Reentry to tailor reentry plans and supportive services for very high, high or moderate risk offenders helping them return from prison and reduce their chance of recidivating (Listwan, Colvin, Hanley, & Flannery, 2010). The program has two service providers – Community Assessment & Treatment Services (CATS) and Community Reentry (CRE). Clients receive 3 months pre-release and 6 months post-release case management services including referrals to employment, education, housing, and behavioral health treatment services. The Begun Center has conducted ongoing evaluation since 2011. Approximately 175 individuals are served annually and 60% of those enrolled are successful completers, defined as being fully engaged and finishing the 9-month program and/or meeting goals as outlined in the case plan. The recidivism rate for those in the program is 7.3% compared to 8.9% for all inmates released from Ohio prisons in 2011.

**Dissemination, Implementation, and TA via the CIP at the Begun Center for Violence Prevention**

The CIP, one of the Ohio Department of Mental and Addiction Services (MHAS) Coordinating Centers of Excellence (COE), is located within the Begun Center. It is the only funded COE in Ohio that specifically addresses the needs of multisystem involved youth with serious behavior disorders, particularly those youth and families involved with juvenile justice and child welfare. The core mission of CIP is the dissemination and implementation of evidence-based and promising community interventions. This is largely accomplished through training, TA, quality assurance, and ongoing coaching/support to provider organizations implementing these practices. The intervention initiatives are summarized subsequently.

The focus of CIP's work is on Multisystemic Therapy (MST), Functional Family Therapy (FFT), and two locally developed interventions for high-risk multisystem involved youth and families, Integrated Co-occurring Treatment (ICT) and Intensive Home-Based Treatment (IHBT). ICT was recognized nationally as a promising program model in the Blueprint for Change: A Comprehensive Model for the Identification and Treatment of Youth with Mental Health Needs in Contact with the Juvenile Justice System (Skowyra & Cocozza, 2007). Each of these approaches, to various degrees, provides intensive comprehensive services to youth who may be justice system involved but who may also have significant academic, mental health, or substance use problems. These interventions tend to be longer term (averaging 5–8 months in duration), family focused, and involve interactions with each of the affected systems, so the models require ongoing fidelity assessments and training supports. The CIP has also developed a community tool kit focusing on resilience and has increasingly developed its expertise in the area of youth with co-occurring disorders of mental health and substance abuse. The CIP is very involved in juvenile justice reform as part of the MacArthur Foundation’s National Campaign for Reform. The CIP is a frequent contributor at local, state, and national venues in the areas of behavioral health, juvenile justice, resilience, and co-occurring disorders.

Most recently, the CIP was selected by the Department of Mental Health and Addiction Services to provide training and TA for the statewide implementation of high-fidelity wraparound. This initiative is federally funded by
SAMHSA under the state’s SOC expansion grant. The 3-year goal is the dissemination of high-fidelity wraparound across the majority of Ohio counties. The project specifically focuses on transition age youth between 16 and 21.

**Future Plans for the Center**

As with many academic research centers, one long-term issue for the Begun Center is to achieve sustainability, which can be accomplished via an endowment for the center admixed with creative funding models for infrastructure and administrative support. This will continue to be an ongoing focus for the Center. Substantively, we plan to continue our focus on multi-system and multidisciplinary approaches that impact violence prevention, particularly in community-based and evidence-based approaches to violence. This diversification has contributed to our longevity and we expect to continue on this path.

A significant part of our mission is to contribute to education and policy in violence prevention, so now that we are established in the Mandel School of Social Work we hope to attract postdoctoral fellows, minority and international scholars who are interested in being exposed to violence prevention research and evaluation. We are also now in a position to more assertively integrate the Center’s research activities and outcomes with Mandel School curricular activities and field experiences into the undergraduate, master’s, and doctoral programs. Given our substantive work and relative areas of strength, we think there are also opportunities to expand the training activities with our law enforcement and justice system partners who play a critical role as first recognizers and first responders in many situations that involve violence or the potential for violence.

Finally, moving forward we plan to continue to capitalize on electronic and social media as vehicles that can increase our ability to disseminate information about best practices, research findings that can influence policy and practice, and to enhance the national and international exposure of the Center and its activities.

**Declaration of Conflicting Interests**

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