



City and County of San Francisco
London N. Breed
Mayor



San Francisco Health Network
Behavioral Health Services

PROACTIVE CITYWIDE TRAUMA RESPONSE TO GUN VIOLENCE: PROTOCOL AND IMPLEMENTATION PLAN

On May 24, 2022, the San Francisco Board of Supervisors passed a [Resolution](#) (“the Resolution”; see box below) urging the development of a proactive citywide trauma response to gun violence.

Resolution NO. 255-22; Urging the Development of Proactive Citywide Trauma Response to Gun Violence

RESOLVED, That the Board of Supervisors urges the Department of Public Health, in consultation with the Department of Emergency Management, Mayor’s Office of Violence Prevention and Public Safety, San Francisco Fire Department, San Francisco Police Department, Department of Youth, and Families, Department on the Status of Women, other relevant City departments, and community partners to create a proposed protocol and implementation plan to respond proactively with information and connections to resources following instances of gun-related community trauma; and, be it

FURTHER RESOLVED, That the proposed protocol should include, at minimum, the following:

1. Within 72 hours of the incident of gun violence, outreach through flyering, phone calls, community events, or other means of reaching people within a one-block radius from the incident to notify community members of available trauma counseling resources;
2. A clear delineation of duties between departments, service providers, and any other City-affiliated agencies as needed to implement the protocol; and, be it

FURTHER RESOLVED, That the Board of Supervisors urges the proposed protocols to be filed with the Board of Supervisors within 90 days of the passage of this Resolution and be made publicly available for community input; and, be it

FURTHER RESOLVED, That the Board of Supervisors urges a public hearing on the resulting proposed protocol be held within 60 days of its filing with the Board.

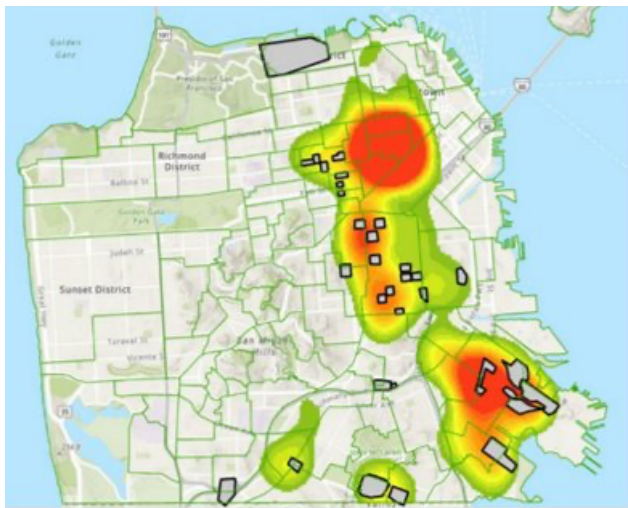
In support of this resolution, this brief provides:

- I. Background on San Francisco’s gun violence and citywide trauma response services
- II. City partnerships and community engagement
- III. Protocol for a citywide trauma response to gun violence
- IV. Next steps

I. BACKGROUND ON SAN FRANCISCO'S GUN VIOLENCE AND CITYWIDE TRAUMA RESPONSE SERVICES

Gun violence is a leading cause of injury and premature death, has significant behavioral impacts, and disproportionately affects young people and people of color.¹

Black and Hispanic males are at especially high risk – among males ages 15 to 34, homicide is the leading cause of death among Blacks and the second leading cause of death for Hispanics. The impact of gun violence extends beyond physical injury, having serious and lasting effects on behavioral and social health, especially among youth. Those who experience and are exposed to violence as victims, perpetrators, or witnesses are more likely to experience depressive symptoms, anxiety, post-traumatic stress, and aggression.²



San Francisco has lower rates of gun violence compared to other major American cities, though fatal and nonfatal shooting incidents increased by 33% — from 167 to 222 — from 2020 to 2021, and homicides rose from 48 to 56.³ An analysis of gun violence in San Francisco from 2017 through 2020 found that 29% of all violent gun crimes took place in San Francisco's Bayview, Potrero Hill, and Visitation Valley neighborhoods and **85% of those impacted by gun violence are Black and Latino men, even though they comprise less than 10% of the San Francisco's total population.**⁴

Figure 1. Heat map of incidents of gun violence and homicides, 2017-2018.

A Public Health Framework to Address Gun Violence

Gun violence prevention requires a range of intervention and prevention activities to address drivers of violence and resulting impacts on communities. The public health framework depicted in Figure 2 organizes interventions based on impacts (individual, environmental, and societal) and timing relative to the incident. The highlighted boxes on the figure indicate intervention areas that align with the San Francisco BOS resolution and the scope of the proposed protocol: **to address individual and community trauma in the aftermath of gun violence.**

¹ David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N. & Hall, J. E. (2016). A Comprehensive Technical Package for the Prevention of Youth Violence and Associated Risk Behaviors. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

² Miliuskas, C. R., Faus, D. P., da Cruz, V. L., do Nascimento Vallaperde, J. G. R., Junger, W., & Lopes, C. S. (2022). Community violence and internalizing mental health symptoms in adolescents: A systematic review. *BMC Psychiatry*, 22(1), 253

³ Cassidy, M. (2022, January 26). San Francisco gun violence rose last year, with shootings up 33%. San Francisco Chronicle. <https://www.sfchronicle.com/sf/article/San-Francisco-gun-violence-rose-last-year-with-16807355.php>

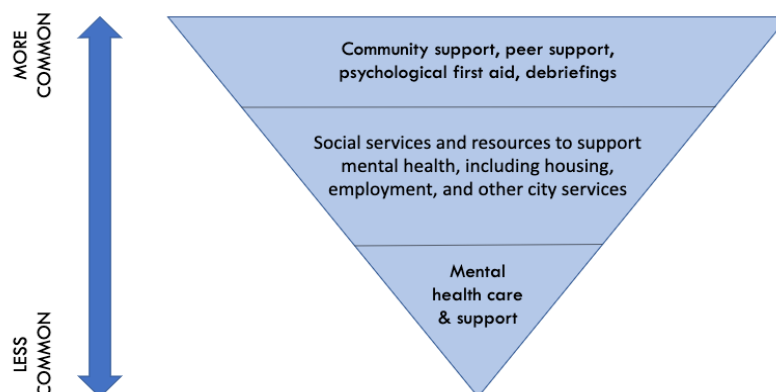
⁴ Understanding Serious Violence in San Francisco 2017-2020. California Partnership for Safe Communities. 2021

Figure 2: Public Health Framework to Address Gun Violence

	Individual Factors	Vector Factors	Physical Environment	Social Environment
Pre-event	Identifying and addressing individual risks and creating opportunity	Firearm access /carrying practices	Changing the built environment to promote thriving	Building social cohesion and trust, addressing chronic disinvestment
Event	Conflict mediation	Firearm use in conflict	Designing outdoor space to discourage violence/disincentivize	Changing norms around violence, community engagement
Post-event	Physical and emotional healing, mitigating retaliation	Addressing proliferation of firearms in communities, firearm tracing and accountability	Targeted blight remediation and community investment	Community trauma supports, restorative justice practices, building agency for change

In most cases, healing from the trauma of gun violence will be found in supports such as post-incident debriefings, peer support, and psychological first aid. For those who may need additional supports, social services such as housing and employment are often the highest priority resources that are needed to support wellbeing. A smaller number of individuals may be more acutely impacted and require specialty mental health or other health care services, as shown in Figure 3.

Figure 3: Types of Community Supports Needed Following Gun Violence, Based on Experience of San Francisco Violence Response Providers and Community



Existing DPH and San Francisco Programs that Addressed Mental Health Impacts of Gun Violence

DPH, along with other City agencies and community-based organizations, provide an array of programs and services to respond to gun violence (see Table 1). These interventions range from social and health services to direct community outreach.

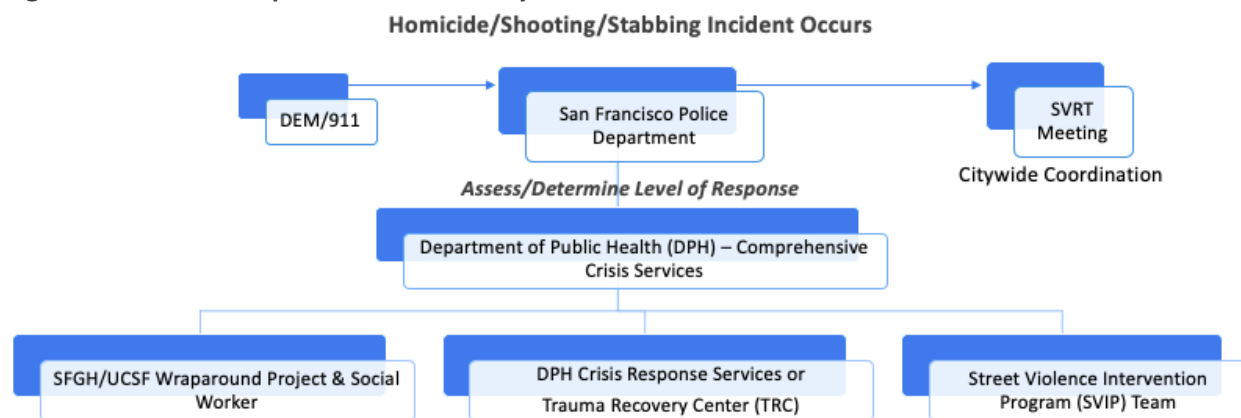
Table 1: Sample of Programs that Respond to Gun Violence in San Francisco (not an exhaustive list)

Intervention Types	San Francisco Programs
<p>Social and health services for those who experience/are exposed to gun violence</p> <p><i>Example:</i> Case management and supportive services, hospital-based violence prevention services, school-based services</p>	<p>Comprehensive Crisis Services (CCS): CCS is a multidisciplinary, multi-linguistic civil service program that provides acute mental health and crisis response services to community members impacted by violence, in addition to adult and child mobile crisis evaluations. CCS provides caring and culturally competent services, including: follow up contact within a 24- to 48-hour period of the initial crisis or incident; short-term case management; and therapy to individuals and families that have been exposed to trauma.</p> <p>Wraparound Project & Trauma Recovery Center: The UCSF Wraparound Project is a violence intervention program based at Zuckerberg San Francisco General Hospital that works to reduce injury and criminal recidivism in the most vulnerable citizens of the city of San Francisco. It serves as a vital point of entry, providing mentorship and linking clients to essential risk-reduction resources.</p> <p>Community Based Organizations (CBOs): There are numerous CBOs in San Francisco that provide social and health services to specific neighborhoods and cultural groups. CBOs play a central role in providing services to those who are exposed to gun violence. Appendix A provides a partial list of CBOs that currently provide these types of services following an incident of gun violence.</p>
<p>Direct Community Outreach</p> <p><i>Example:</i> Townhalls and community dialogues, community ambassador programs</p>	<p>Street Violence Intervention Program (SVIP): SVIP aims to reduce street violence and homicides through street-level prevention and intervention, especially among young people. SVIP outreach workers engage in three main activities: street outreach, crisis response, and community mobilization. SVIP is overseen by the Mayor’s Office of Violence Prevention Services, in partnership with DPH and the Department of Children, Youth, and their Families.</p> <p>Townhalls: To share information and increase community dialogue following incidents of gun violence, townhalls may be convened by SFPD, elected officials of the Board of Supervisors, community-based organizations, and others to create space for impacted residents and other concerned citizens. The San Francisco Police Department is also required to host town hall meetings with communities following any officer-involved shooting.</p> <p>Community Based Organizations: In addition to providing site-based services, CBO’s may provide direct outreach to the community. Such programming includes community ambassadors to engage residents and facilitate community dialogues.</p>
<p>Public awareness of victim services</p>	<p>District Attorney’s (DA) Victim Services: The Victim Services Division (VSD) of the San Francisco District Attorney’s Office provides support and assistance to victims and their families in the aftermath of a crime, during criminal prosecution, and after a verdict has been reached. Following an incident, the DA VSD will follow up with victims to provide them information regarding available social services and, when appropriate, provide referrals to CCS and other programs.</p> <p>Community Based Organizations (CBOs): A key role of CBOs is connecting victims of violence to the available community services, including services provided by the organization itself or elsewhere in the community.</p>
<p>Coordination and collaboration of victim service providers</p> <p><i>Examples:</i> Implement shooting response protocol, Improve referral mechanisms</p>	<p>Street Violence Response Team (SVRT): The SVRT provides a forum to organize an action plan that includes full wraparound services and immediate intervention strategies to quell violence. The meeting unites violence prevention expertise from the Mayor’s Office, the Board of Supervisors, the San Francisco Police Department, the Adult Probation Department, the Juvenile Probation Department, the Department of Public Health, the Housing Authority, the District Attorney’s Office, the San Francisco Unified School District, Mayor's Office of Housing and Community Development, the Street Violence Intervention Program. SVRT utilizes data-driven information and community-based intelligence to address potential increases in street violence. SVRT members meet weekly and exchange invaluable knowledge of neighborhoods, schools, victims, and perpetrators to supports violence prevention, intervention and reentry strategies for the City and County of San Francisco.</p>

Existing Violence Response Notification System in San Francisco

When an incident of gun violence or a violent death occurs in San Francisco, a response notification system (Figure 4) promotes coordinated and comprehensive services offered to the victim and their family. Lead response system partners include DPH’s Comprehensive Crisis Services (CCS), Zuckerberg San Francisco General Hospital’s UCSF Wraparound Project, and the Street Violence Intervention Program (SVIP).

Figure 4: Violence Response Notification System



II. CITY PARTNERSHIPS AND COMMUNITY ENGAGEMENT

Multiple City agencies and community organizations (Table 2) have provided feedback on the development of the proposed protocol for responding to trauma from gun violence (“the Protocol”). In addition to holding one-on-one meetings, DPH facilitated three community meetings in July and August to gather input on the Protocol and ensure that the Protocol appropriately responds to community needs and engages the many community leaders and resources already available.

Table 2: List of Community Partners and City Agencies Engaged During Protocol Development

Community Organizations	City Agencies
<ul style="list-style-type: none"> • Bayview Hunters Point Foundation • Booker T Washington • CARE • Community Youth Center • Green Streets • Homeless Children's Network • Latin Taskforce • Mission Peace Collaborative • Rafiki Coalition • Potrero Hill Stand in Peace • Richmond Area Multi-Services • Samoan Community Development Center • Street Violence Intervention Program • Trauma Recovery Center • United Players • Westside Crisis • YMCA • Other Community Members 	<ul style="list-style-type: none"> • Department of Public Health* • Department of Emergency Management* • San Francisco Fire Department* • San Francisco Police Department * • Department of Children, Youth, and Families* • Department on the Status of Women* • Department of Homelessness and Supportive Housing • Mayor's Office of Housing and Community Development • Mayor's Office of Public Safety • District Attorney • Human Rights Commission • Metropolitan Transportation Authority <p style="text-align: right;">* Named in Resolution</p>

Key themes from meeting with community stakeholders included:

- The communities most impacted by gun violence have existing resources that should be leveraged to respond to incidents.
- Direct onsite response (e.g., community ambassadors) would be the most trusted approach to provide information to the community.
- Social services (e.g., housing and relocation services) are often needed in response to incidents of gun violence.
- Services need to be cultural responsiveness.

Principles and Values Guiding the Development of the Protocol

DPH followed a set of principles to guide the development of the Protocol. These principles reflect the input from community groups and City agencies during the protocol outreach and development process.

- **Recognize and support the work already being done by the Community:** The Protocol should respect existing efforts in communities responding to gun violence and strengthen and coordinate with these efforts.
- **Center the imperative to address racial equity:** The protocol must address the racial inequities and institutional racism reflected in the over-representation of communities of color impacted by gun violence.
- **Meet people where they are:** Responses to gun violence should seek to understand where someone is emotionally, mentally, and physically, and meet them there.
- **Acknowledge system limitations:** The Protocol should consider and address institutional barriers that need to be overcome to readily access mental health resources, including through peer navigation supports.
- **Recognize the need for other social supports:** Individuals and communities may have social service needs such as housing, transportation, etc. that are in addition to or even higher priority than behavioral health services.
- **Resources need to be culturally congruent:** Services should reflect the values, customs, beliefs, and languages of the communities served.

III. PROTOCOL FOR A CITYWIDE TRAUMA RESPONSE TO GUN VIOLENCE

The purpose of the Protocol is to ensure that SFPD, other city agencies, and community organizations provide a coordinated and proactive response to instances of gun-related community trauma. The Protocol includes processes for notification of city agencies following a shooting incident, coordination of outreach to impacted communities, linkages with social services and behavioral health resources, and measurement of impact and opportunities for improvement.

Protocol Outline

A. Notification/Communication Following Gun Violence Incident

- a. SFPD notifies DPH's Comprehensive Crisis Services about a fatal and non-fatal shooting as it does currently
- b. Within 24 hours of being notified by SFPD, Comprehensive Crisis Services will contact a Gun Violence Healing Response Outreach Coordinator(s)
- c. Outreach Coordinator(s) will contact appropriate Community Provider(s) based on impacted:
 - i. Neighborhood
 - ii. Cultural Community

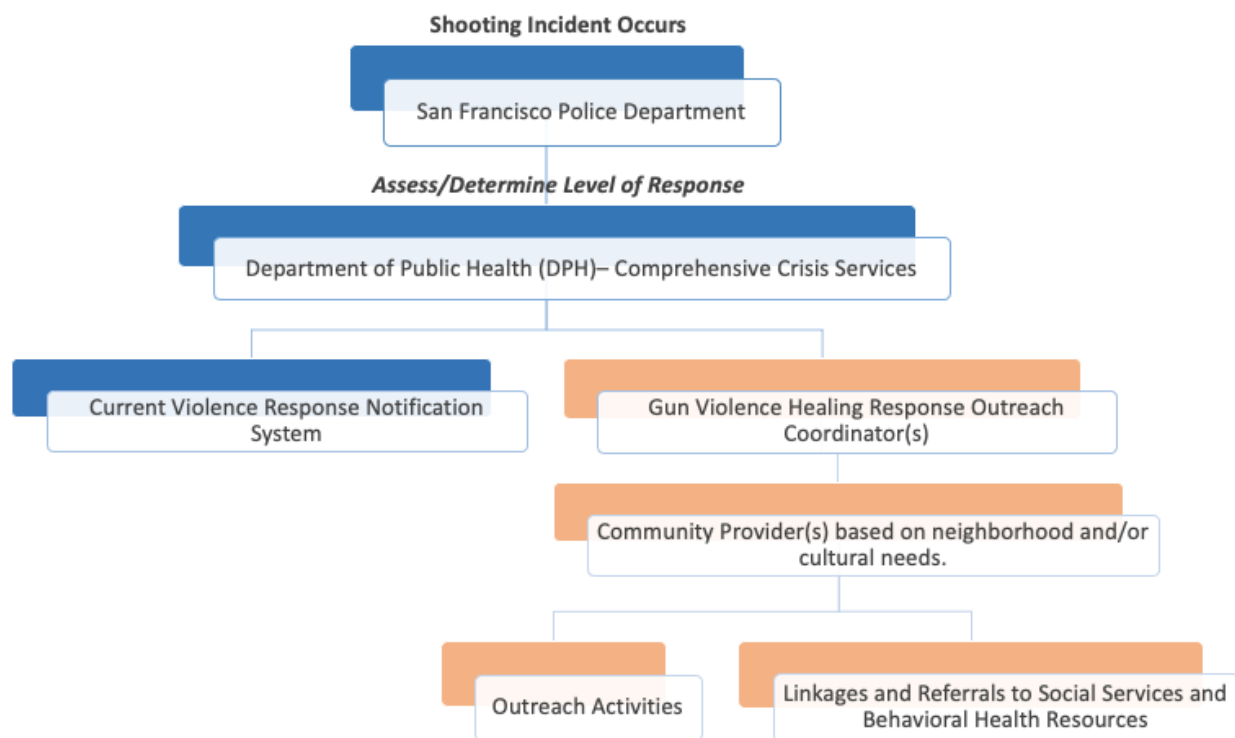
B. Outreach Coordination

- a. Outreach Coordinator(s) confirms which Community Provider(s) will provide outreach to the community, and/or the Coordinator will provide the outreach when needed
- b. The Coordinator and Community Provider(s) will make a plan for outreach within 72 hours and within a 1-block radius (at a minimum) of the shooting
- c. Examples of Outreach Activities:
 - i. In-person presence with community
 - ii. Provide strategies to support mental health, wellbeing and healing, including psychological first aid
 - iii. Facilitate and participate in community-driven groups, activities, and meetings
 - iv. Navigation to social services and behavioral health resources
 - v. Providing information on available resources

C. Linkages and Referrals to Social Services and Behavioral Health Resources

- a. Community Providers would provide information on linking impacted community members to resources
- b. Examples of how information can be provided:
 - i. Flyers
 - ii. Phone Calls
 - iii. Community Events
 - iv. Word of mouth
 - v. Social media
- c. Examples of healing resources:
 - i. Pop-up drop-in hours for behavioral health support (e.g., Hope SF Community Wellness Program)
 - ii. Social services, including housing, employment, and other city services
 - iii. Behavioral health providers by neighborhood, including culturally-specific support
 - iv. Crisis and emergency resources

Figure 5: Proposed Protocol for Trauma Response to Gun Violence (blue = existing, orange = proposed)



A. Notification/Communication Following Gun Violence Incident

SFPD notifies DPH’s Comprehensive Crisis Services about fatal and non-fatal shootings using the current notification protocol (see Figure 4). Within 24 hours of being notified by SFPD, Comprehensive Crisis Services will contact the Gun Violence Healing Response Outreach Coordinator(s) and provided available details about the shooting.

B. Outreach Coordination

The Gun Violence Healing Response Outreach Coordinator(s) will contact the most appropriate Community Provider(s) based on either the neighborhood where the incident took place and/or the cultural needs of the victims and impacted community. By coordinating with community providers, existing resources can be mobilized in the response so that the outreach is more likely to reflect the values, customs, beliefs, and languages of impacted communities. Appendix A provides a list of neighborhood and community-based organizations that the Outreach Coordinator may engage with.

All outreach to impacted communities, whether it is conducted by the Outreach Coordinator or Community Provider, will occur within 72-hours of the incident. Outreach workers will engage with residents within, at minimum, a 1-block radius of the shooting and will provide outreach to surrounding areas based on the specific circumstances of the incident. Outreach activities may also engage community members who do not live in the neighborhood where the shooting occurred, but who were directly impacted by the incident.

C. Linkages and Referrals to Social Services and Behavioral Health Resources

Community providers will support linkages and referrals to available social services and behavioral health resources. Information may be provided on pop-up drop-in hours for behavioral health support at neighborhood health clinics (e.g., Hope SF Community Wellness Program) and community centers. For individuals more acutely impacted and needing specialized support, specialty mental health services or crisis and emergency resources will be shared. Lastly, in recognition on the social drivers of, and impacts from violence, connections to social services, including housing, employment, and other city services will be provided when appropriate. Community providers will use an array of strategies to share information, including flyers, phone calls, community events, word of mouth, and social media.

IV. NEXT STEPS

The Protocol would likely be implemented in phases, with initial implementation as a pilot in high-impact areas, and then, contingent on funding, expanded citywide. Funding sources and fiscal mechanisms would need to be determined to support the Gun Violence Healing Response Outreach Coordinator(s), local grassroots Community Providers, and an evaluator to support metrics collection and reporting. Throughout both implementation phases, regular engagement meetings with Community Providers, the Coordinator, and City representatives would be held. Finally, long-term funding would need to be secured for programmatic sustainability.

Following submission of the violence response protocol to the Board of Supervisors, DPH and other City agencies and community partners will attend a public hearing that is to be held within 60-days of the protocol submission. This hearing is an opportunity to provide an overview of the current violence prevention efforts across the city, discuss the process for developing the Protocol, review the Protocol, and solicit feedback from members of the community.

Appendix A: Community Based Organizations by Neighborhood

Location	Community Resource Responsible for Outreach
Citywide	SVIP
Potrero Hill	CARE, Stand in Peace, Hope SF CWP, Champions, YCD, YMCA, neighborhood house, Shanti, Daniel Webster & Star King, Bridge, SF Housing Authority, Berger Management, Operation Genesis, New Door Ventures
Alice Griffith	Outreach Contacts: Hope SF Community Wellness Center, YMCA/CHAMPs, Hope SF Champions, Black Men Enhanced, John Stewart Housing
Hunters View/ Bayview	D10 Safety Plan, including Hope SF Community Wellness Center, YMCA/CHAMPs, Hope SF Champions, Bayview YMCA, Phoenix Project, Boys & Girls Club, Bayview Senior Services, CYC, John Stewart Housing, San Francisco Housing Development Center, YCD, Rafiki, APRI, 3rd Street Youth Center
Sunnydale	Hope SF Community Wellness Center, YMCA/CHAMPs, Hope SF Champions, Operation Genesis, SCDC, The Village, TURF, Boys & Girls Club, Mercy Housing
Filmore/Western Addition	Ella E. Hutch, African American Arts and Cultural Center, Success Center, Booker T. Washington, JCYC, Code Tenderloin, Green Streets, Ella Hill Hutch / Collective Impact, YMCA, FRH consulting, John Stewart Housing, Related Housing, Westside Community Mental Health Center
SOMA/Tenderloin	Code Tenderloin, United Playaz, Glide, Homeless Connect, Tenderloin Housing Clinic, Compass, Urban Alchemy, Westbay, Community Ambassadors, Southeast Asian Development Center
Mission	Coordinator: Mission Peace Collaborative Latino Taskforce, Instituto de la Familia de la Raza (IFR), Casa de las Madres, Dolores Street Community Services, Mission Peace Collaborative, Mission Neighborhood Resource Center, Mission Neighborhood Center, New Door Ventures, Community United Against Violence (CUAV), Mujeres Unidas, Cooperative Restraining Order Clinic (CROC)
Richmond	CYC, RAMS
Sunset	Sunset Youth Services, CYC
Castro	Lyrric, SFLGBT Center
Chinatown	CYC, Community Ambassadors, Chinatown Community Development Center (housing)
Portola/Excelsior	CYC, Portola Neighborhood Association, FCC, OMI, YMCA, Bernal Heights Neighborhood Center
Haight	Larkin Street Youth, Huckleberry Youth Programs, At the Crossroads, Homeless Youth Alliance

Appendix B: Community Based Organizations by Cultural Specialty

Location	Community Resource Responsible for Outreach
Black/African American	Black to the Future, Rafiki, SCDC, Ella Hill Hutch, Booker T. Washington,
Asian/Pacific Islander	CYC, Samoan Cultural Center, SCDC, RAMS
Latinx	Latino Taskforce, Instituto de la Familia de la Raza (IFR), Casa de las Madres, Mission Peace Collaborative, Roadmap to Peace Collaborative, HOMEY and CARECEN
Native American	American Indian Cultural District, California Consortium for Urban Indian Health
Russian/Jewish	SF Jewish Community Center, Jewish Family and Children Services, American Jewish Congress
Arab/Middle Eastern	Arab Cultural Community Center, Asian Women’s Center (Arab Women’s Services)
Children/Youth	CYC, Safe Start
Older Adults	CYC, Institute on Aging, Self-Help for the Elderly, Bayview Senior Center
Faith-Based	Metropolitan, Third Baptist, Providence, Cornerstone, many more
Males	EMT