The Root Causes Community Dialogue Project launched by the Building Community Resilience (BCR) collaborative, based at The George Washington University School of Public Health, is an outgrowth of BCR-led exploratory focus groups to understand community stressors and adversities. Initial focus groups conducted in Wards 7 and 8 highlighted neighborhood tensions with DC Metropolitan Police Department (MPD) officers and community and sexual violence as primary sources of stress in the community.

Root Causes’ fundamental approach uses the ‘Pair of ACEs’ lens – the understanding that adverse childhood experiences in the context of adverse community environments drive and perpetuate negative outcomes, including poor health and academic outcomes. Increased exposure to personal and community adversity is also associated with higher risk for involvement with the juvenile justice system.

The Root Causes project seeks to engage community members and members of law enforcement to participate in dialogue that will yield insight that informs strategies to create safer and more productive interactions between community and police. The Root Causes project team will develop community informed recommendations aimed at reducing community-based stressors, violence and encourage collaboration between those sworn to serve and community-based organizations and residents.

Initial Focus Group Background
- From June-October 2017, the BCR team conducted multiple focus groups and key informant interviews with providers and patients at Unity Health Care’s Minnesota Avenue Health Center. These conversations identified various hardships and non-medical needs in the community that directly impact the health and wellbeing of community residents.
- Significant hardships and sources of chronic community stressors identified include 1) community violence 2) strained relationships with Metropolitan Police and 3) sexual violence.
- Across interviews, residents discussed being witness to and/or being victim of violent crime without the necessary supports for coping and prevention. In addition, interactions with systems (i.e. MPD, Department of Youth Rehabilitation Services, etc.) were identified as compounding rather than alleviating, stress and trauma, resulting in increased levels of depression, anxiety and other mental health issues, particularly among young people. These stressors are associated with maladaptive behaviors that result or contribute to juvenile delinquency and dropout rates.

Root Causes Project Goals
- Identify the root causes of community adversity such as violence, incarceration (including youth involved in the juvenile justice system), and lack of access to resources that support health and wellness in Wards 7 & 8.
● Provide a detailed analysis that identifies realistic practice, program and policy recommendations to address the Pair of ACEs in Wards 7 & 8 with particular focus on violence and crime, reducing the number of justice-involved youth, and improving community-police relations.

Root Causes Project Methods
● BCR is conducting key informant interviews and focus groups – out of the public eye – with youth and other relevant community members to gain a deepened understanding of current community interactions and relationships with the DC Metropolitan Police Department, perceptions of the impact of community violence and efforts to reduce crime and violence, and youth interactions within the District’s juvenile justice system.
● BCR will conduct private key informant interviews and focus groups with MPD officers to understand their perspectives on interactions with the community, public safety, crime and violence.
● BCR will convene community residents, law enforcement, juvenile justice entities, schools and other key partners to identify potential innovative policy, practice and program change.
● BCR will provide a platform for dialogue to co-create solutions with community and major systems serving the residents of Wards 7 & 8.

Partners:
● Reaching Out to Others Together (ROOT)
● National Organization of Black Law Enforcement Executives (NOBLE)
● The Center for Health and Healthcare in Schools (CHHS)
● The Early Childhood Innovation Network (ECIN)
  - Unity Health Care
  - Children’s National, Children’s Health Center at THEARC
  - Medstar Georgetown University Hospital
● Ward 7 Health Alliance Network
● Ward 8 Health Council
● DC Office of Urban Resilience
● Metropolitan Police of District of Columbia

About Building Community Resilience
Building Community Resilience (BCR) is a national collaborative and networks that seeks to improve the health and wellbeing of children, families, and communities. Networks across five regions across the country are using the BCR process and tools to help their communities not only ‘bounce back’ in the face of adversity, but bounce forward. Over the past four years, BCR networks have helped build and strengthen the buffers that can prevent negative outcomes associated with adverse childhood experiences (ACEs), particularly in the context of adverse community environments (ACEs)—the ‘Pair of ACEs.’ Networks use the BCR process and tools, including the Coalition Building and Communications Guide, the Partner Build Grow Action Guide, and the Policy and Advocacy Guide to identify community strengths, to work in partnership with community not on community, and to develop a shared understanding of adversities and goals. Using the BCR process, networks aim to align large systems with one another—such as health care, city government, and education—and with community-based partners, including parenting support services and grassroots health advocacy. The regional networks also develop strategies – from implementing trauma-informed practices to data sharing and advocating for policy change – that bolster strengths, fill gaps, and ultimately build child, family, and community resilience. The home of the national BCR collaborative is the Sumner M. Redstone Global Center for Prevention and Wellness at the George Washington University’s Milken Institute School of Public Health. The national BCR team at GW provides technical assistance, including strategic planning, facilitation of cross-sector information sharing, support for data and measurement, development of policy strategies, convening, and communications support.