

**RESEARCH REPORT**  
**October 2025**

**Evaluation of Pennsylvania Community Violence  
Intervention Programs:**  
**VIP Evaluation Initial Findings and Recommendations**

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We would like to thank all VIP programs who have participated in different aspects of this study to share their insights and experiences about their PCCD-funded VIP programs and services in Pennsylvania. We would also like to thank Zoe Miner and Samantha Koch at PCCD for their support and leadership for the overall project.

# Overview

In 2021 and 2022, the Commonwealth of Pennsylvania, through the Pennsylvania Commission on Crime and Delinquency (PCCD), funded nearly 200 Violence Intervention and Prevention (VIP) programs and Coordinated Community Violence Intervention (CCVI) pilot strategies to support communities in efforts to intervene and prevent violence across the Commonwealth. In 2023, PCCD funded NORC at the University of Chicago and Temple University-Harrisburg to document successes, challenges, and lessons learned from PCCD's VIP grantees. As a part of this effort, NORC developed and distributed a survey for VIP grantees in 2023 to collect site-specific data on program operations and implementation. The goal of the survey was two-fold: (1) to facilitate cross-site understanding of key facets of VIP grant-funded programs; and (2) to facilitate the selection of VIP grant-funded programs into a process evaluation sample (n = 40) for deeper study. The process evaluation included visits to VIP programs, semi-structured interviews with organizations who received VIP funding, and focus groups with VIP program participants. In addition, NORC-Temple collected and analyzed performance measurement data submitted to PCCD by VIP grantees.

The focus of this report is to present findings from data collected for the 185 PCCD VIP grants awarded across 157 organizations between the years of 2021 and 2022. The findings presented rely on data collected through the PCCD VIP Evaluation Survey and the grantee performance measurement data shared by PCCD. Findings from the process evaluation will be reported in a separate, forthcoming report.

In the following pages, we first present information about the organizations and programs that received VIP funding. Next, we present information about the people served by the VIP programs. Lastly, we offer successes, barriers and challenges, and initial recommendations for consideration for future PCCD VIP funding.

## Background

Defined by PCCD, community violence is “intentional interpersonal violence (e.g., gun violence, group violence) in areas of Pennsylvania with high rates of violent crime based on Uniform Crime Report offense data or similar local crime statistics” (PCCD, 2022: 1).<sup>1</sup> Community violence disproportionately

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<sup>1</sup> Pennsylvania Commission on Crime and Delinquency. 2022. Violence Intervention & Prevention (VIP) Competitive Grants Project Summary and Analysis. Harrisburg, PA: PCCD. In 2024, PCCD updated their definition of community violence: “‘community violence’ is defined as intentional interpersonal violence (e.g., gun violence, group-related violence, domestic violence/intimate partner violence) in areas of Pennsylvania with high rates of firearm-related violent crime (using Uniform Crime Report offense data or similar local crime statistics) and/or firearm-related injury (using injury and hospitalization data or similar local data sources). Pennsylvania Commission on Crime and Delinquency. 2024. FY 2024-25 Violence Intervention and Prevention (VIP) Funding Announcement.

affects under-resourced urban neighborhoods which tend to be highly segregated and suffer the effects of sustained systemic racism, mass incarceration, and structural disinvestment. Although this type of violence is committed almost exclusively by a very small group of people, it affects the whole community. In 2020, when the VIP programs included in this report were preparing to apply for the first ever round of VIP funding, firearm-related deaths were the leading cause of deaths in Pennsylvania for people between the ages of 15 and 44. Specifically, 671 Pennsylvanians died as a result of firearm-related injuries in 2020 (WISQARS, 2023).<sup>2</sup>

Support for community violence programs has evolved significantly over the past decades, driven in large part by a growth in public health and community-based responses to reducing gun violence and other forms of interpersonal harm. Although many community violence programs initially operated with limited resources, national surges in gun violence and increased attention to systemic inequities increased attention among policymakers at the federal and state levels. Subsequent funding to support new and established strategies like street outreach, hospital-based interventions, and violence interruption programs increased through dedicated resources from the federal American Rescue Plan Act (ARPA) and the Bipartisan Safer Communities Act (BSCA), as well as state-level violence prevention funds, such as the PCCD VIP funding, which reflected a shift toward treating violence as a preventable public health issue rather than solely a criminal justice concern.

While public funding for community violence programs has increased, comprehensive and rigorous research to build knowledge on violence prevention programs and their impact continues to be limited. Primary reasons for the lack of research include low levels of federal, state, and local funding for applied evaluation research, challenges in developing collaborations between researchers and community agencies, and challenges with collecting data to reliably measure program impacts. Thus, the importance of PCCD's funding to support a statewide evaluation of funded VIP programs cannot be overstated.

## Findings

In the following sections we present initial findings on the VIP organizations and programs funded by PCCD in 2021 and 2022. In the first section we present findings from the PCCD VIP Evaluation Survey. This section describes the VIP organizations, including the types of organizations that were funded, their area of focus and years in existence, as well as specific information about the VIP-funded services, including the types of direct services that were provided to people throughout Pennsylvania. In the second section we present findings from self-reported performance measurement data submitted to PCCD by VIP programs as a part of their grant reporting. This section describes the characteristics of people served by the VIP programs.

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<sup>2</sup> CDC Web-based Injury Statistics Query and Reporting System 2023

## Survey Data

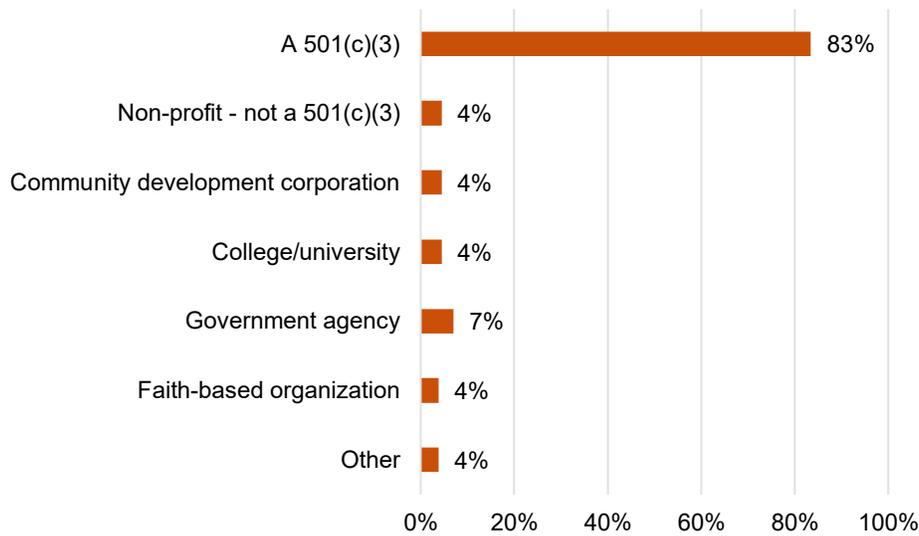
The analysis of the PCCD VIP Evaluation Survey included data collected from 185 PCCD VIP grants awarded across 157 organizations. Survey data accounts for 100% of VIP grant-funded programs, with approximately 74% of organizations completing the survey themselves, and NORC entering survey responses for the remaining 26% of organizations based on grant application data. Organizations were allowed to skip questions they did not know the answer to or want to respond to, which accounts for some missing data across survey questions. More detailed information about the survey administration methods can be found in Appendix A and the survey instrument can be found in Appendix B.

## VIP Organizations

Figure 1 shows that as of early 2024, the majority of organizations implementing PCCD VIP grant-funded programs are nonprofit entities. Specifically, 83% of grantees identified as 501(c)(3) organizations, underscoring the central role of the nonprofit sector in delivering community-based violence intervention and prevention services. Government agencies made up 7% of the grantee pool, while other organizational types, such as non-501(c)(3) nonprofits,<sup>3</sup> community development corporations, colleges and universities, and faith-based organizations, each accounted for approximately 4% or less. This distribution reflects an ecosystem of service providers that is heavily weighted toward traditional nonprofit structures. The presence of a small number of alternative organizational types suggests that while the VIP funding stream is accessible to a range of entities, the infrastructure and administrative capacity required to apply for and manage these grants may favor more established nonprofit organizations.

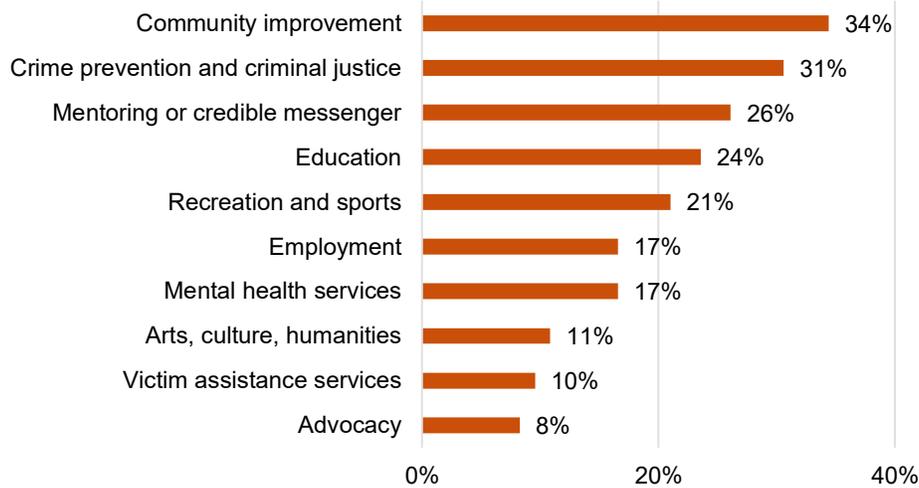
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<sup>3</sup> Due to VIP eligibility requirements, these organizations had fiscal sponsors.

**Figure 1. Grantee Organization Type**

Note: N=157. Percentages do not add up to 100% because multiple organization types may be applicable.

The survey also asked grantee organizations about their main areas of focus. Figure 2 shows the top ten most common focus areas for VIP grantee organizations, which reflects the multifaceted nature of violence prevention and intervention work, as well as the wide range of VIP eligible activities allowed by statute. The most frequently cited focus area was community improvement (34%), followed closely by crime prevention and criminal justice services (31%). These priorities suggest that many grantees are working to address both the root causes and immediate consequences of violence in their communities. Mentoring and credible messenger outreach and support (26%), education (24%), and recreation and after-school activities (21%), were also common, highlighting the importance of youth engagement in violence reduction strategies. Other notable areas included employment services (17%), mental health services (17%), arts and culture (11%), victim assistance services (10%), and advocacy (8%).

**Figure 2. Grantee Organization Focus**

Note: N=157. Percentages do not add up to 100% because multiple organization focus categories may be applicable. Only the top ten responses are shown.

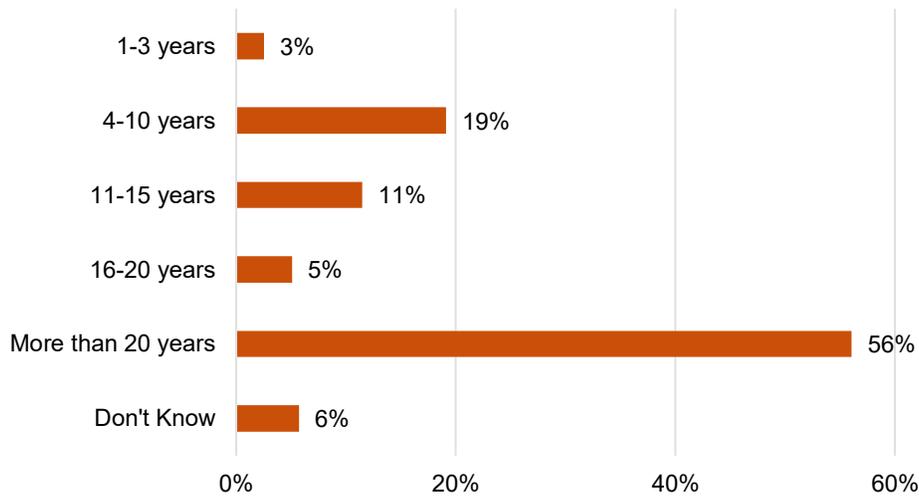
An additional survey question asked grantees to characterize their organization along a set of nearly 20 categories, including advocacy organization, job training program, local government agency, healthcare provider, or religious organization. Figure 3 shows the top three most common responses. The most frequently cited response was advocacy organization (27%), followed by job training or employment program (15%), and victim service provider (12%). Another common response was city or county agency (10%). Fewer than five percent of organizations described themselves as universities, criminal justice agencies, healthcare providers, philanthropic organizations, housing providers, K-12 schools, religious organizations, or substance use treatment providers.

**Figure 3. Top 3 Responses to the question “Which of the following best describes your organization?”**

	Advocacy organization	27%
	Job training or employment program	15%
	Victim service provider	12%

Note: N=157. Multiple organization types may be applicable.

Figure 4 shows that over half of grantee organizations (56%) have been in operation for more than 20 years, suggesting a strong foundation of experience and community trust. An additional 5% have operated for 16-20 years, 11% have operated for 11-15 years, 19% have operated for 4-10 years, and 3% for 1-3 years. This distribution shows that while the VIP funding stream has primarily supported established organizations, there is also some representation from newer entities. Furthermore, a significant share of VIP grantees indicated in their applications that they had not previously received a state grant, suggesting that while their organizational tenures may be longer, their experience navigating state funding processes varied.

**Figure 4. Grantee Organization Years in Existence**

Note: N=157.

## VIP Services

In this section, we describe the services provided by the 185 programs funded by PCCD VIP grants between FY 2021 and 2022 for which we have survey data. In order to describe the programs within similar categories, we divided the programs into two broad categories: 1) programs that focused on intervention work, and 2) programs that focused on prevention work. Intervention and prevention programs both aim to reduce violence, but they focus on different points in the cycle of violence, as intervention programs focus on people already involved or specifically at-risk of violence or violent victimization. In the context of violence interruption, prevention programs generally serve anyone who meets broad eligibility criteria (often based on age) within a designated community, while interventions have specific eligibility rules to target services for those at higher risk.

In general, prevention programs are primarily proactive and focus on risk factors for violence, including trauma, social and emotional health, lack of opportunity, poverty, etc. In response, prevention programs may include youth development, education, employment services, and community engagement support and services. In contrast, intervention programs respond to violence that is already occurring or imminent. Intervention programs may include outreach workers, hospital-based teams, and case management services to support referrals for counseling, employment, and housing support.

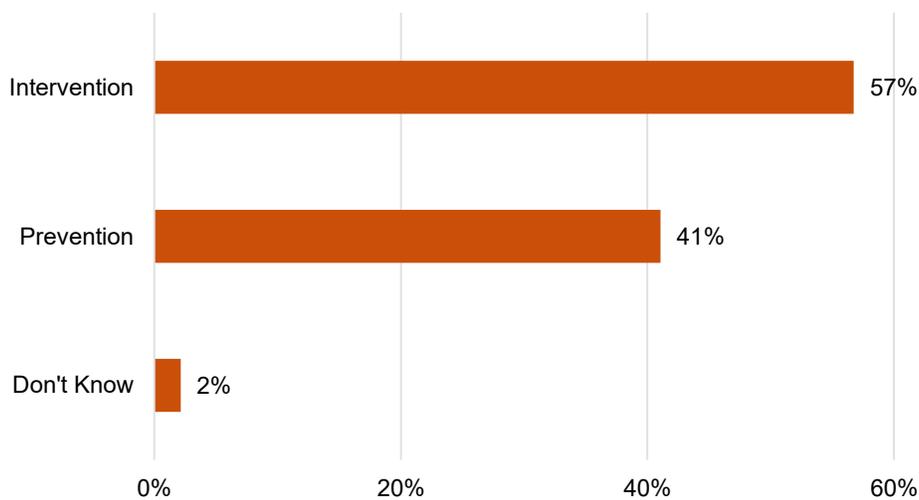
For the purposes of analysis, any VIP grants with services that had eligibility requirements targeting specific risk factors, individuals with criminal justice system involvement, exclusive referral sources, substance abuse, or military service were defined as “intervention” programs. Those who did not have any of these eligibility requirements were coded as “prevention” programs. The logic of this is that programs that require participants to meet the aforementioned eligibility criteria are effectively intervening with individuals because they are targeting based on specific, individual-level risk factors.

Programs that do not have these eligibility criteria are essentially seeking to prevent their participants from developing specific risk factors (e.g., prevent involvement with the criminal justice system, substance use, negative behaviors that result in referrals, etc.).

## Range of Services Provided

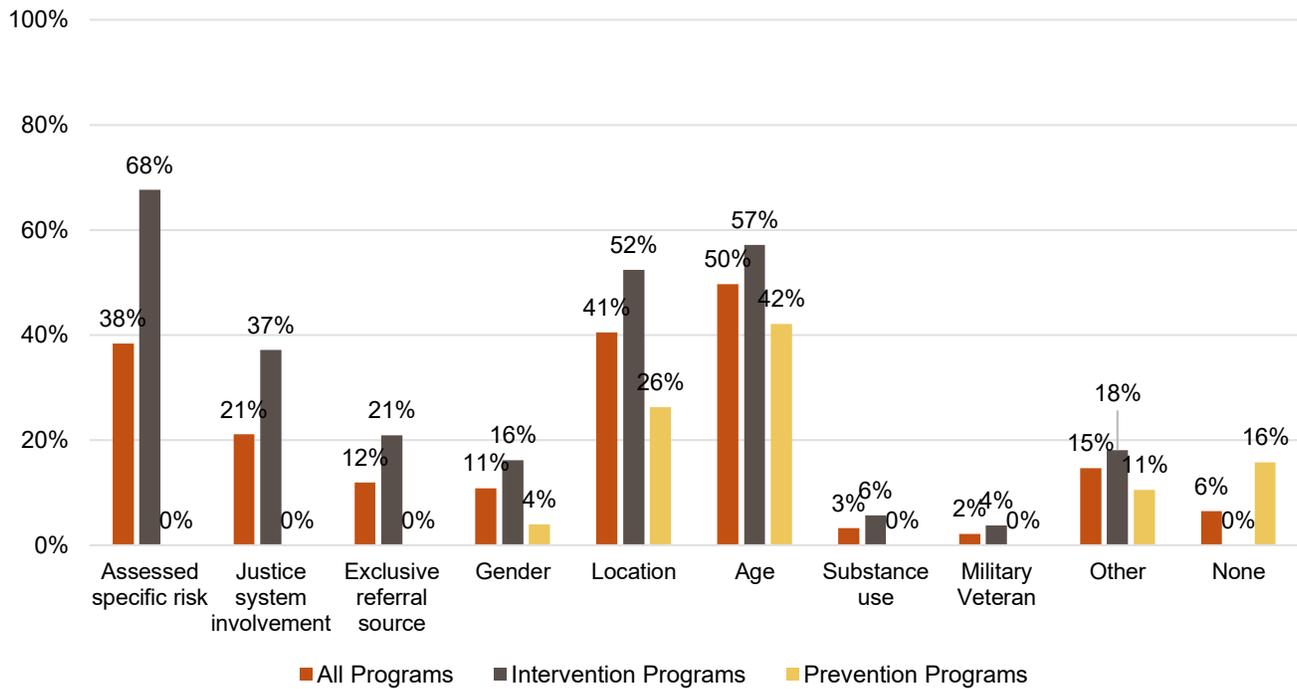
Using the intervention and prevention definitions, Figure 5 shows that 57% of all VIP-funded programs were classified as intervention-focused, while 41% were prevention-focused. Due to a small number of “Don’t Know” responses to program eligibility criteria questions in the survey, 2% of programs could not be classified.

**Figure 5. Grant Program Service Type**



Note: N=185.

**Figure 6. PCCD VIP Grant-Funded Program Eligibility Requirements**



Note: N All=185; N Intervention=105; N Prevention=76.

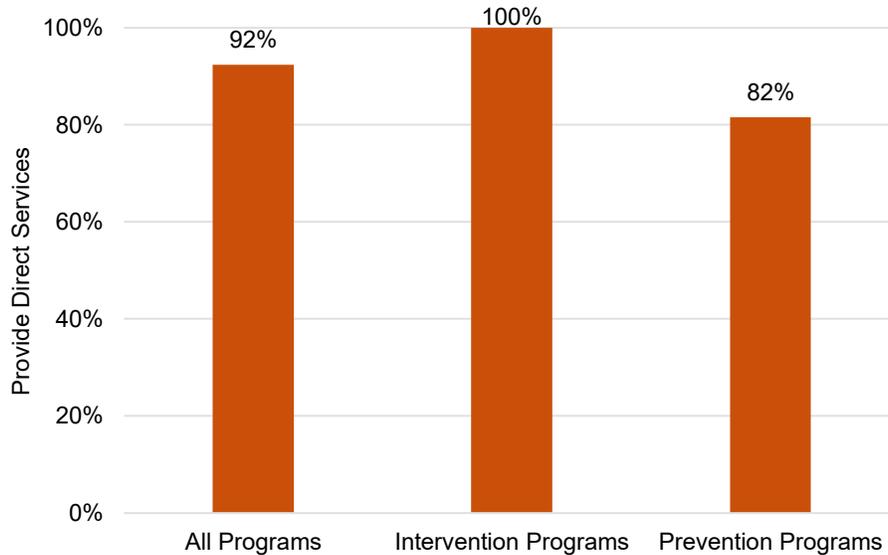
Figure 6 shows the eligibility requirements for PCCD VIP grant-funded services and programming, for all VIP-funded programs. Among all programs, half had age eligibility requirements, 41% had eligibility requirements by location of residence, and 11% had gender-based eligibility requirements. Other grants funded services or programming that are more specifically targeted toward high-risk or vulnerable populations: 38% of grants funded services with assessed specific risk requirements (e.g., individuals impacted by gun violence, assault-injured youth, domestic violence victims, etc.), 21% had eligibility requirements that included criminal justice system involvement (e.g., currently on probation, incarcerated within the past year, etc.), 12% accepted participants coming from specific referral sources (e.g., PA Department of Corrections), 3% had substance use or addiction-related eligibility requirements, and 2% had veteran or military service requirements.

For example, 16% of intervention programs employ gender eligibility requirements, compared to 4% of prevention programs. Additionally, 52% of intervention programs employ location eligibility requirements, compared to 26% of prevention programs; and 57% of intervention programs employ age requirements, compared to 42% of prevention programs.

Nearly all VIP-funded programs provide direct services to individuals through their grants. As shown in Figure 7, 92% of all programs reported delivering direct services, with a notable distinction between intervention and prevention programs. All intervention-focused programs (100%) offer direct services, reflecting their targeted approach to engaging individuals at high risk of involvement in violence. In contrast, 82% of prevention-focused programs provide direct services, suggesting that some prevention

efforts may operate at a broader community or systems level, such as public education campaigns or capacity-building initiatives, rather than through individual service delivery.

**Figure 7. PCCD VIP Grant-Funded Programs Providing Direct Services to People**



Note: N All=185; N Intervention=105; N Prevention=76.

Table 1 highlights the most common service areas among VIP-funded programs, distinguishing between intervention and prevention efforts. Across all programs, the top focus areas include mentoring, leadership, and youth development (36%), jobs, skills, and academics (33%), and recreation (23%). These priorities reflect a strong emphasis on youth engagement and workforce development.

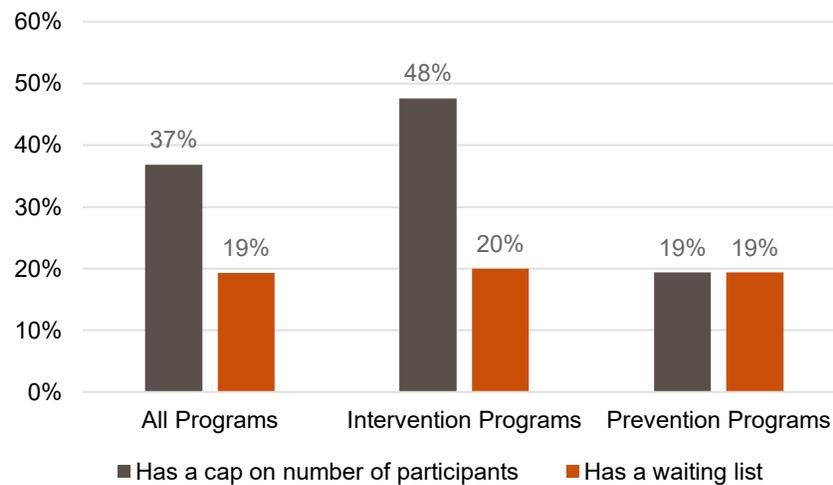
When broken down by program type, intervention programs are more likely to offer intensive, individualized services such as case management (30%), mental health and behavioral therapy (28%), and violence interruption (20%), reflecting a focus on addressing the complex needs of individuals already at high risk of violence involvement. In contrast, prevention programs more frequently emphasize broader developmental supports, such as anti-violence education (28%), recreation (25%), and community strengthening (20%).

**Table 1. Top Focus Areas for PCCD VIP Grant-Funded Programs**

All Programs		Intervention Programs		Prevention Programs	
Focus Area	%	Focus Area	%	Focus Area	%
Mentoring, Leadership, & Youth Development	36%	Mentoring, Leadership, & Youth Development	38%	Jobs, Skills, & Academics	31%
Jobs, Skills, & Academics	33%	Jobs, Skills, & Academics	33%	Mentoring, Leadership, & Youth Development	30%
Recreation	23%	Case management - general	30%	Anti-violence education	28%
Anti-violence education	22%	Mental Health and Behavioral Therapy	28%	Recreation	25%
Case management - general	21%	Recreation	20%	Community Strengthening	20%
Mental Health and Behavioral Therapy	20%	Violence Interruption	20%	Mental Health and Behavioral Therapy	11%
Community Strengthening	17%	Anti-violence education	18%	Case management - general	11%
Violence Interruption	16%	Community Strengthening	16%	Violence Interruption	11%
Alternative Justice	8%	Alternative Justice	10%	Anti-Poverty & Family Strengthening	7%
Anti-Poverty & Family Strengthening	8%	Anti-Poverty & Family Strengthening	8%	Alternative Justice	5%
Legal Services	3%	Legal Services	5%	Legal Services	0%

Note: N All=185; N Intervention=105; N Prevention=76.

Figure 8 sheds light on the capacity constraints faced by VIP-funded programs, showing the share of programs that have a cap on the number of participants they can serve and whether there is a waiting list to access their services. Over one-third of all programs (37%) reported having a cap on participant numbers, with intervention programs (48%) more likely to report such limits than prevention programs (19%). This disparity suggests intervention services could be more resource-intensive, often requiring individualized support, case management, and specialized staff. In contrast, prevention programs—many of which operate in group or community settings—may be better positioned to scale without strict participant limits. Interestingly, the presence of waiting lists was relatively consistent across program types, with 19–20% of both intervention and prevention programs reporting that they currently have individuals waiting to access VIP-funded services.

**Figure 8. Service Capacity of PCCD VIP Grant-Funded Programs**

Note: N All=171; N Intervention=105; N Prevention=62.

## Performance Data

### Characteristics of People Served

This section presents information on the people served by the PCCD VIP programs. The findings presented rely on self-reported performance measurement data submitted to PCCD by VIP programs on a quarterly basis as a part of their grant reporting. Note that analysis of performance measurement data submitted by grantees to PCCD indicates substantial variation in how grantees report on their work. Specifically, programs do not report on all data points and define the number of people their program has “reached/served/engaged” inconsistently.

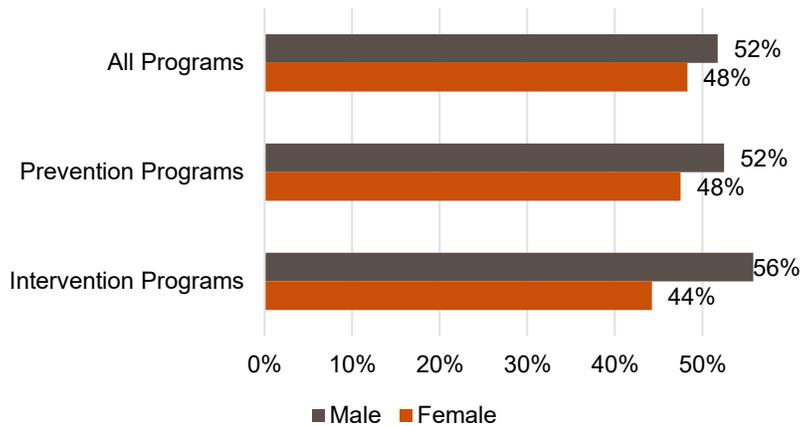
VIP programs reported on the total number of people they served over the course of their grant but provided demographic information for fewer individuals than the total they reported serving. Across all VIP programs, approximately 1.5 million Pennsylvanians were reportedly served or engaged.<sup>4</sup> Programs reported gender information for only 463,183 people (31% of the total number of individuals served), age for 444,164 people (30%), and Race/Ethnicity information for 401,067 people (27%). This caveat is important when considering the data reported in this section: these breakdowns are drawn from the limited reporting on demographics provided by VIP programs.

As shown in Figure 9, the gender distribution of participants across VIP programs is relatively balanced across all programs, with males comprising 52% and females 48% of the total population for whom

<sup>4</sup> Programs defined the number of people their program has “reached/served/engaged” inconsistently, with some extrapolating their impact to an entire zip code or county population. Thus, while we report on the number of people that VIP programs indicate that they served or engaged, this number is likely much higher than the number of people for which direct service were provided.

gender data was reported. Intervention programs had a slightly higher proportion of male participants (56%) compared to prevention programs (52%), which may reflect the targeted nature of intervention services toward individuals at higher risk of violence involvement, who are more likely to be male.

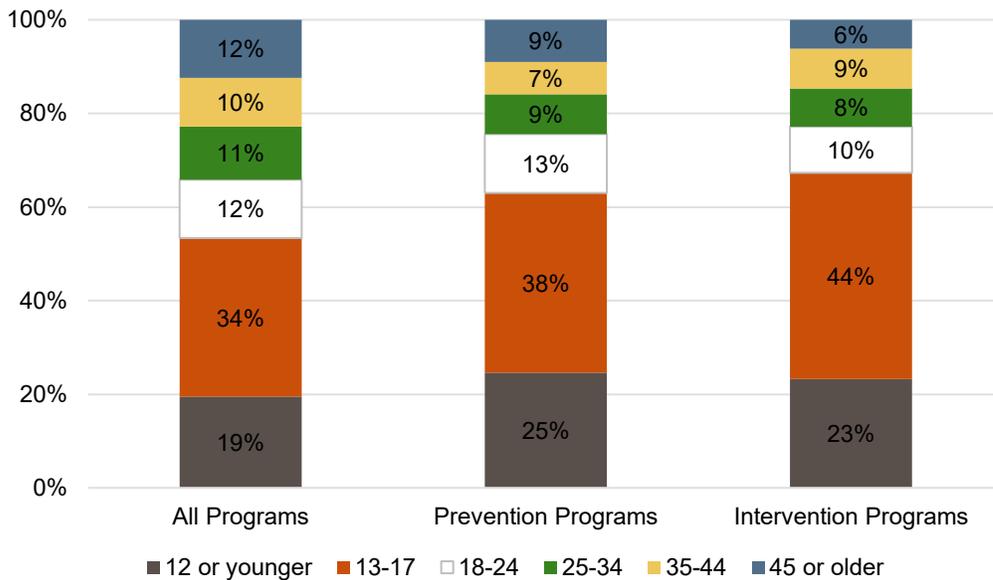
**Figure 9. Gender of Program Participants, by Program Type**



Note: All Programs N=463,183; Prevention Programs N=144,130; Intervention Programs N=197,608. Programs that could not be classified as either prevention or intervention account for 121,445 participants.

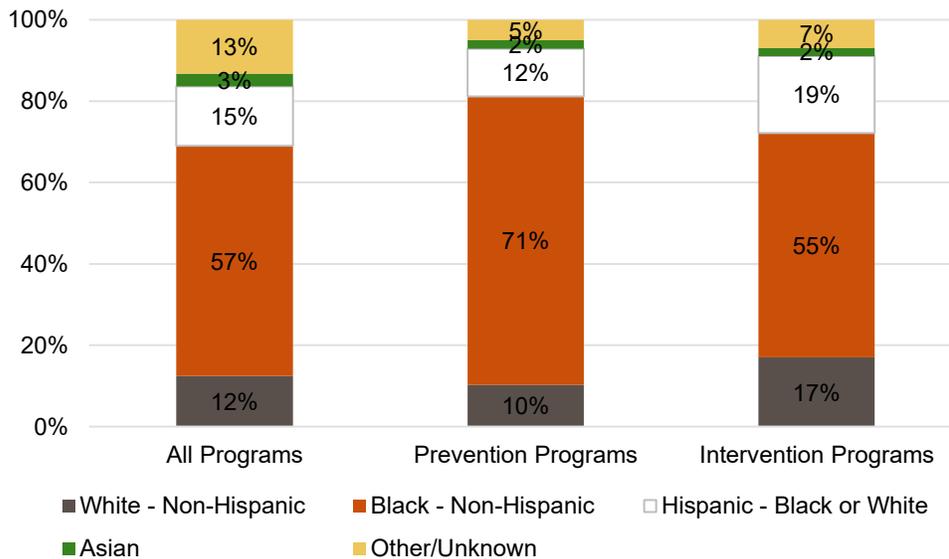
Figure 10 illustrates that VIP programs primarily serve youth and young adults. Across all programs, over half (53%) of participants for whom age data were provided were under the age of 18, with the largest age group being 13–17 years old (34%). While both intervention and prevention programs had a high concentration of younger participants, the most obvious difference between these two program types is that intervention programs have a somewhat higher share of participants in the 13–17-year-old age bracket (44%) compared to prevention programs (38%).

**Figure 10. Age of Program Participants, by Program Type**



Note: All Programs N=444,164; Prevention Programs N=144,812; Intervention Programs N=185,249. Programs that could not be classified as either prevention or intervention account for 114,103 participants.

Figure 11 shows that the majority of participants across all VIP-funded programs for whom race/ethnicity data were provided identified as Black or African American (57%), followed by Hispanic participants (15%) and White non-Hispanic participants (12%). Prevention programs had the highest proportion of Black participants (71%), while intervention programs had a more racially diverse participant base, including higher shares of Hispanic (19%) and White (17%) individuals.

**Figure 11. Race of Program Participants, by Program Type**

Note: All Programs N=401,067; Prevention Programs N=139,408; Intervention Programs N=185,249. Programs that could not be classified as either prevention or intervention account for 112,243 participants.

## Successes

Findings from analysis of the survey and performance data point to some key successes for community programs across the state and for the field at large.

- The reach of PCCD funding.** PCCD VIP-funded programs reported reaching a total of 1,495,517 people, with a median number of 787 people touched per program. Intervention programs reported reaching over 270,000 people; prevention programs reported reaching over 1.1 million Pennsylvanians.<sup>5</sup> Generally speaking, VIP programs that provided gender data on participants served women and men at about the same rate (48% and 52%, respectively). About half of the people served were under the age of 18, and the other half over the age of 18. A little over half of the people served (57%) were Black or African American.
- Diversity in programs and services.** Based on the data presented in this report, PCCD funding has successfully supported a diversity of programs and services across the state. As reported in Table 1, services range from youth development and educational programs to community strengthening and violence interruption programs.
- Giving new programs a chance.** In addition to funding a diversity of organizations, PCCD funding has also provided younger organizations with an opportunity to develop and build community violence programs. While approximately half (56%) of the organizations have been in existence for more than 20 years, 22% of organizations have been in existence for 10 years

<sup>5</sup> Based on self-report data. See footnote 4 about limitations to data.

or less. Also, many of the older VIP grantees indicated in their applications that they had not previously received a state grant, suggesting that while their organizational tenures may be longer, their experience navigating state funding processes varied.

## Barriers and Challenges

Findings from the survey and performance data also highlight barriers and challenges experienced both by VIP grantees and in the reporting, analysis, and understanding of the work that VIP grantees are conducting.

- **Staffing.** When asked in the VIP survey about primary barriers to serving more people through the PCCD-funded VIP service or program, staffing issues were cited as a primary concern for a large proportion of organizations. Specifically, 37% of VIP programs indicated that they did not have enough staff to support their needs, and 25% of programs indicated that they experienced difficulties finding the right kind of staff or the staff with the appropriate skills to lead the services they were providing.
- **Funding.** The second most cited barrier cited by VIP programs to serving more people was funding. Thirty-five percent of VIP programs indicated that they had too little funding to support expanding community violence work. Most VIP programs rely on a diversity of funding including local and federal funding, as well as foundation and grassroots fundraising. Yet, due to the cyclical nature of grants and contracts, fundraising is always necessary to sustain community programs. Sixty-nine percent of VIP programs indicated that they planned to obtain additional funding to sustain their PCCD-funded VIP programs.
- **Reporting.** Analysis of performance measurement data submitted by grantees to PCCD indicates substantial variation in how grantees report on their work. For example, some programs report only the PCCD-required performance measures, while other programs choose to develop individualized performance measures to submit, many of which are poorly designed and do not increase understanding of program impact. Programs routinely modify in eGrants the performance data they submit in previous quarters, making it difficult to assess program reach at any given moment. Programs also define the number of people their program has “reached/served/engaged” inconsistently, with some extrapolating their impact to an entire zip code or county population. Such variation in the way in which data is submitted decreases the reliability of data and the ability to use the data to understand the implementation of programs, services provided, and outcomes.

## Recommendations

Based on the findings in this report, we offer the following recommendations to support future PCCD VIP programs and funding.

- **Offer in-person grantee meetings to facilitate networking and capacity building.** Offering occasions for community violence programs across the state to come together in-person provides opportunities for grantees to learn about the work of others, network, share experiences, challenges and adaptations (such as around staffing and funding), and innovations. In-person opportunities also provide forums for training, knowledge building, and morale building.
- **Review performance measures and program reporting support.** Review grantee reporting requirements to ensure that the data requested from grantees is meaningful, useful, and clear to grantees. Offer program reporting support, such as webinars, virtual and in-person training, and office hours, to ensure that grantees have access to support staff to enable reliable performance measurement data submissions.
- **Require more comprehensive performance data reporting.** Data is key to the success of community-based violence interventions (CVIs) — this is true both for programs that operate independently, which need to track who they serve and how, [and for CVI programs working within coalitions]. Across the U.S., CVIs are increasingly moving toward collaborative systems in which individual service providers bring their expertise to specific service areas and together form holistic interventions. Data sits at the center of these coalitions, ensuring that services are timely and efficient, that agencies avoid unhelpful overlap in clients and communities, and that they can coordinate effective handoffs to meet a variety of needs.

To ensure that performance measurement reflects program goals and fosters continuous improvement, PCCD could develop a [standardized, comprehensive] performance data management system. This system should include measures that record treatment type, quality, and dosage — indicators shown in research to be directly linked to better participant outcomes. PCCD could also periodically review and refine reporting requirements to align with the underlying theory of change for VIP programs.

Performance measures should capture not only outputs but also progress toward intended outcomes, particularly those related to relationship-building, behavior change, and community engagement. Clear and relevant data expectations — paired with accessible support such as webinars, training sessions, and office hours — can help grantees build internal capacity for reliable and useful reporting. A collaborative approach to performance measurement will strengthen both accountability and learning across the field.

- **Define Intervention and Prevention Services.** The field of CVI is new and evolving, and there is not yet consensus on key definitions—such as what constitutes a CVI, what its primary outcomes are, or how those outcomes should be measured. We define prevention as any service that is universally available, or universally available within a broad demographic category. Intervention services, by contrast, are available only to a defined population whose eligibility is based on the presence of one or more risk factors.

For example, a program available to all secondary school students would be a prevention program, while a program limited to youth with high Adverse Childhood Experience (ACE) scores or involvement with child and family services would be an intervention program.

Prevention services focus on improving general human capital and well-being, whereas intervention services are designed to build specific capacities, address particular risks, or remove barriers to thriving. Because these approaches target different populations and needs, the services provided should also differ accordingly.

There is a large body of evidence identifying what works in universal prevention. Similarly, when eligibility is based on specific risk factors, evidence-based interventions exist to address those conditions and improve outcomes. The research literature clearly distinguishes between evidence-based definitions of prevention and intervention and the corresponding programming required to meet the unique needs of each population.

- **Consider how funding should be distributed across VIP programs offering prevention versus intervention services.** Table 1 outlines the services provided by programs focused on intervention and those focused on prevention. It is notable that (1) the services offered are often similar, and (2) many programs that specify eligibility criteria based on participant risk—thus expected to deliver targeted interventions—report providing a broad range of services. The research literature is clear that successful intervention programs narrowly tailor programming to address the specific needs of their target populations. Here, it appears that a wide array of prevention services is being applied to a smaller, higher-risk eligibility pool—a strategy that is unlikely to be as effective as targeted interventions designed for specific risk factors.

By clearly defining intervention and prevention within the VIP portfolio, PCCD could guide programs toward more evidence-based practice. One key area for further investigation is how funding is currently distributed between CVIs focused on prevention and those focused on intervention. Pennsylvania could play a central role in studying how best to allocate resources to reduce violence by developing distinct performance measures for prevention and intervention approaches. Doing so would enable a clearer analysis of the relative success of each model and support more strategic refinement of funding in the future—aligning investment decisions with best practices identified through the study of these performance measures.

- **Sustain and strategically expand VIP funding.** PCCD funding for community violence programs has been a critical factor in the start-up and sustainability for programs across Pennsylvania. The funding has provided services and support to at-risk youth, system-involved individuals, family members, and low-income neighborhoods. Communities, organizations, and people will only continue to benefit from VIP programs if they continue to receive the support that Pennsylvania has provided over the past years. Continued investment should be considered essential to maintaining and building on recent progress in public safety across Pennsylvania. Findings from the survey data suggest that VIP funding has been a foundational catalyst for both the launch and ongoing operation of effective VIP initiatives, many of which serve high-risk populations with limited access to traditional support systems. Notably, PCCD funding has supported small and grassroots organizations—those often closest to the communities most impacted by violence and who are more likely to lack the experience, dedicated infrastructure, and overhead support to allow them to quickly onboard and meet administrative and reporting requirements; new programs which may need time to become established and to implement effectively; as well as older programs that may have difficulty

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separating their VIP activities from ongoing practices funded by other sources.

# Appendix A – Survey Methods

## Study Goals and Methods

### Survey Description

The goal of the PCCD VIP Evaluation Survey was two-fold: (1) to facilitate cross-site understanding of key facets of PCCD VIP grant-funded programs; and (2) to facilitate the selection of VIP grant-funded programs into the process evaluation sample (n = 40). The survey was created by NORC-Temple through an iterative process that identified the key information necessary to understand each grantee's capacity, leadership, resources, service provision, monitoring efforts, and successes/challenges. Specifically, the 26-question survey gathered details on:

- organizational information (e.g., organization type, primary focus, years in existence),
- the number of VIP grants the organization has received since 2021,
- specific questions for each grant received (e.g., geographic area served, VIP program or service's primary focus, and eligibility requirements),
- monitoring and evaluation practices,
- staffing,
- parameters for success, and
- program sustainability.

The survey was programmed into Qualtrics, a cloud-based survey software platform, and pre-tested by three members of the NORC team to ensure clarity in instructions, skip patterns, and data entry functionality. The survey was also reviewed by Temple and PCCD prior to launch. Depending on the number of grants received, the survey took between 15-20 minutes to complete. The final survey instrument is found in Appendix A.

### Sample Selection and Outreach

NORC compiled the survey sample using information provided by PCCD, which included VIP-grant recipient organization names, contact information (i.e., names, phone numbers, and emails), grant IDs, and detailed information regarding grant scope. Duplicate points of contact were removed to ensure each organization was sent only one invitation to participate. The final sample included 168 points of contact that accounted for 189 VIP grants across 158 organizations. NORC began outreach to points of contact at each VIP grant-funded program the first week of December 2023 via email invitations which included a personalized link to the Qualtrics survey. The initial invitation email also included a link to a one-page project summary created by NORC-Temple and a press briefing from PCCD to provide more information on the project's background. The email invitations also informed recipients that the survey

could be completed by anyone at the organization who was knowledgeable about the VIP grant-funded activities.

After the initial email invitation, NORC sent out a weekly reminder, requesting that grantees complete the survey by January 16, 2024. A project email and phone number were created to field any questions or concerns among those completing the survey. Due to lower than anticipated response rates, a series of steps were taken to increase responsiveness: (1) PCCD again emailed all of the VIP sites requesting they complete the survey; (2) the data collection period was extended to accommodate respondents who were out of office due to the winter holidays or occupied with the concurrent PCCD 2024 VIP grant application deadline; and (3) NORC staff conducted phone outreach to follow up with sites who had not responded by the first week of January. Phone outreach was supplemental to email reminders and continued until the second week of February. The response rate prior to phone outreach was 42%. After three rounds of phone outreach and six email reminders, the response rate increased to 74%. Data collection ended February 15, 2024. See Table 1 for more information regarding outreach and response rates.

**Table 1. Completion Status per Week**

Week Ending Date	Web				Activities
	Weekly		Cumulative		
	Total	%	Total	%	
12/9/2023	11	7%	11	7%	Web invitation letter sent on 12/4/23
12/16/2023	20	12%	31	18%	Reminder 1 sent on 12/11/23
12/23/2023	21	12%	52	31%	Reminder 2 sent on 12/18/23
12/30/2023	6	4%	58	35%	Reminder 3 sent on 12/26/23
1/6/2024	12	7%	70	42%	Reminder 4 sent on 1/2/24 (Phone Outreach started 1/4/24)
1/13/2024	12	7%	82	49%	Phone Outreach continued
1/20/2024	18	11%	100	60%	Phone Outreach continued (Reminder 5 sent on 1/19/24)
1/27/2024	14	8%	114	68%	Phone Outreach continued
2/3/2024	2	1%	116	69%	Phone Outreach continued
2/10/2024	3	1%	119	71%	Phone Outreach ended (Last chance email sent out)
2/17/2024	4	0%	123	74%	Data collection ended

To ensure that all VIP grants were accounted for in the survey data, a team of NORC staff members reviewed grant application data for the non-respondent organizations and entered it into the survey. This additional step of data coding was completed by the end of February.

## Data

As described above, the survey data presented in this report accounts for 100% of PCCD VIP grant-funded programs, with approximately 74% of organizations completing the survey themselves, and NORC entering in survey responses for the remaining 26% of organizations based on grant application data. Among the NORC-completed survey responses, only one organization refused to participate in the survey, and the rest were non-responders. There were some questions that could not be filled out by the NORC project team; therefore, some variables contain missing or “don’t know” responses. One organization was removed during the data cleaning stage because it was determined that the grant was not awarded or withdrawn, leaving a final dataset of 157 VIP grantees.

Organizations reported a total of 202 grants funded since 2021. These were validated by first matching each grant reported in the survey to PCCD grant records using the grant ID, then asking for clarification from PCCD for any unmatched grants. Based on PCCD feedback, unmatched grants were either dropped (generally because they corresponded to a grant that came from a different funding stream outside the scope of the present analysis) or recoded to an ID that matched PCCD records (because the organization had entered an incorrect ID in the survey). Following this validation process, the final survey data included 185 grants matched to PCCD records. NORC followed up with PCCD to review the grants not accounted for in the original list of grants in PCCD’s records and determined that these grants had all been closed out and were, in fact, not eligible for inclusion in the survey and analysis.

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Thus, the survey data accounts for 185 of the 192 grants funded by PCCD between fiscal year (FY) 2021 and FY 2022 under the VIP funding stream.

# Appendix B – Survey Instrument

## Welcome!

NORC at the University of Chicago and Temple University are conducting a study of the VIP programs that are funded by PCCD. As a part of this study, which is also funded by PCCD, we are distributing this survey to all grantees to learn about the organizations who received funding from PCCD and the activities, services, and programs that are supported by PCCD VIP grants.

The survey should take about 20 minutes to complete and anyone who is knowledgeable about your PCCD-funding can complete the survey. If you cannot complete the survey all in one sitting, you can return to the survey at a later time.

The information that you share with us through this survey will be used to create a detailed description of PCCD grantees and the type of work that grantees are engaging in, which we will share back with you. We will also be relying on information from this survey to select roughly forty organizations to partner with on a process evaluation study to better understand the implementation of PCCD-funded VIP services and programs, as well as the challenges, successes, perceived outcomes, and lessons learned. Findings from the process evaluation study will also be shared with all PCCD grantees. We worked hard to create a short survey that will produce important descriptive results for Pennsylvania stakeholders interested in and advocating for violence reduction.

If you have any questions about this study or about the survey, or if you prefer to complete the survey over the phone, please reach out to us at [VIPEval@norc.org](mailto:VIPEval@norc.org).

Thank you in advance for your participation and for the work that you do.

## SURVEY INSTRUCTIONS:

Use the forward and back arrow buttons to navigate through the questions in the survey. Please do not use your browser buttons. To exit the survey at any time, simply close your internet browser window. Any data you have entered before closing will be saved.

Again, we greatly appreciate your time and participation. Let's get started!  
Press continue to proceed with the survey.

- Continue

## YOUR ORGANIZATION

To begin with, we have some questions about your organization.

1. Is your organization... *Mark all that apply.*

- A 501(c)(3)
- A non-profit but not a 501(c)(3)
- A community development corporation
- A college/university
- A government agency
- A faith-based organization
- A for-profit private firm
- Something else, *please specify* \_\_\_\_\_

- I don't know
2. Which of the following best describes your organization? *Mark all that apply.*
- Advocacy organization
  - City or county agency
  - College/university
  - Correctional facility
  - Criminal justice agency
  - Day reporting facility
  - Federal agency
  - Grant-making foundation/philanthropic organization
  - Group home
  - Halfway house
  - Hospital or healthcare provider
  - Housing provider
  - Independent living facility
  - Job training/employment program
  - K-12 school
  - Religious organization
  - State agency
  - Substance abuse treatment provider
  - Victim service provider
  - Something else, *please specify* \_\_\_\_\_
  - I don't know
3. What is your organization's PRIMARY focus? *Please mark up to 3 responses.*
- Advocacy
  - Arts, culture, humanities, including museums, libraries and parks
  - Community improvement & capacity building
  - Crime prevention-related programming, criminal justice-related services
  - Dating violence, domestic violence, and/or intimate partner violence
  - Drug and alcohol care, including treatment, education, AAA, and other related services
  - Education, including GED services and alternative school curricula, and academic skills enhancements
  - Mentoring or credible messenger outreach and support (can be at-risk youth or already involved with criminal legal system)
  - Employment, including job training and placement
  - Environment
  - Physical health care, general and rehabilitation
  - Housing and shelter, assistance and relocation
  - Legal services, including advocacy, expungement, record screening, and other civil services
  - Mental health services, including crisis intervention and counseling
  - Private grant making foundation
  - Reentry services
  - Recreation and sports, including afterschool activities
  - Religious outreach
  - Scientific research
  - Victim assistance services
  - Something else, *please specify* \_\_\_\_\_

I don't know

4. For how many years has your organization been in existence?
- Less than 1 year
  - 1 – 3 years
  - 4 – 10 years
  - 11 – 15 years
  - 16 – 20 years
  - More than 20 years
  - I don't know

### YOUR PCCD VIP GRANT

5. How many PCCD VIP grants have you received since 2021?
- 1
  - 2
  - 3
  - 4

6. What is the grant number or ID for your VIP grant? If you have more than one VIP grant, please enter one grant number or ID and then answer the questions that follow for that grant.

- Grant 1 \_\_\_\_\_
- Grant 2 \_\_\_\_\_ **[Displayed if Q5= 2, 3, or 4]**
- Grant 3 \_\_\_\_\_ **[Displayed if Q5= 3 or 4]**
- Grant 4 \_\_\_\_\_ **[Displayed if Q5= 4]**

The next set of questions are about the PCCD VIP grants that you have received. If you have received more than one VIP grant from PCCD, we will ask the same set of questions for each grant.

“Thinking about your first grant: \_\_\_\_\_” **[NOTE: this pipes in the name that was entered in Q6 for each grant number entered. It repeats for each of the following questions as a reminder for the respondent.]**

7. What is the geographic area served by your PCCD-funded VIP grant service or program?
- Only within a city/county, *specify the city or county* \_\_\_\_\_
  - Only specific zip code(s) within single jurisdiction, *specify zip code* \_\_\_\_\_
  - Only specific neighborhood(s), *specify neighborhood* \_\_\_\_\_
  - Regional (city and surrounding suburbs), *specify region* \_\_\_\_\_
  - Something else, *please specify* \_\_\_\_\_
  - I don't know

8. Do you provide direct services to people through your PCCD-funded VIP grant?

- a. No **[skip to Q14]**
- b. Yes
- c. I don't know **[skip to Q14]**

9. What is the PCCD-funded VIP service or program's PRIMARY focus? *Please mark up to 3 responses.*

- Advocacy
- Academic skills enhancement
- After school activities, recreation, or sports
- Alternative school curricula
- Anti-violence education

- Basic income support
- Basic needs (clothing, food pantry, identification, etc.)
- Case management – general
- Court services
- Dating violence, domestic violence, and/or intimate partner violence
- Youth or family case reviews multiagency
- Cognitive behavioral therapy/treatment
- Community awareness/Mobilization against community violence
- Conflict resolution and/or conflict mediation
- Crisis response
- Diversion program
- Drug or alcohol education (not treatment)
- Drug or alcohol treatment inpatient
- Drug or alcohol treatment outpatient
- Drug court
- Emergency Shelter
- Expungements/record sealing
- English as a Second Language/translation
- GED/GED prep/literacy
- Family counseling
- Family reunification
- Group home
- Hospital-based/linked violence intervention program
- Housing assistance and/or relocation
- Job training, vocational rehabilitation, computer classes or training (not placement)
- Job referrals
- Job placement -not subsidized
- Job placement - subsidized
- Leadership and/or youth development
- Legal services and supports (can include expungements, record sealing)
- Life skills and/or interpersonal skills
- Mental health services (not including cognitive therapy)
- Mentoring
- Neighborhood/block beautification
- Parent training
- Peer support groups
- Public health education or wellness programs
- Restorative justice programs and supports
- Sports training-focused and/or organized sports
- Street outreach
- Summer camp (including summer sports camps)
- Transportation related services
- Victim assistance services, including victim advocacy
- Wilderness camps
- Youth court/peer court/ youth aid panels
- Something else, *please specify* \_\_\_\_\_
- I don't know

10. Please indicate which of the following eligibility requirements apply to your PCCD-funded VIP grant service or program. *Mark all that apply.*

- a. Assessed at a specific risk and/or need level, *please specify* \_\_\_\_\_

- Criminal justice system involvement (for example, must be on probation, must have been incarcerated within last year, etc.), *please specify* \_\_\_\_\_
  - Exclusive referral source (for example, PA Department of Corrections), *please specify* \_\_\_\_\_
  - Gender identity, *please specify* \_\_\_\_\_
  - Location of residence, *please specify* \_\_\_\_\_
  - Specific age group, *please specify* \_\_\_\_\_
  - Substance use/addiction, *please specify* \_\_\_\_\_
  - Veteran/military service, *please specify* \_\_\_\_\_
  - Another specific eligibility requirements, *please specify* \_\_\_\_\_
  - We do not have any eligibility requirements.
  - I don't know
11. Are there any groups of people who are excluded from participating in your PCCD-funded VIP service or program?
- No
  - Yes, *please explain* \_\_\_\_\_
  - I don't know
12. Is there a cap on the number of people your PCCD-funded VIP service or program can serve per month, year, or in total?
- No
  - Yes, per month, *please explain* \_\_\_\_\_
  - Yes, per year, *please explain* \_\_\_\_\_
  - Yes, in total, *please explain* \_\_\_\_\_
  - I don't know
13. Is there currently a waiting list for your PCCD-funded VIP service or program?
- No
  - Yes, *please explain* \_\_\_\_\_
  - I don't know
14. What are the primary barriers to serving more people through your PCCD-funded VIP service or program? *Mark all that apply.*
- Difficult to find the right kind of staff/skilled staff to lead the service/s or program
  - Not enough staff
  - Takes too much time to organize the service/s or program
  - There is not the need for the service/s or program
  - Too little funding to support the service/s or program
  - Physical space is too small
  - Another reason, *please explain* \_\_\_\_\_
  - There are no barriers. We are able to serve everyone who wants to participate.
  - I don't know
15. Does your PCCD-funded VIP service or program have a "logic model"? A logic model is a written diagram that documents service or program resources/inputs, outputs, and outcomes.
- No
  - Yes
  - I don't know

16. What systems and/or mechanisms do you use to track information about the people who participate in your PCCD-funded VIP service or program? *Mark all that apply.*
- Electronic Health Record
  - Formal case management database system
  - Paper Records
  - Spreadsheets (electronic, e.g., Excel)
  - Something else, *please explain* \_\_\_\_\_
  - We do not track information about participants **[skip to Q20]**
  - I don't know **[skip to Q20]**
17. What type of information do you collect about people who participate in your PCCD-funded VIP service or program? *Mark all that apply.*
- Intake and/or assessment (e.g., risk, needs, protective factors, etc.) information
  - Demographic information (e.g. age, gender, race/ethnicity)
  - Criminal justice system involvement
  - Services provided
  - Dosage (e.g. when and/or how often services are provided)
  - Participant outcomes
  - Something else, *please explain* \_\_\_\_\_
  - I don't know
18. **[IF Q17 == Participant outcomes]** What type of outcome information do you collect about people who participate in your PCCD-funded VIP service or program? *Mark all that apply.*
- Employment
  - Education
  - Substance Use
  - Mental Health
  - Health
  - Housing
  - Legal-related issues
  - Parenting, family re-unification, fatherhood, etc.
  - Criminal justice system involvement
  - Progress on Reentry Plan
  - Something else, *please explain* \_\_\_\_\_
  - We do not collect outcome information **[skip to Q20]**
  - I don't know **[skip to Q20]**
19. **[IF Q17 == Participant outcomes]** What type of data does your outcome information rely on?
- Self-report information
  - Administrative data collected from government agencies
  - Administrative data collected from nongovernmental agencies
  - A combination of self-report data and administrative data
  - Something else, *please explain* \_\_\_\_\_
  - I don't know
20. How does your PCCD-funded VIP service or program define success (i.e, your key end goal)?
- Write in \_\_\_\_\_
  - I don't know
21. Are you working with a consultant or organization to receive technical assistance or research support for your PCCD-funded VIP service or program? *Mark all that apply.*

- Yes, we receive technical assistance from WestEd
  - Yes, we receive technical assistance from someone else
  - Yes, we receive research support
  - No, we do not receive technical assistance or research support
  - I don't know
22. Is your PCCD-funded VIP service or program being, or has it previously been, evaluated by an internal or outside evaluator?
- No, not currently nor previously evaluated
  - Yes, evaluated internally
  - Yes, evaluated by an external evaluator
  - I don't know
23. How many full-time staff has the PCCD-funding supported over the past year?
- 0
  - 1 – 5
  - 6 – 11
  - 12 – 15
  - 16 – 20
  - More than 20
  - I don't know
24. How many part-time staff has the PCCD-funding supported over the past year?
- 0
  - 1 – 5
  - 6 – 11
  - 12 – 15
  - 16 – 20
  - More than 20
  - I don't know
25. Do you plan to obtain additional funding to sustain your PCCD-funded VIP service or program?
- No
  - Yes
  - I don't know
24. Is there any additional information we should know about the responses that your provided about your PCCD-funded VIP service or program?
- Write in \_\_\_\_\_

*[IF Q5 == >1 then loop to Q6 – Q26 for the amount of grants indicated then end]*

**Thank you so much for completing this survey, we really appreciate your time!**  
**Again, if you have any questions about this study or about the survey, please reach out to us at**  
**[VIPEval@norc.org](mailto:VIPEval@norc.org).**