
**Youth
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Youth Violence

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Introduction

A frightening litany of social statistics have brought youth violence to the forefront of public attention. Over the past decade juvenile crime has increased 250% (Simmons, 1994). Among juveniles ages 10-17 years, aggravated assault arrest rates increased 327% between 1965 and 1991 with the greatest increases occurring since 1983. During that same time period, robbery arrest rates among juveniles increased 165%. Young people under 21 commit 43% of all serious crimes (Zigler, Taussig, & Black, 1992). Between the years 1988 and 1994 the homicide rate for 15-19 year old males rose 154% (Centers for Disease Control, 1994) and is now the leading cause of death for young African American males and females (American Psychological Association, 1993).

In this monograph we will first consider what is known about the factors associated with youth violence. Then we will discuss

what researchers and practitioners have learned about the necessary components of successful interventions to address this epidemic of youth violence. Lastly we will present some potential pitfalls in developing prevention/intervention programs for youth.

Factors Associated with Youth Violence

Although no definitive answer exists making it possible to predict exactly who will become violent, many factors have been identified as contributing to a child's risk profile. The American Psychological Association's Commission on Violence and Youth (1993) suggests the following factors: biological substrates, childrearing conditions, ineffective parenting, emotional and cognitive development, gender differences, sex role socialization, relationships to peers, cultural milieu, social factors such as economic inequality and lack of opportunity, and media influences. Lowry, Sleet, Duncan, Powell and Kolbe (1995) suggest the development of

aggressive and violent behaviors among youth are influenced both by individual and broader societal factors. Individual factors related to the development of aggressive and violent behaviors among youth include developmental, family, and peer influences. Societal factors that have been linked to the problem of youth violence include violence in the media, alcohol and other drug use, access to firearms, and socioeconomic status.

As yet there is no unified theoretical model that assigns weight to each of these risk factors for use in predicting a child or adolescent's potential involvement in violence as a perpetrator, victim, bystander, or witness. Rather than discussing which factors might predominate, literature from varying fields can provide a useful outline of potential contributors to youth violence. Below is a closer look at some of the factors that can be affected through program interventions by youth development professionals.

Family Influences. The family or parents are often blamed for their child's antisocial or violent behavior. There are in fact numerous studies linking various parenting factors to youth violence, but few studies have been able to determine what weight these factors have in producing violent youth. Loeber and Dishion (1983) however, found parenting variables to be the most powerful predictor of general delinquency. The other factors in their mix of predictors that followed were childhood antisocial behaviors, criminality or antisocial behavior of family members, poor educational achievement, separation from parents, and socio-economic status. Loeber and Dishion found the earliest predictor and the one that was strongest overall, was a composite of parenting and family functioning measured at age 6.

A meta-analysis of longitudinal studies on the relation of family factors to antisocial behavior and delinquency found the following factors had the strongest predictive power: 1) lack of parental supervision, 2) rejection of children, and 3) lack of involvement with children (Loeber & Schmalzing, 1985).

Not surprisingly, family factors commonly found among adolescents who commit serious violent assaults include lack of parental supervision, indifference, rejection, and criminal behavior of parents (Office of Technology Assessment, 1991). Patterson, Chamberlain, and Reid (1982) found that parents of antisocial children are deficient in one or more of the following skills: monitoring the whereabouts of the child, disciplining the child for antisocial behavior, negotiating and solving problems within the family, and modeling effective prosocial "survival skills."

So many of the factors listed above relate to parents' time and knowledge of appropriate parenting roles. Since many adults model the parenting they received, breaking this cycle will require intensive, early, preventive, interventions. Parenting education classes sound great, but often those individuals you want to reach will not attend such classes unless court ordered. This intervention will require some creative thinking and will have to occur very early in a child's life.

Peer Influences. Adolescents begin looking more often to their peers, rather than their parents, for satisfaction of their needs to belong, be recognized, and accepted. Many teens fulfill these needs through positive peer groups such as youth clubs, sport teams, or other nonviolent groups. However, some teens who have grown up surrounded by violence in their homes and

neighborhoods may develop alternative antisocial solutions to accomplish the fulfillment of their needs. Violent gangs represent one form of peer-influenced antisocial behavior (Greydanus, Farrell, Sladkin, & Rypma, 1990).

Others have suggested peer influence plays out through adolescent's preoccupation with themselves, their appearance, and their image, which makes them extremely sensitive to embarrassment or verbal attack. Combined with the risk-taking tendencies of adolescents and the ready availability of knives and guns, young people have a heightened chance of responding violently to embarrassing or stressful events (Zeldin & Spivak, 1993).

Recognizing the influence of peers is important in planning prevention programs for adolescents. Not only do the programs need to be relevant to the teens' perceived needs, they need to be planned and designed in ways that reduce negative peer influence and reinforce positive peer influence. In other words, working only with youth already at high risk of or involved in violent behaviors requires careful planning to expose them to new skills, new experiences, other role models, and caring, nurturing adults. Dryfoos (1990) suggests the one common component of success in peer programs is the individual attention and training that young people receive.

Alcohol and other drug use. Alcohol and other drugs play a prominent role in the causal pathways of many types of interpersonal violence (Department of Health and Human Services, 1992). Studies have shown that a large percentage of violence occurs in places where alcohol is consumed and that at least half of all perpetrators and victims had been drinking

(University of California at Los Angeles & Centers for Disease Control, 1985).

The availability of alcohol and other drugs has been associated with increased violence in schools (Bureau of Justice Statistics [BJS], 1991). Students who said drugs could be obtained at their school were more likely than other students to fear an attack, both at school and on the way to or from school. Students who said drugs were easy to obtain at their school were also more likely than other students to have been victims of violent and nonviolent crimes at school (BJS, 1991).

In a study of over 4,000 South Carolina High School youth, binge drinking and sexual activity were significant predictors of fighting for all males regardless of ethnicity or age, while any alcohol use was the strongest predictor for white females and only sexual activity was significant for black females (Valois, McKeown, Garrison, & Vincent, 1995).

There have been numerous interventions, many of which are educational programs aimed at combating this risk factor. However, as suggested by the literature, not any one factor alone seems to be the predictor of violence. Therefore programs to prevent alcohol related violence must be multi-faceted, addressing both individual and societal risk factors.

School achievement. There is evidence to suggest that the level of violence in schools is related to students' attachments to the values schools seek to promote (Goodenow, 1993; National Research Council, 1993). Violence rates in secondary schools increased with the percentages of students who did not aspire to good grades, who did not view their curricula as relevant, and who did not believe their school experience could

positively influence their lives (National Research Council, 1993). In addition, higher rates of student violence have been reported in schools in which students perceive signs of ineffective social control, such as undisciplined classrooms and nonenforcement of school rules (National Research Council, 1993). It is not clear whether lack of school discipline gives permission for students to engage in violent behavior, or whether high violence levels in the school create fear among administrators and teachers, undermining discipline (National Research Council, 1993).

Schools are just one of the three major contexts in which youth learn social skills and interact. We already addressed the family and its influence on youth risk factors. The third context is the larger community or neighborhood in which a youth lives.

Community and Socioeconomic Status.

One of the most obvious and yet most debated issues related to the effect of community on a youth's potential for violent behavior is the issue of poverty. While the socio-economic status of a community directly affects the types of services, opportunities and living conditions, poverty in and of itself is debated by many as to its effects. Some argue, if poverty alone were the issue, wouldn't many clergy and graduate students be violent.

Rather than poverty per se, factors that are associated with poverty for certain people at certain times may increase risk for aggression (Guerra, Huesmann, Tolan, VanAcker, and Eron, 1995). According to these researchers, factors are correlated with poverty, but they are not equivalents. Therefore the process whereby the inner-city environment might contribute to risk across gender and ethnicity is unresolved. It

appears two factors may be influential: stressful events and beliefs promoting aggression.

Both the popular press and the research literature frequently depict a pervasive sense of hopelessness shared by many inner-city residents (Kotlowitz, 1991). When expectations for success through conventional channels are low, individuals who believe that life is hopeless may turn to more aggressive means of fulfilling their needs. Through the examples or models youth in such circumstances perceive, they may adopt a belief that aggressive behavior is the norm and a way of gaining status, material rewards, or simply coping with fear of victimization (Guerra, Huesmann, & Hanish, 1994). Empirical support for a relation between aggressive behavior and normative beliefs approving of aggression has been reported in samples of urban children (Huesmann, Guerra, Miller, & Zelli, 1992), although the relationship between economic status and beliefs was not evaluated.

Given this overview of some of the factors, we now turn to identifying what the literature says about what works.

Components of Successful Programs

As presented above, youth violence is associated with many factors. Considering the diversity and magnitude of some of these factors, how can youth service providers make an impact? In reviewing theoretical and evaluation research, we have identified the following suggested characteristics and components of successful intervention programs for youth.

According to the American Psychological Association (APA), effective intervention programs share two primary characteristics:

(1) they draw on the understanding of developmental and sociocultural risk factors leading to antisocial behavior, and

(2) they use theory-based intervention strategies with known efficacy in changing behavior, tested program designs, and validated, objective measurement techniques to assess outcomes (1993).

In addition, according to the APA Commission on Violence and Youth, those interventions with the best chances for positive outcomes:

- begin as early as possible to interrupt the "trajectory toward violence"
- address aggression as part of the whole of antisocial behaviors in a child or youth. Aggression is often just one of several problems behaviors. Other problem behaviors include academic difficulties, poor interpersonal relations, and cognitive deficits.
- include multiple approaches that reinforce each other across social contexts: family, school, peer groups, media, and community
- take advantage of developmental "windows of opportunity" such as birth, entry into preschool, beginning of elementary school and adolescence.

One researcher, that reviewed 100 programs that demonstrated positive behavioral change, suggests we are beginning to see program models of success that demand our attention (Dryfoos, 1990). Dryfoos (1993) more recently has suggested 10 common components of successful prevention programs. Dryfoos is quick to point out, "these components might be compared to the ingredients of a cake which when put together provide a satisfactory culinary experience, but taken separately might not be so satisfactory." Those 10 components are:

1. Intensive individual attention
2. Early intervention
3. Focus on schools both as an experience for youth and as a site to reach youth
4. Services provided in schools by outside organizations
5. Comprehensive multi-agency community-wide programs
6. Parents have a defined role
7. Peers have a defined role
8. Social skills training
9. Arrangements for training of program deliverers
10. Link to the world of work

Implications for Youth Development Professionals

Many have advocated the need to be thinking of positive youth development, not just focusing on problems of youth (Dryfoos, 1990; Lerner, 1995; Loftquist, 1983; Pittman & Zeldin, 1994; Rooney & Wright, 1992). There is strong support in the literature that such programs should focus on promoting healthy lifestyles that are incompatible with a variety of risk behaviors (Jessor, 1982). For example, this means placing in the lives of youth positive alternatives which meet their needs of a healthy self-concept, a sense of hopefulness, and the life-skills with which to function.

Focus on Prevention. Prevention is an active, assertive process of creating conditions and/or personal attributes that promote the well-being of people. True prevention is not just stopping that which is, but rather focusing on what we would like to see, and planning program and intervention strategies accordingly (Lofquist, 1983).

Promoting healthy lifestyles would be considered enhancing a protective factor. Greater recognition of the direct and

moderator effects of protective factors must be reflected in programs designed for youth. It is time to go beyond simply trying to intervene in a way to reduce risk or change problem behaviors and instead, to focus on replacing them or preventing them with positive alternatives and protective factors. The greater the protection, the less the problem behavior and interaction with risk factors (Jessor, VanDen, Vanderryn, Costa, & Turbin, 1995).

Design Interventions to Increase Protective Factors. Just what are protective factors? Protective factors are seen as decreasing the likelihood of engaging in problem behavior through direct personal or social controls against its occurrence. Garmezy (1985) organized protective variables into three categories: (1) individual differences such as high self-efficacy, (2) family attributes, such as parental support and affection, and (3) support from other adults or strong community integration.

Jessor et al. (1995) in their study identified seven protective variables as follows: (1) positive orientation to school, (2) positive orientation to health, (3) intolerant attitudes toward deviance from the personality system, (4) positive relations with adults, (5) the perception of strong social controls or sanctions for transgression, (6) awareness of friends who model conventional behavior, and (7) actual involvement in prosocial behaviors such as volunteer work and family activities.

Other researchers (Compas, 1987; Jenkins & Smith, 1990; Kazdin, 1993; Masten, Best, & Garmezy, 1990; Rutter, 1987; Werner, 1990) have developed the following list of protective factors which contribute to the resilience of individuals in the face of stress and other demands on one's ability to cope and adapt.

- A continuous, supportive relationship with a competent adult
- Parental warmth and family cohesiveness
- Perceived self-efficacy
- High self-esteem (including feelings of mastery and internal locus-of-control)
- Good learning and problem-solving abilities

Regardless of difficulty, for increased probability of success, these additional issues have to be addressed.

Form Partnerships. As both Dryfoos (1993) and the APA (1993) report suggest, successful interventions are multifaceted, multiagency, community wide interventions. Building successful partnerships or collaborations take time. If youth development professionals are going to enter into successful partnerships, they must:

- recognize the necessary time investment,
- be willing to focus on issue problem solving and not who gets the credit, and
- be willing to make their personal contribution to the partnership a priority.

It takes time to build the trust needed with other agencies. It takes time to do joint program planning and community building. It takes time to become knowledgeable about a community, its real issues, the people and how to get the local people involved. Interventions with lasting effects will be built in such a way that the people in the neighborhoods involved will be brought along with the process. Not only will they be involved in needs assessments to clarify the problems of youth, they will also be your recruits to help design and implement the programs or interventions identified as solutions. This will require the time of professionals to coach and perhaps train community members in the roles they assume (Dean & Brown, 1994).

Recognize Youth As Resources. Youth are eager to be involved not only in the identification of relevant and interesting alternatives for positive development, they also want to be involved in the planning and implementation of those programs (Dean & Brown, in press). Working with youth who have competition for their time and attention requires knowledge on the part of adults about adolescent development and behavior. Not only would involving youth as equal partners in solutions enhance the manpower of the interventions, but it is also a very effective way of providing these youth with protective factors as outlined above.

Pay Attention to Process. When working as change agents within communities the process of involving people as partners and owners of their own neighborhood development becomes as important or even more important than the final product or program planned. It is tempting to shortcut this step because of the time involved. In addition, it is very easy for a youth development professional to inhibit others' involvement in program planning and implementation because as a profession they have strong convictions of how programs should be conducted. Shortcutting the process of people involvement and ownership often means the intervention and its effects will only be around as long as the youth development professional can afford to continue making it a priority (Brown & Sharpe, 1995).

Evaluate. There are literally thousands of programs addressing the problems of high-risk youth without any particular evidence that they are accomplishing their goals. Many evaluations are often of questionable value because of the time frame between intervention and evaluation, the sampling sizes, or the inability to adequately gather

data from the control and study groups needed to examine results.

Hausman and Prothrow-Stith (1995) share some of the frustrations of their attempts to evaluate what they called a community-based youth violence prevention project. Some of these limitations and/or frustrations reflect the nature of applied community outreach or community collaborative research (Lerner, 1995; Pittman, 1994).

The challenge to youth development professionals is still to evaluate in spite of the difficulties. That means the research design for program evaluation needs to:

- be developed early in the program planning
- identify the specific outcomes to measure program effectiveness
- identify data needed and methods of data collection and analysis
- identify intervention and control groups and collect the necessary base line data
- collect and analyze data needed to measure effectiveness of the program
- interpret data for program refinement and future program planning.

Evaluation is time consuming but necessary.

Seek Creative Funding for Programs. Most federal grants provide funding for categorical programs, i.e. teen pregnancy prevention or drug and alcohol abuse prevention. It is this type of funding that encourages the continuation of doing single focused interventions that are problem focused instead of developing multifaceted prevention interventions aimed at the positive development of youth. There is one bright sign on the horizon related to federal grants. The Family and Youth Services Bureau of the Administration on Children, Youth, and Families (1996) states in its

recent proposed program priorities for at-risk youth:

"The disjointed services that often follow from the Federal pattern of categorical funding to correct undesirable behavior (funding that targets a single problem behavior of the youth) may be avoided if interventions are viewed from a "developmental" perspective. The task of youth services providers are seen, thus not as correcting the pathologies of troubled youth, but rather as providing for the successive needs of maturing individuals."

Those individuals and agencies that have formed partnerships and seek funding for youth development programs will have increased odds for success. Many sources of funding today indeed require collaborations or evidence of partnerships.

New funding is difficult to obtain because of the great competition for funds. Be creative and identify other sources of funding. The most obvious are in-kind donations such as meeting space, time of executives or other volunteer manpower from businesses, or printing and supplies. Less obvious might be special funding other agencies receive such as the drug and alcohol or the category one funds of schools. As relationships of trust and respect are built with other agencies, these new sources of funding will become more recognizable and potentially available to achieve program goals of providing youth with positive alternatives for their healthy development.

Conclusions

Youth violence is not a phenomenon that has occurred overnight. It is a problem that

has been around for years and is growing due to a variety of factors. These multiple factors seem to be related to both the individual youth and the contexts in which they live. Solutions need to be as equally multifaceted. Solutions also need to be carefully designed, long term investments focused on breaking the cycles of violence that have plagued our nation.

As youth development professionals we not only have the knowledge and skills to help in this battle, we also have a responsibility. Early prevention programs, in collaboration with many other agencies, can significantly influence the lives of youth in their families, their schools, and their communities—supporting these youth against the rising tide of youth violence.

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