Bold Steps Toward Child and Adolescent Health:

A Plan for Youth Violence Prevention in Colorado

Contents

Foreword

In September 2004, the Centers for Disease Control and Prevention (CDC) awarded the Colorado Department of Public Health and Environment a two-year grant to enhance child and adolescent health in Colorado through violence prevention. The Injury, Suicide and Violence Prevention Section and the Child, Adolescent and School Health Section in the Prevention Services Division at the Colorado Department of Public Health and Environment, under the guidance of the Colorado Prevention Leadership Council, are coordinating the project. A Violence Prevention Advisory Group, consisting of violence prevention experts, state agency leaders and members of statewide prevention groups, was created to assist in the completion of a state assessment of child and adolescent violence and the development of a statewide strategic plan for violence prevention. The assessment report, *Child and Adolescent Violence in Colorado: A 2005 Status Report*, was released in fall 2005 and can be accessed at http://www.cdphe.state.co.us/ps/YVPP/index.html.

The Colorado Department of Public Health and Environment's Prevention Services Division (PSD) and the members of the Violence Prevention Advisory Group are pleased to present *Bold Steps Toward Child and Adolescent Health: A Plan for Youth Violence Prevention in Colorado*, the culmination of two years of expert analysis of youth violence prevention practices, programs, data sources and laws. This plan is designed to improve the overall health and safety of Colorado's children and youth by recommending "bold steps" toward mitigating risk and increasing protection of young people as individuals, in their interpersonal relationships, as members of a community and as members of society.

This strategic plan for statewide child and adolescent violence prevention is based on findings from *Child and Adolescent Violence in Colorado: A 2005 Status Report*. The status report examined risk and protective factors, data and data sources, Colorado statutes, current state-level programs, uniform minimum standards, and best practices for child and adolescent violence and violence prevention throughout Colorado. The bold steps recommended on the following pages are based on the research of David Hawkins and

Richard Catalano,[1] Michael Resnick and Peggy Mann Rinehart,[2] and Peter Benson,[3] all of whom are leaders in the field of research regarding shared risk and protective factors for violence perpetration and victimization. The steps use a public health approach and are aimed at having an impact on children and adolescents in every aspect of life. The Violence Prevention Advisory Group is optimistic that, through the implementation of these steps, Colorado's children and adolescents not only will experience less violence but their overall health, safety and well-being will be enriched.

The purpose of the strategic plan is to create integrated recommendations that address shared risk and protective factors for multiple types of child and adolescent violence across all domains of influence. Through collaborative partnerships, universal and selected prevention strategies, and research-based approaches, the plan presents steps to most effectively reduce the rates of child and adolescent violence throughout Colorado. The plan is organized according to the World Health Organization's ecological model for understanding violence, based on multiple levels of influence on behavior (individual, relationship, community, societal).[4]

Further, each section of this strategic plan is defined by a broad goal to reduce violence based on reducing risk and enhancing protection. The plan prioritizes addressing factors that have an impact on all types of violence.

Indicators for success are based on data collected for the aforementioned status report and on the 2005 Youth Risk Behavior Survey. Outcomes will be measured using the same data sources used in the status report and from the 2007 and 2009 Youth Risk Behavior Surveys.

Primarily, the audience for this strategic plan is state-level organizations, particularly those funding youth violence prevention at the community level. Secondarily, communities are encouraged to use this plan as a framework upon which to build more specific strategies targeted to community needs. These bold steps, once adopted by state agencies, should reduce child and adolescent violence because the recommendations are based on an integrated approach addressing violence more broadly across all aspects of a child's and adolescent's life. With this plan, duplication of effort and the competition for resources will decrease.

This strategic plan targeting children and adolescents from birth to age 18 focuses on positive youth development and is designed to have an impact on multiple types of violence, including child maltreatment, youth suicide, sexual assault and violence that occurs in interpersonal relationships, schools and communities.

The following are some key terms used throughout the strategic plan:

Public Health Approach—a practical, goal-oriented and community-based approach for promoting and sustaining health. This approach seeks to identify risk and protective factors, determine when in the life course they typically occur and how they operate, and enable researchers to design preventive programs that are effective in reducing risk and promoting protection.[5]

Risk Factors—characteristics or situations that increase the probability that a child or adolescent will become a victim or perpetrator of violence.[6]

Protective Factors—characteristics or situations that mitigate the risk of a child or adolescent becoming a victim or perpetrator of violence.[7]

Shared Risk and Protective Factors—risk and/or protective factors that have an impact on more than one type of violence. For example, "family connectedness" is a shared protective factor for child maltreatment, suicide, sexual violence and community violence.

Universal Prevention—approaches that serve an entire population who share a general risk.[8]

Selective Prevention—approaches that serve subsets of the population with an enhanced risk of youth violence and are aimed at preventing the onset and reducing the risk of violence.[9]

Risk and Protective Factors

Risk factors are those characteristics or situations that increase the probability that a child or adolescent will become a victim or perpetrator of violence.[12]

Protective factors are those characteristics or situations that mitigate the risk of a child or adolescent becoming a victim or perpetrator of violence.[13]

Over the years, the field of violence prevention has developed a framework of risk and protective factors used to target efforts to stem rates of violence in communities. Risk factors are those characteristics or situations that increase the probability that a child or adolescent will become a victim or perpetrator of violence. Protective factors are those characteristics or situations that mitigate the risk of a child or adolescent becoming a victim or perpetrator of violence. Prevention science research suggests that the most effective methods for promoting positive youth development and preventing problem behaviors involve addressing both risk and protective factors.[10] It is difficult to develop high levels of protection in the face of high levels of risk, suggesting that children who are exposed to very few protective factors may benefit not only from increased protective factors but also from risk-reduction strategies.[11] This framework has been advantageous in helping practitioners and academics understand how individuals develop the propensity for violent behavior, illustrating why addressing risk and protective factors is important to violence prevention programs and practitioners.

Historically, prevention programming has operated in silos based on type of violence. Programs have been designed to address gang violence, teen dating violence or bullying and have been evaluated to measure only the impact the program has on the designated violent behavior targeted by the program. As a result, communities either implement many prevention programs in an effort to have an impact on multiple types of violence or, more likely, have to prioritize which types of violence to address while lacking the time and/or resources to address all violence.

Prevention efforts, focused solely on specific types of violence, do not reflect young people's total life context or the way in which violence occurs within communities. Early childhood trauma, such as sexual assault, can become a risk for future problem behavior such as obesity, substance abuse, bullying, further sexual assault, and/or suicide. Why not, then, implement programs that educate and empower parents, families and communities to create healthy and s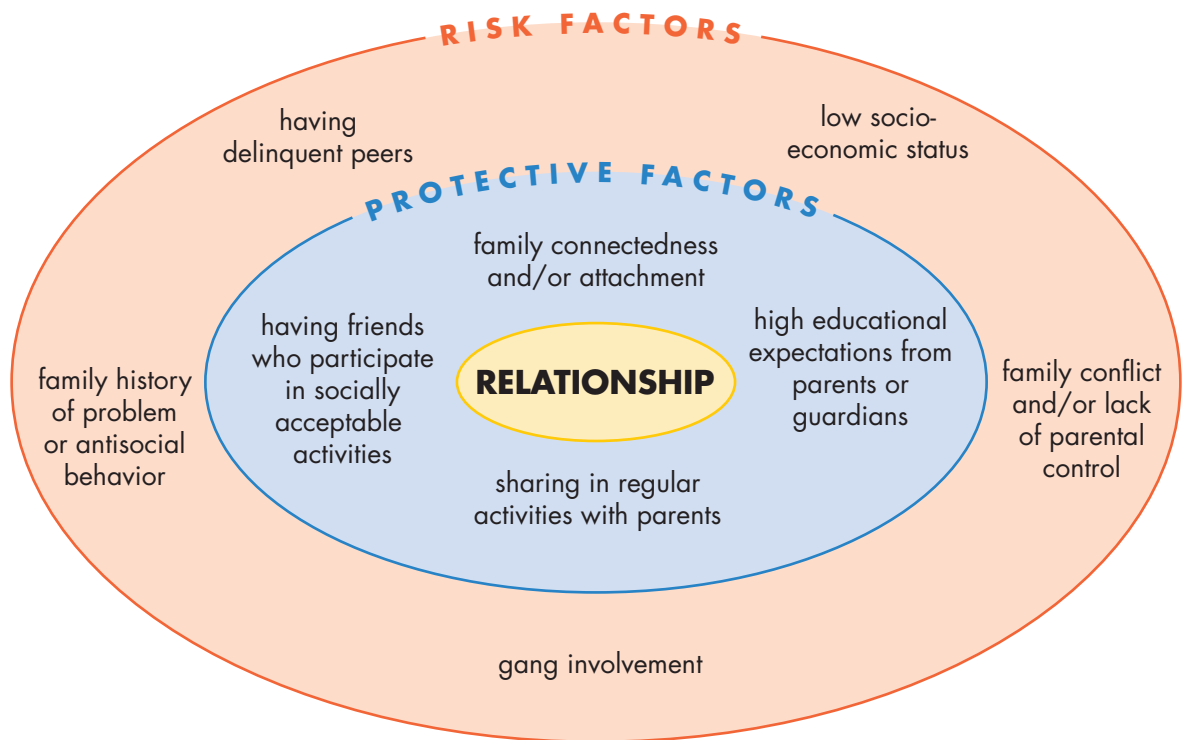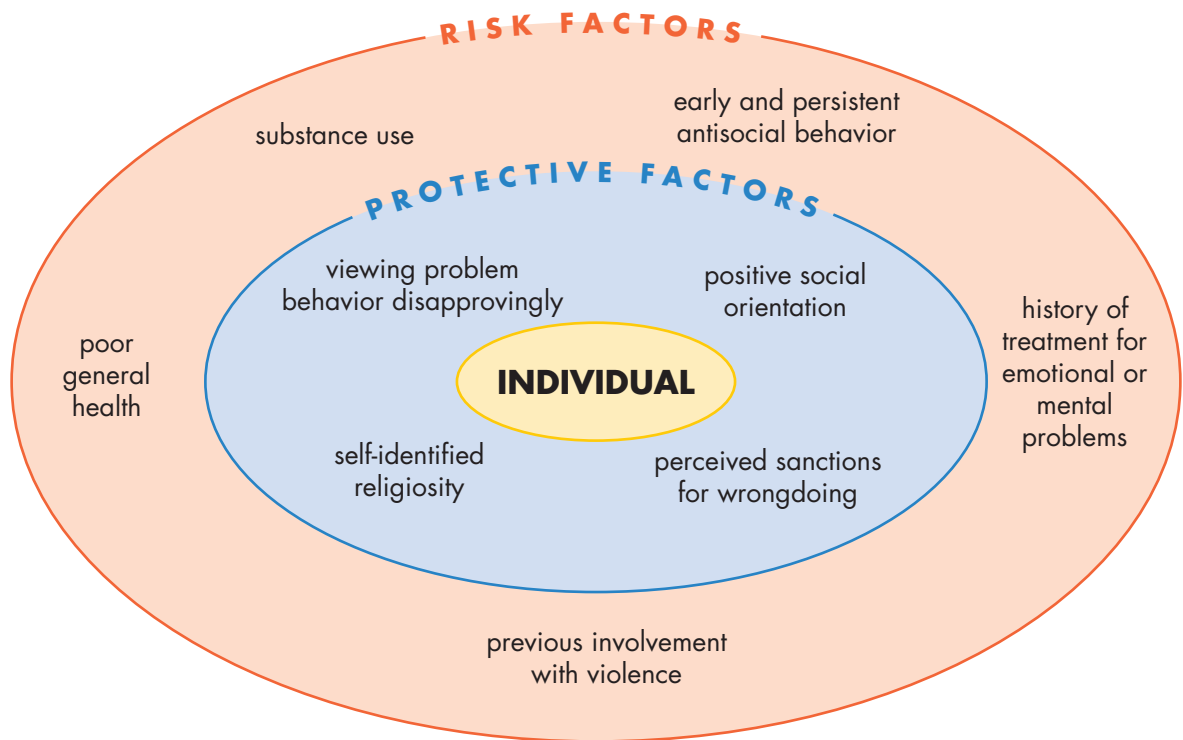afe environments in which children can thrive? As pre-vention science progresses toward an integrated approach, strategies that tackle shared risk and protective factors in order to impact multiple types of violence are emerging. For example, research identifies substance abuse as a risk factor for all types of violence. Therefore, communities that implement research-based substance abuse prevention programs will see an impact on multiple violent and problem behaviors, such as suicide, sexual violence and child maltreatment, without the program being specifically designed to address suicide, sexual violence or child maltreatment.
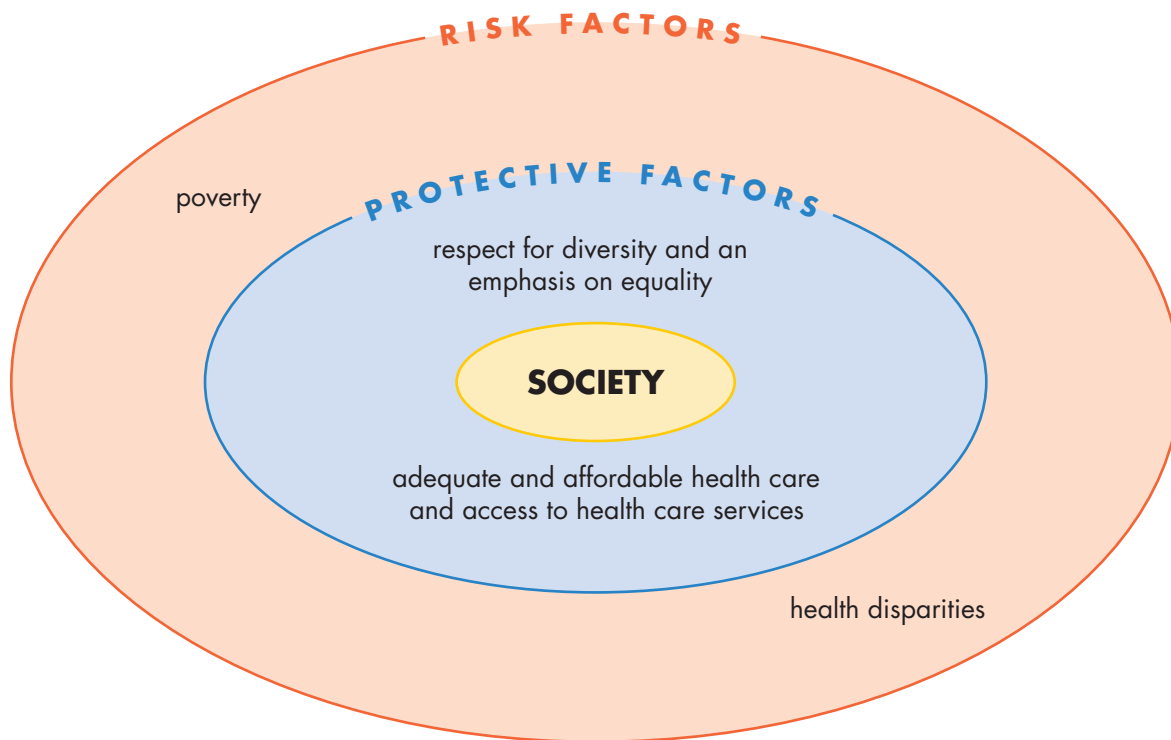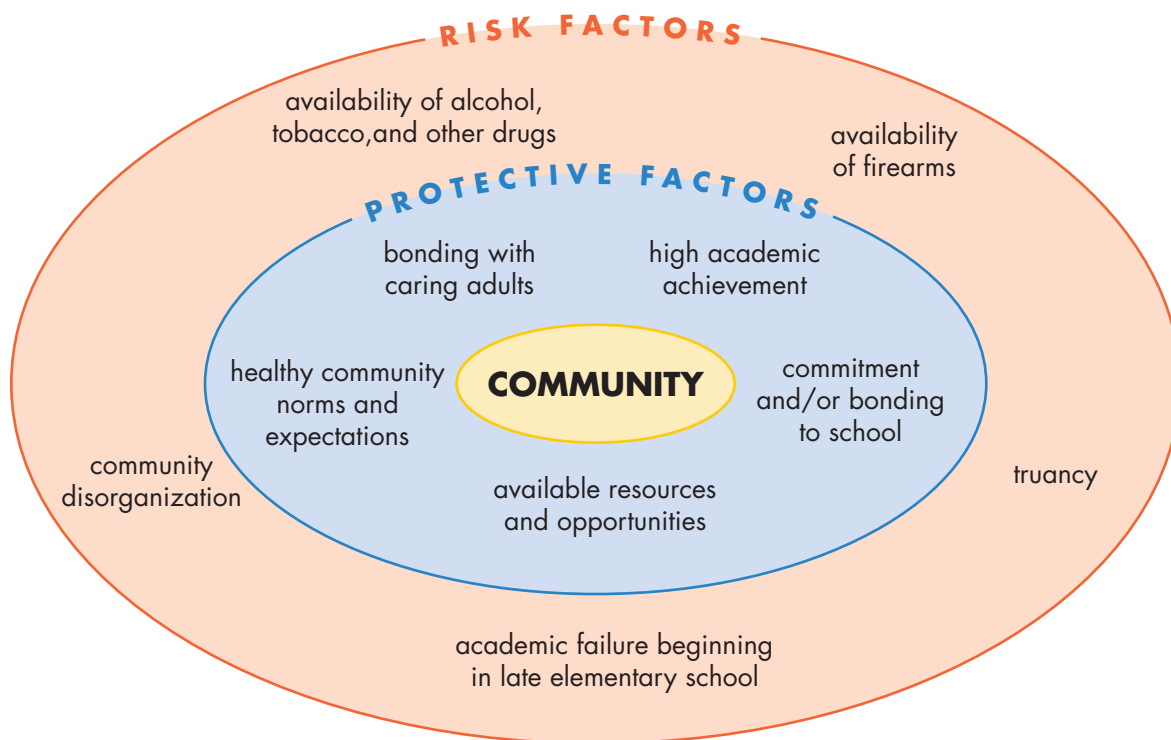
Shared risk and protective factors are those that impact more than one type of violence. Research conducted to date on risk and protective factors for various types of child and adolescent violence reveals a level of consistency across some forms of violence, including those targeted by this strategic plan:

- child maltreatment
- youth suicide
- school violence
- bullying
- community violence
- sexual violence
- teen dating violence

State agencies and communities can maximize resources and address multiple types of violence by implementing programs that reduce shared risk and enhance shared protective factors. Taking the bold steps recommended in this plan also will provide state agencies with critical knowledge about what types of health and safety issues are affected by addressing shared risk.

THE SHARED RISK AND PROTECTIVE FACTORS

RISK FACTORS

early and persistent antisocial behavior

substance use

PROTECTIVE FACTORS

viewing problem behavior disapprovingly

positive social orientation

history of treatment for emotional or mental problems

poor general health

INDIVIDUAL

self-identified religiosity

perceived sanctions for wrongdoing

previous involvement with violence

RISK FACTORS

having delinquent peers

low socio-economic status

PROTECTIVE FACTORS

family connectedness and/or attachment

having friends who participate in socially acceptable activities

high educational expectations from parents or guardians

family conflict and/or lack of parental control

family history of problem or antisocial behavior

RELATIONSHIP

sharing in regular activities with parents

gang involvement

RISK FACTORS

availability of alcohol,
tobacco, and other drugs

availability
of firearms

PROTECTIVE FACTORS

bonding with
caring adults

high academic
achievement

healthy community
norms and
expectations

COMMUNITY

commitment
and/or bonding
to school

community
disorganization

truancy

available resources
and opportunities

academic failure beginning
in late elementary school

RISK FACTORS

poverty

PROTECTIVE FACTORS

respect for diversity and an
emphasis on equality

SOCIETY

adequate and affordable health care
and access to health care services

health disparities

The bold steps outlined in this strategic plan are intended to highlight strategies that address these shared factors.

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BOLD STEPS for Child and Adolescent Violence Prevention

In the 2002 World Report on Violence and Health,[14] the World Health Organization presented an ecological model for understanding and preventing violence. This model explores the relationship between individual and contextual factors at multiple levels that influence human behavior. The bold steps that serve as the core of this strategic plan are based on this model.[15] Recommendations for change are made at the individual, relationship, community and societal levels of influence.

The ecological model provides the framework for the development of prevention and intervention strategies at each level of influence that has an impact on violent behavior at every stage of a child's or adolescent's life. The bold steps presented in this plan are categorized by level of influence, based on shared risk and protective factors, and intended to have an impact on multiple types of child and adolescent violence.
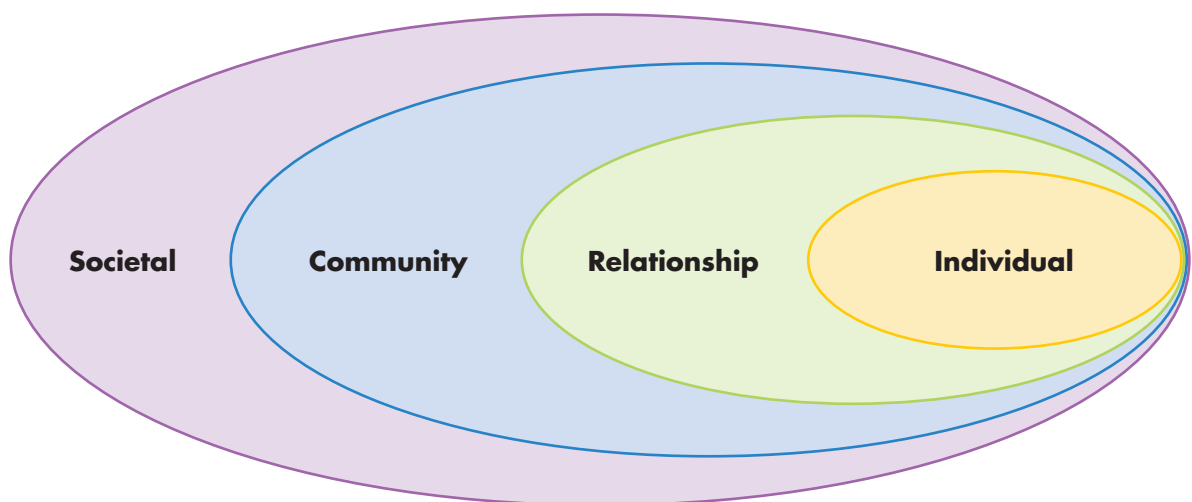
VISION

The vision of the Violence Prevention Advisory Group is to enhance child and adolescent health in Colorado through significant reductions in violence.

MISSION OF THE STRATEGIC PLAN

The mission of the strategic plan is to initiate evidence-based, community-driven prevention efforts throughout Colorado that emphasize addressing shared risk and protective factors and that strengthen collaborative partnerships.

Ecological model for understanding violence

Societal   Community   Relationship   Individual

Source: *World Report on Violence and Health,* World Health Organization

BOLD STEPS

■ INDIVIDUAL

Influencing change at the individual level requires having an impact on factors that are rooted in a person's biology and history. An individual's behavior can be directly linked to biologically based disorders or to a personal history or experience that has resulted in mal-adaptive ways of communicating or relating to others. Bold steps that lead to individual-level change include supporting and advancing programs that increase self-esteem and teach anger and anxiety management, as well as improve communication and social skills. Such programs aim to provide children and adolescents with the necessary tools to manage challenging situations through healthy and socially acceptable means.

Goal

Ensure that multiple, supportive relationships; pro-social, skill-building opportunities; and appropriate prevention services are available and accessible to all Colorado children and adolescents.

Risk Factors

✖ substance use

✖ early and persistent antisocial behavior

✖ previous involvement with violence

✖ history of treatment for emotional or mental health problems

✖ poor general health

Protective Factors

✔ viewing problem behavior disapprovingly

✔ positive social orientation

✔ self-identified religiosity

✔ perceived sanctions for wrongdoing

Bold Steps

1. Implement and evaluate school-based substance abuse and/or violence prevention programs that are research-based.

2. Evaluate increased statewide support for physical and mental health care services for all children and adolescents, with an emphasis on underserved populations.

3. Implement and evaluate programs that are available outside of school, such as after-school programs, that are research-based, open and available to all children and adolescents within the community, and provide services and activities that emphasize positive youth development.

Indicators of Success—by 2010

1. There will be a 10 percent increase in the number of school districts offering substance abuse and/or violence prevention programs that are research-based; a 10 percent decrease in self-reported, 30-day substance use among Colorado students; and a 15 percent decrease in 30-day incidence of violence among all students.

2. Fifty percent of the schools in Colorado will have a school-based health center, with adequate funds to support the entire school community, and there will be a 20 percent increase in the number of children and adolescents served in school-based health centers.

3. There will be a 15 percent increase in the number of children and adolescents participating in positive youth development programs in communities across the state, and a publicly accessible outcome database for state-funded prevention and/or youth development programs will be developed.

◼ RELATIONSHIP

Influencing change at the relationship level involves having an impact on the way in which proximal social relationships, such as relationships with peers, family members and teachers, can decrease the risk for, or protect a child or adolescent from, violence victimization and/or perpetration.[16] Bold steps that lead to change at the relationship level emphasize strengthening healthy, positive family and peer relationships for all children and adolescents.

Goal

Create opportunities to support and educate parents, youth peer groups and communities in developing and maintaining healthy relationships.

Risk Factors

✘ family history of problem or antisocial behavior

✘ family conflict and/or lack of parental control

✘ low socioeconomic status

✘ gang involvement

✘ having delinquent peers

Protective Factors

✔ family connectedness and/or attachment

✔ high educational expectations from parents or guardians

✔ having friends who participate in socially acceptable activities

✔ sharing in regular activities with parents

Bold Steps

1. Implement and evaluate parenting programs that are research-based, and encourage and empower greater family bonding and/or connectedness.

2. Implement and evaluate research-based youth prevention programs that emphasize positive, healthy peer relationship development.

3. Implement and evaluate strategies that encourage, empower and increase parental or caretaker's involvement in schools and in children's education.

Indicators of Success—by 2010

1. There will be a 15 percent increase in the number of families served by existing research-based parenting programs in communities across the state.

2. There will be a 10 percent increase in the number of children and adolescents participating in programs emphasizing positive, healthy peer relationships in communities across the state.

3. There will be a 10 percent increase in 30-day reported involvement by parents or caretakers in their children's education.

◼ COMMUNITY

Changes at the community level occur in the context in which social relationships are embedded, such as schools, churches and neighborhoods, and seek to identify the characteristics of these settings that are associated with violent victimization or perpetration.[17] Bold steps in addressing rates of violence in communities encourage strengthening community support for reducing risk factors that lead to child and adolescent violence and promoting positive youth development communitywide.

Goal

Develop and strengthen community-level partnerships that include youth and that provide information and education to improve the coordination of services that prevent violence and create safe, healthy schools and communities.

Risk Factors

✘ availability of alcohol, tobacco, and other drugs

✘ availability of firearms

✘ community disorganization

✘ academic failure beginning in late elementary school

✘ truancy

Protective Factors

✔ bonding with caring adults

✔ available resources and opportunities

✔ healthy community norms and expectations

✔ commitment and/or bonding to school

✔ high academic achievement

Bold Steps

1. Strengthen and expand research-based mentoring programs community-wide.

2. Foster community investment in positive youth development services, involving all relevant community agencies and service providers.

3. Create school and community partnerships that enable every child to be successful in school. Such strategies may include academic improvement programs, increased opportunity for school involvement and after-school activities (Boys and Girls Clubs, job opportunities, community outreach programs, etc.).

4. Develop and use school-based curricula that integrate violence prevention into lessons that prepare students to succeed academically.

5. Include adolescents as advisors and collaborators in the decision-making process for all violence prevention and positive youth development activities.

6. Enhance engagement and bonding of children and adolescents with caring adults.

7. Emphasize and assist in the development of initiatives that generate community support for child and adolescent violence prevention practices.

Indicators of Success—by 2010

1. There will be a 10 percent increase in the number of children and adolescents served and a 10 percent increase in the number of adult volunteers in mentoring programs in communities across the state.

2. There will be greater opportunities for, and variety in, activities available outside of school offered in communities throughout the state.

3. The number of students reporting feeling safe at school will increase by 10 percent.

4. School discipline measures required to address violence will decrease by 15 percent and overall academic achievement will improve throughout the community and statewide.

5. The number of youth who report that an adult cares for them or that report having bonded with a caring adult will increase by 10 percent.

■ SOCIETY

Societal change means addressing risk and protective factors at the systems level, where the larger issues that affect rates of child and adolescent violence reside. An example is changing cultural norms that support the contexts in which violence often occurs, such as racism, classicism, or heterosexism.[18] Bold steps in initiating societal change include generating political engagement in communities and garnering legislative support for the development of policies that promote social justice and eliminate barriers to quality of life. These barriers often are based on race, ethnicity, sexual preference or socioeconomic class. Changing cultural norms that support violent behavior while creating norms that support equality and positive youth development are essential components of any bold step taken to generate change at the societal level. Change at the societal level requires vision and time, with goals that are far-reaching and difficult, but not impossible, to attain.

Goal

Promote cultural change by increasing prevention research, expanding collaboration, building legal advocacy, creating effective marketing strategies and leveraging resources.

Risk Factors

✘ poverty

✘ health disparities

Protective Factors

✔ adequate and affordable health care and access to health care services

✔ respect for diversity and an emphasis on equality

Bold Steps

1. Prioritize and encourage increased political support for child and adolescent violence prevention efforts that focus on decreasing disparities for underserved populations.

2. Improve local and individual educational and health-related services for those who are underserved.

3. Implement and evaluate social marketing campaigns and educational tools that promote positive youth assets.

4. Use the expertise of young people to strengthen political will, and encourage youth involvement in organizational and grass roots activities.

5. Identify and question structural barriers, such as ineffective policies and systems that inhibit the development of effective youth violence prevention and positive youth development practices.

Indicators of Success—by 2010

1. There will be an increase in policies and/or funding that support violence prevention and positive youth development.

2. Access to educational and health-care services for traditionally underserved children and youth will improve significantly.

3. The majority of social marketing campaigns and educational tools intended to have an impact on child and adolescent violence will portray the strengths of young people rather than highlight risks and weaknesses.

4. More youth will be involved in every community and statewide initiative intended to have an impact on their health, safety, education and behavior, and adults' perception of youth as positive, productive and contributing members of society will increase throughout the community and statewide.

5. Former structural barriers will be replaced by policies and systems that are proven effective and use positive youth development practices.

Why Integrate?

Integration

- an act or instance of combining into an integral whole.

- behavior, as of an individual, that is in harmony with the environment

- *psychology*—the organization of the constituent elements of the personality into a coordinated, harmonious whole.

(**http://dictionary.reference.com/**)

One of the primary goals identified by the Violence Prevention Advisory Group and the Centers for Disease Control and Prevention at the outset of this two-year planning project, culminating in this strategic plan, was to recommend creative and integrated approaches for conducting child and adolescent violence prevention. Violence prevention programs typically have been implemented in a focused fashion, independent of other violence prevention efforts. Presently, one community may have separate school dropout, bullying, tobacco, suicide, teen-dating violence, drug abuse and gang prevention programs that operate concurrently, competing for time, expertise and resources. Given limited resources, it is imperative that strategies and efforts are coordinated and combined to effectively mitigate child and adolescent violence.

The Violence Prevention Advisory Group predicts that, by integrating approaches and focusing on addressing shared risk and protective factors for multiple types of violence, Colorado will see significant reductions in youth violence perpetration and victimization. More importantly, empowering communities to implement strategies that emphasize and enhance the strengths of children, youth and adults within a community will improve the overall safety, health and happiness of the community.

Integrated approaches also may reduce the need for communities to "decide" which type of violence is most severe and in need of action. Communities currently are unable to address every type of violence, resulting in an emphasis on some and not others. For example, a community may identify bullying as a pressing issue and dedicate resources to a specific bullying prevention program. This same community also may have a significant teen-dating violence issue but have inadequate resources to address it simultaneously. An approach that potentially has an impact on bullying and teen-dating violence leverages resources. While strengthening family connectedness may not directly address bullying and teen-dating violence, research suggests that family connectedness is a protective factor for most types of child and adolescent violence. Thus, by implementing a research-based program that encourages family connectedness, such as the Nurse Home Visitor Program, rates for multiple types of child and adolescent violence may decrease based on the efficacy of enhancing a shared protective factor throughout a community.

In adopting the strategies highlighted in this strategic plan, state agencies will lay the foundation for decreasing the burden of youth violence in Colorado. Success with implementing the bold steps at the community level will expand the breadth of knowledge about integrated approaches and will advance the science of prevention. The Violence Prevention Advisory Group and the Colorado Department of Public Health and Environment will work diligently to promote an integrated approach to child and adolescent violence prevention so that communities throughout Colorado will be places where children and adolescents are safe and healthy.

Endnotes

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Acknowledgments

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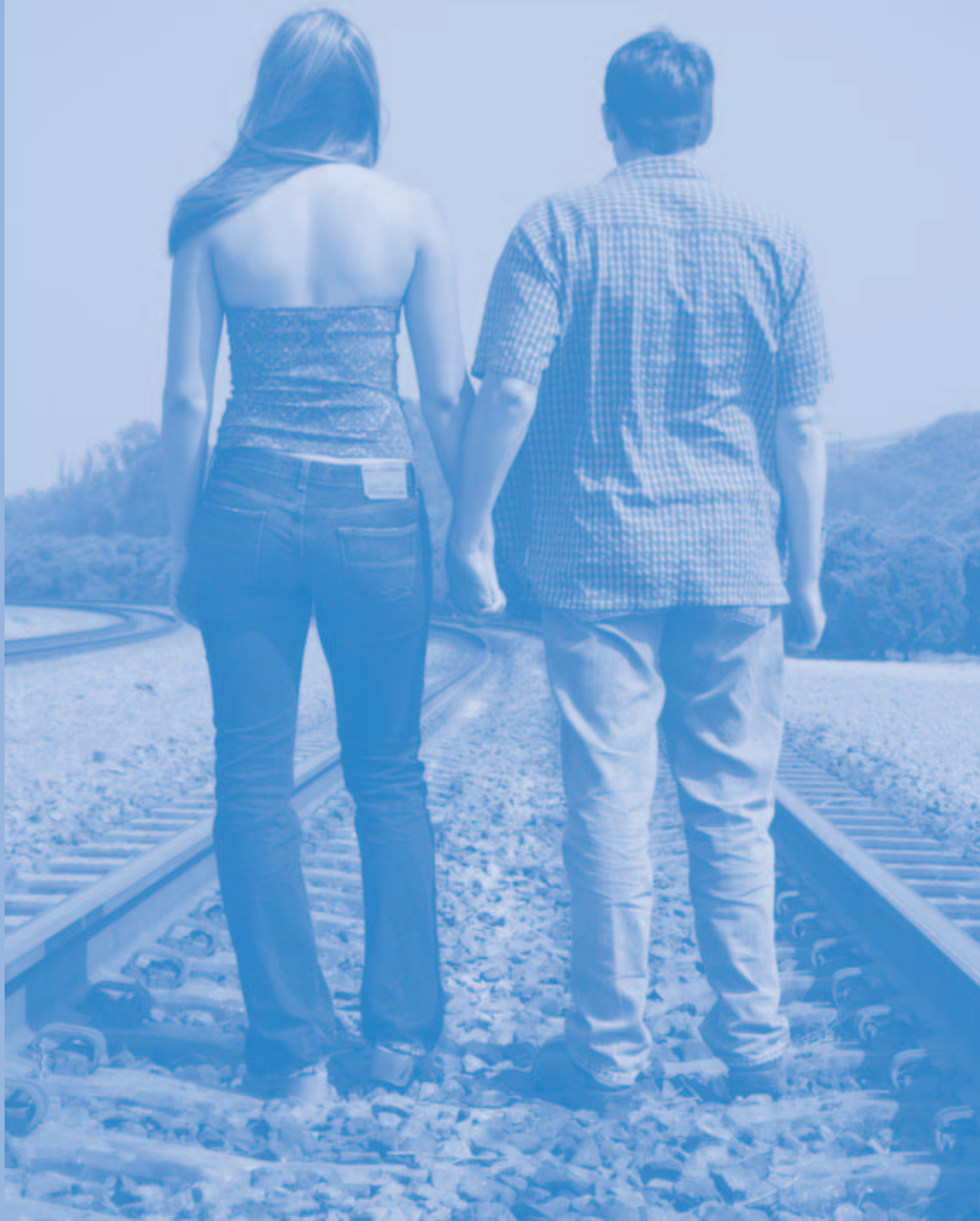**William Porter, PhD**
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