

Violence

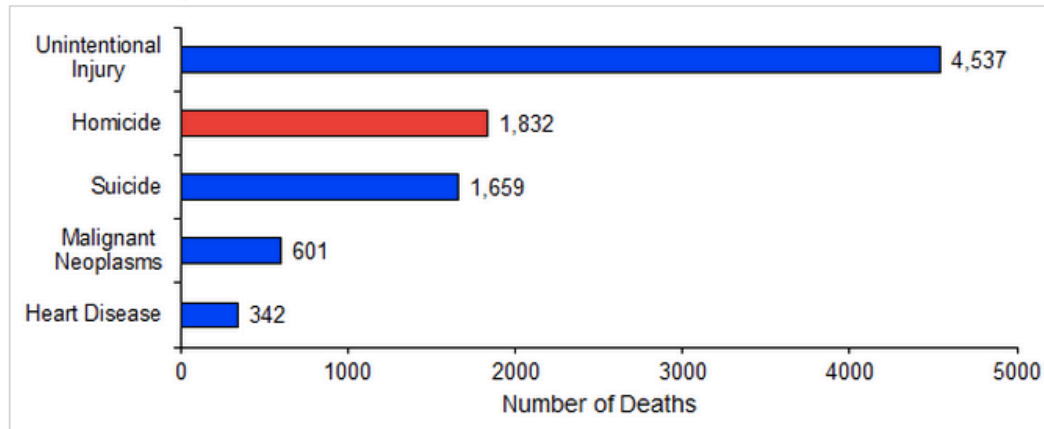
Obj. 7.1: Demonstrate strategies to prevent, manage, or resolve conflicts.



Leading Causes of Deaths for Teens

Use the graph to answer the questions below.

Five Leading Causes of Deaths Among Persons Ages 15-19 Years, United States, 2010



1. What role does violence play in deaths among teens?
2. Approximately how many times more people age 15-19 died from homicide than malignant neoplasms (cancer)?
3. Considering the leading causes of injury, what should public health professionals focus on in their prevention efforts? Why?

DISCUSS

The Cost of Violence

The graph above depicts the leading causes of death among teenagers 15-19. However, the graph does not show other effects that result from violence. With a partner, discuss the impact, effects, and cost of violence on individuals, families, communities, and society.

Effects of Violence:



The Violence Epidemic

Violence is a serious public health problem in the United States. From infants to the elderly, it affects people in all stages of life. In 2010, over 16,250 people were victims of homicide and over 38,360 took their own life.

The number of violent deaths tells only part of the story. Many more survive violence and are left with permanent physical and emotional scars. Violence also erodes communities by reducing productivity, decreasing property values, and disrupting social services.

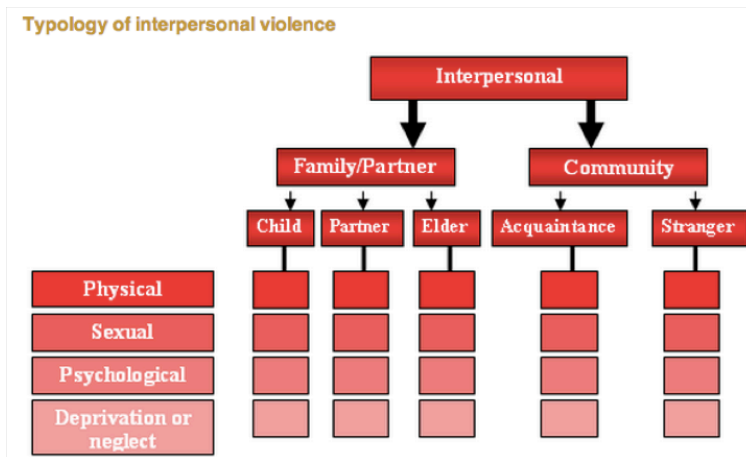
Source: CDC Violence Prevention (<http://www.cdc.gov/ViolencePrevention/index.html>)

What is Violence?

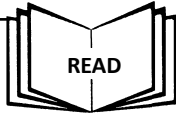
The World Health Organization (WHO) works toward violence prevention through the Violence Prevention Alliance (VPA). The VPA addresses the problem of violence as defined in the *World report on violence and health* (WRVH), namely: **"the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation."**

Types of Violence:

- **Self-directed violence** refers to violence in which the perpetrator and the victim are the same individual and is subdivided into *self-abuse* and *suicide*.
- **Interpersonal violence** refers to violence between individuals, and is subdivided into *family and intimate partner violence* and *community violence*. The former category includes child maltreatment; intimate partner violence; and elder abuse, while the latter is broken down into *acquaintance* and *stranger* violence and includes youth violence; assault by strangers; violence related to property crimes; and violence in workplaces and other institutions.
- **Collective violence** refers to violence committed by larger groups of individuals and can be subdivided into social, political and economic violence.



Source: WHO Violence Prevention (<http://www.who.int/violenceprevention/approach/definition/en/>)



The Public Health Approach to Violence Prevention

Read the handout, “The Public Health Approach to Violence Prevention.” Before you begin reading page 2, select one type of violence from the diagram on the previous page and use it to fill in the boxes labeled ‘Your Turn.’

The Public Health Approach to Violence Prevention

The public health perspective asks the foundational questions: Where does the problem begin? How could we prevent it from occurring in the first place? To answer these questions, public health uses a systematic, scientific approach for understanding and preventing violence. While violence prevention practitioners may not be involved in all steps, understanding each step and why they are necessary to assure the desired impact on community health is helpful in selecting and/or developing prevention strategies.

The Public Health Approach
There are multiple steps in the public health approach, with each step informing the next. Many people, organizations, and systems are involved at each step along the way. Think of it as a relay team for prevention. The prevention practitioner usually takes up the baton in the fourth step, but overall success depends upon all of the other teammates and how they ran their legs of the race.

The Public Health Approach
In **step one**, the problem is defined. This involves systematically collecting data to determine the “who,” “what,” “when,” “where,” and “how.” Data are typically gathered from a variety of sources such as death certificates, medical or coroner reports, hospital records, child welfare records, law enforcement or other records. Data can also be collected using population-based surveys or other methods.

In **step two**, the reasons why one person or community experiences violence while another does not are explored. Scientific research methods are used to identify the factors that increase the risk for violence (risk factors). Factors that may buffer against these risk factors are also identified; these **protective factors** decrease the likelihood of violence in the face of risk. The goal of violence prevention is to decrease risk factors and increase protective factors.

In **step three**, prevention strategies are developed and rigorously tested to see if they prevent violence. This information is shared with others, usually through activities related to step four.

Step four is where the rubber meets the road. The strategies shown to be effective in step three are disseminated and implemented broadly. While many prevention practitioners may not have the skills or resources necessary to conduct steps one, two, and three, knowing where to look for the findings of others, such as **registries for evidence-based practice** in the field, will satisfy similar goals for implementation. Training and/or technical assistance often is offered to practitioners when implementing effective strategies or programs to ensure that the strategies are implemented as they were intended. Though this is considered the final step of the public health model, it doesn't mean that the process is complete. Additional **assessments and evaluation** are done to assure that all components of the strategy fit within the particular community context and have the desired effect of preventing violence.

Putting It All Together
So what does this mean for the decision making process on the ground? How does knowing about the four steps help in selecting prevention strategies? One way to look at it is that the Public Health Approach offers a framework for asking and answering the right questions. The tool on the next page will help you to do just that.

1. Hilly, L. et al. (2016). *Public Health Approach to Preventing Intimate Partner Violence*. 196-210. National Center for Injury Prevention and Control, Division of Violence Prevention.

Use the tool below to think through a violence-related problem you would like to impact in your community or organization. The issue of Shaken Baby Syndrome, one form of abusive head trauma, is used as an example to demonstrate the tool. Fill in the shaded areas on the table with examples from your community or organization.

Steps	Guiding Questions	Potential Resources	Example Exercise
Step One Define the Problem	<ul style="list-style-type: none"> What violence-related problem do I want to prevent? What data are available to describe the scope and burden of the problem? How many people are affected by the identified problem? Who is experiencing the problem? Where and where is the problem occurring? 	<ul style="list-style-type: none"> National Violent Death Reporting System - http://www.cdc.gov/ViolencePrevention/NVDRS.html Web-based Injury Statistics Query and Reporting System (WISQARS) - http://www.cdc.gov/nchs/wisqars/ Kid Count Data Center - http://datacenter.kidcount.org/datacenter/cme/2012-2014/ ALSO State and local crime statistics, health statistics, child welfare data, etc. 	<ul style="list-style-type: none"> Example: Abusive head trauma (AHT), including Shaken Baby Syndrome (SBS) is a leading cause of AHT-related deaths in the United States. According to a study of health care-related AHT cases, on many occasions in four children a key symptom was or had had injury from AHT when in the United States.
Step Two Identify Risk and Protective Factors	<ul style="list-style-type: none"> Where do I find research to answer: What are the risk factors for the problem? What are the protective factors for the problem? 	<ul style="list-style-type: none"> Division of Violence Prevention (NCP/ADDC) - http://www.cdc.gov/ViolencePrevention/adddc.html 	<ul style="list-style-type: none"> Example: Congruent frustration or anger resulting from uncontrollable crying and limited social supports are primary risk factors for shaking a baby.
Step Three Develop and Test Prevention Strategies	<ul style="list-style-type: none"> Where do I find information to answer: Are there existing, effective strategies based on best available evidence? If none exist, what resources do I have to develop a new strategy based on what was learned in steps one and two? Where can I find research partners to help evaluate the selected strategy? Is the strategy effective - did it do what was intended? 	<ul style="list-style-type: none"> The Community Guide to Prevention Services - http://www.communityguide.org/ Blueprints for Violence Prevention - http://www.preventviolence.org/blueprints/ California Evidence-Based Clearinghouse - http://www.cebc.org/ Substance Abuse and Mental Health Services Administration (SAMHSA) National Registry of Evidence - http://www.nrepp.com/guestbook/evidence.asp 	<ul style="list-style-type: none"> Example: A parenting or media/home visitation program. http://bit.ly/1o6n0ds
Step Four Assess Widespread Adoption (Dissemination and Implementation)	<ul style="list-style-type: none"> Who would benefit from this strategy (parents, educators, policy makers, etc.)? How do I get this strategy to the people who need it? Where can I find assistance and support for implementing an effective strategy and carrying, monitoring and evaluation of the strategy? 	<ul style="list-style-type: none"> National Implementation Research Network - http://www.imrn.org/ TRIPCC National Resource Center - http://www.tripcc.org/ University of Kansas Community Toolbox - http://www.kctoolbox.org/ 	<ul style="list-style-type: none"> Example: Implementation of a home visitation program that includes a focus on specific parental behavior and modifiable environmental conditions associated with adverse outcomes for children.



Violence Prevention Skits

Working in a team, select one type of violence and create a skit depicting a scenario involving that type of violence. Your skit should include at least one cause or risk factor that lead to that type of violence, one impact or effect of the violence on an individual, family, community, or society, and one strategy to prevent, manage, or resolve the conflict that lead to the violence. Plan your skit using the table below:

Type of Violence	
Cause or Risk Factor	
Effect or Impact	
Strategy to Prevent, Manage, or Resolve Conflict/Violence	



Violence Identification

Select two of the skits you observe to record in the table below. Identify the type of violence depicted, one cause or risk factor, one impact or effect, and one strategy to prevent, manage, or resolve.

Skit #1

Type of Violence	
Cause or Risk Factor	
Effect or Impact	
Strategy to Prevent, Manage, or Resolve Conflict/Violence	

Skit #2

Type of Violence	
Cause or Risk Factor	
Effect or Impact	
Strategy to Prevent, Manage, or Resolve Conflict/Violence	



Violence Prevention

Determine what resources for violence prevention are available in your school, neighborhood, community, or city/town. Using any available sources, find one resource (i.e., neighborhood watch, advocacy organization, education program, etc.). Then write a 1-3 paragraph summary of the resource including:

- a. the type of violence the organization focuses on
- b. target population served
- c. causes or risk factor targeted
- d. impact or effect of the organization
- e. strategies used to prevent, manage, or resolve conflicts or violence