



**PROMOTING
PREVENTION,
TARGETING
TEENS:**

AN EMERGING AGENDA TO REDUCE DOMESTIC VIOLENCE

**Prepared for the Family Violence Prevention Fund
by Ann Rosewater**

**PROMOTING PREVENTION,
TARGETING TEENS:
An Emerging Agenda to
Reduce Domestic Violence**

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FAMILY VIOLENCE
PREVENTION FUND

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Executive Summary

With support from the William and Flora Hewlett Foundation, the Family Violence Prevention Fund undertook an unprecedented yearlong investigation to gather and synthesize the best knowledge about domestic violence, its causes and consequences, and to define the strategies that offer the greatest promise to keep women and children safe. This report is the result of that project. It concludes that the next generation of work must target teens, young parents and their children, and perpetrators; change social norms; and place vastly greater emphasis on prevention.

In the last 25 years, our nation has made tremendous progress in understanding and addressing domestic abuse. Criminal justice and other systems have been transformed, a nationwide network of shelters and programs has been created, and individuals in diverse communities have been educated about the horrors associated with abuse. Other systems, such as health care and child welfare, are beginning to address the needs of women victims. That work is essential. It has saved countless lives. It is also unfinished, and must continue.

But a new and additional dimension is needed in this work – prevention, which to date has been largely absent from policies and programs that address domestic violence. Prevention holds the promise of keeping future generations of women and children safe from violence. It requires more research, greater attention and many more resources than it receives today.

Other gaps must be closed as well. More attention and resources should be focused on men, on the low-income communities that have disproportionate experience with abuse, on promoting economic independence, and on ending the exclusive reliance on punitive responses such as incarceration, which is intolerable to many communities of color and immigrant communities. Not enough work has been done to identify pathways to domestic violence (the early indications that a young person is becoming a batterer) and the links between assault committed by teens and domestic violence committed by those same individuals as they grow older. Children affected by domestic violence receive too little help. And we need better evaluation of domestic violence programs and policies, to ensure that limited resources are well spent and programs evolve to meet emerging needs.

It is indisputable that young people are disproportionately affected by domestic violence. One study found that 17 percent of three to five year olds in Head Start programs have been exposed to domestic abuse. Adolescents and young adults also are a highly victimized group. They may witness or experience family violence as children, be victimized by other youth in dating and other situations, and suffer great trauma as a result. These experiences with family and youth violence can seriously impair the social development, learning, physical and emotional health, and the opportunities for healthy and safe development for millions of American youth.

Because adolescence is a formative period, the failure to protect youth from violence and to ameliorate the harm caused when they experience violence is particularly harmful. The most vulnerable adolescents tend to be isolated in unhealthy institutions such as jails or gangs, or they may struggle to transition out of foster care or juvenile detention centers. Getting help to them is essential, in particular because many are young parents who need help if they are to parent their own children in positive ways.

Focusing attention on girls and boys age ten to 15 can stem violence among 16 to 24 year olds. Emerging evidence suggests that patterns of violence and victimization may develop in early adolescence, and soon become difficult to reverse. Boys and young men need support systems and safe places to develop culturally specific concepts of manhood that include nonviolence. Support and intervention can help young people reject violence. Unlike their older counterparts, young adolescents are typically still connected to institutions that make universal prevention approaches possible – through after-school or summer activities, mentoring programs, schools themselves, or other settings.

Even youth already involved in violent crime can be helped. Although no research has explored the interventions that change the behavior of young perpetrators of domestic violence, experts have identified interventions that change the behavior of adolescents involved in other kinds of violent crime. These include skill building and school-based programs, neighborhood- and community-wide projects that provide clear messages about expectations and consequences, and responsible fatherhood, independent living and prisoner re-entry programs. These strategies can very likely deter domestic as well as other types of violence.

The work to create a coherent field focused on preventing domestic violence must begin with recognizing the importance of working with adolescents and young adults of both genders, and broadening the constituency for prevention work. Four sometimes-overlapping groups might benefit most from support and intervention: young adolescents; youth transitioning from foster care and incarceration; serious offenders; and young parents.

In all this work, changing social norms is essential. Much more social marketing on abuse prevention is needed, including the development of population-specific messages that target vulnerable teens living in fragile and low-income communities.

The Report that follows identifies numerous promising programs and approaches, as well as gaps in research and knowledge. It is prefaced on the conviction that solutions are possible and within reach. Certainly, our nation has no greater priority than to bring safety to the millions of women and children who now live with fear and violence. Doing so will make families, communities and our society stronger and healthier.

Foreword

The Family Violence Prevention Fund is proud to issue this unprecedented Report, which provides the most comprehensive analysis to date of the status of domestic violence prevention efforts. This Report does more than examine our nation's considerable progress in understanding and stopping domestic violence. It takes a close look at what strategies have and have not worked, identifying the most promising approaches and making recommendations for how to expend energies and allocate resources in years ahead.

Our yearlong investigation concludes that strategies to reach adolescents and young adults are essential to preventing domestic violence, helping children become healthy and productive adults, and strengthening our communities. Many programs today focus on helping adult victims, and prevention has a lesser emphasis if it is addressed at all. Too few services are geared to lower income communities, which are most affected by family violence. And not enough attention has been paid to finding ways to stop the intimate partner violence that pervades – and sometimes shapes – the lives of adolescents and young adults.

This Report identifies strategies that can close those gaps and that offer great promise to deter battering. Some are being utilized today. Others are just now being tested. Still others are only now being conceived. These strategies target teens, young parents and their children, young people exiting foster care and the penal system, and serious offenders. They focus on changing social norms and promoting healthy relationships through social marketing and community building. They include: new and expanded curricula; a more intentional focus on violence prevention; after-school programs that aim to build healthy relationships; high quality early education and child care; programs for teenage boys and young fathers; and greater efforts to help young people when they return to the community from foster care, detention or prison.

It is rare for those of us in violence prevention to have the chance to investigate the emerging body of knowledge on this issue. We spend so much time educating various sectors of the public and seeking critical resources that we rarely have the luxury of time to investigate our own field in-depth. Producing this Report gave us a precious opportunity to do just that. We thank the William and Flora Hewlett Foundation for initiating the Report and for providing invaluable guidance and support as it developed. We also thank the many experts, service providers and survivors who generously gave their time and shared their expertise to help shape this document. And we thank the Report's author, Ann Rosewater, who brought vast expertise and tireless energy to this project.

The Family Violence Prevention Fund issues this Report with great hope – that it will invigorate the debate, broaden perspectives, spur new ways of thinking, and invite new allies into the essential work to prevent domestic violence. We are convinced that solutions truly are within reach. Our greatest hope is that this document will inform, enlighten and inspire those of us who work – today and in the future – to build a society in which all women and children can live free of violence.

ESTA SOLER

PRESIDENT

FAMILY VIOLENCE PREVENTION FUND

Preface

In 2001, I was asked by the Hewlett Foundation to design a potential new program focused on children and youth. I began by asking hundreds of committed program directors, advocates, and researchers “Why, despite years of government and foundation efforts, do so many children still have bad outcomes?” While people pointed to a variety of potential causal factors, a theme that emerged over and over was the damage done to children by the amount of violence in their lives, especially family violence, and the failure to address that violence.

I therefore asked Esta Soler and her colleagues at The Family Violence Prevention Fund (FVPPF) to develop recommendations on how to significantly reduce the amount of family violence experienced by children and youth. The FVPPF team was uniquely qualified to examine these questions. FVPPF chose Ann Rosewater to lead this effort.

“Promoting Prevention, Targeting Teens: An Emerging Agenda to Reduce Domestic Violence” contains the findings from their extensive and creative investigation. The findings are powerful and persuasive—exposure to family violence is seriously impairing the development of large numbers of children. Moreover, it is clear that violence disproportionately affects adolescents and young adults and is directly linked to many bad outcomes for this group, including dropping out of school, delinquent behavior, and early childbearing.

The Report also finds that, while much research and experimentation is still needed, there are very promising strategies for reducing this violence. It provides a thoughtful agenda with respect to program development, research, and advocacy.

The Report calls upon the domestic violence community to look at issues of prevention in new ways. But the message is not just for those individuals and organizations whose work focuses on family violence. It is clear that domestic violence is related to school success, ability to connect to the labor force, delinquent behavior, and substance abuse by youth. We will not make significant headway in helping all youth make a successful transition to adulthood unless schools, health systems, and the juvenile justice, child welfare, and workforce preparation systems address the impact of violence on youth.

“Promoting Prevention, Targeting Teens” provides the groundwork for new efforts that could significantly improve the wellbeing of children and youth. We hope that foundations and governments will help those efforts move forward.

MICHAEL WALD
SENIOR ADVISOR TO THE PRESIDENT
WILLIAM AND FLORA HEWLETT FOUNDATION

Acknowledgements

Many individuals provided useful insights into the conception and development of *Promoting Prevention, Targeting Teens*. First and foremost, I am grateful for the contributions of Michael Wald of the William and Flora Hewlett Foundation. He recognized that the capacity to form and sustain healthy relationships is a critical element of achieving a productive adulthood and that far too many young people face daunting impediments on that journey. He wisely sought out the innovating spirit of the Family Violence Prevention Fund and its President, Esta Soler, to provide insight into pursuing new ways to eliminate intimate violence in the lives of adolescents and young adults. And he persisted, through many drafts, in identifying the key points and opportunities that could lead to a new agenda for action.

Esta Soler has been my constant collaborator and co-coordinator throughout this exploration. Her knowledge and understanding of the domestic violence field, her openness to questioning long held assumptions, and her talent for incisive inquiry and probing beyond traditional boundaries have made this investigation challenging, penetrating, fun and hopeful.

Scores of interested and knowledgeable individuals: activists, advocates and survivors, service providers, media specialists and researchers from many fields—domestic violence, child and adolescent development, criminal justice and community building—shared their experiences and expertise. We appreciate the interest and valuable perspectives shared at focus groups hosted by Chapin Hall Center for Children at the University of Chicago, Yale Child Study Center, Wellesley Centers for Women and the Urban Institute. Several distinguished researchers—Hiro Yoshikawa and Elisa Rosman of New York University, David Kennedy of Harvard University’s John F. Kennedy School of Government, and Martha Burt and Jeanine Zweig of the Urban Institute—also contributed essential background papers that undergird the final report.

Foundation, university and nonprofit leaders—Lisa Kane at the Annie E. Casey Foundation, Susan Schecter at the University of Iowa, Susan Notkin of The Center for Community Partnerships in Child Welfare for the Study of Social Policy and Janet Carter of the Family Violence Prevention Fund read and provided insightful critiques and valuable comments on the investigative frameworks as well as several drafts of this document. Jeffrey Edleson at the University of Michigan added significant comments during the final stages of the document’s drafting. During her tenure at the David and Lucile Packard Foundation, Lucy Salcido Carter advised during the project’s development and was an astute reader of the report’s many drafts; subsequently, as a consultant to the Family Violence Prevention Fund, she provided cogent editing to make the report accessible to the reader. Lauren Asher, a consultant to the William and Flora Hewlett Foundation, added final editing touches to give the document clarity and polish. Marissa Dagdagan enthusiastically and carefully checked the footnotes, Doniece Sandoval created the overall design, and Jeffrey Betcher managed the production of the document with efficiency and good humor.

All the colleagues and collaborators, informants and funders who contributed so much to this work share a strong commitment to enhancing the wellbeing of children, teens and young adults by stemming the intimate violence that too often leaves lasting scars. I have tried to convey their wisdom, dedication and sense of urgency, but in the end, I alone remain responsible for any misinterpretation or errors of fact.

ANN ROSEWATER

JULY 2003

Introduction

Over the past 25 years, we have seen remarkable advancements in recognizing that domestic violence harms millions of women, and in developing domestic violence responses and services. Despite this marked progress, there remain serious challenges to preventing domestic violence and reducing its impact on women and children.

At the invitation of the William and Flora Hewlett Foundation (the Foundation), the Family Violence Prevention Fund (FVVPF) began a yearlong investigation in 2002 to capture what is known about domestic violence and the effectiveness of current intervention strategies, and to explore opportunities for prevention.¹ The investigation included consultation with researchers, practitioners, and community leaders in a range of fields including child welfare, domestic violence services, criminal justice, and child and adolescent development. The process was designed to test new concepts and to stimulate dialogue and collaboration across fields.

Based on this investigation, we conclude that reaching children, adolescents, and young adults is critical to preventing domestic violence and ensuring that children grow up to be productive and healthy adults. Domestic violence responses thus far have focused principally on battered women, and to some extent on perpetrators. Although these are vital interventions, efforts to prevent and respond to domestic violence must also seriously address several other groups affected by domestic violence, including men, children, and, as we address here, especially teens and young adults.

Youth ages 16 to 24 are the most at risk of domestic violence of any age group. Teen dating violence is prevalent, and teens may also be exposed to domestic violence in their homes. Teens and young adults who are disconnected from social supports such as school, family, and work are at particular risk for domestic violence. A significant proportion of this age group are parents, and the stresses that they face increase their children's risk of exposure to violence as well.

To move domestic violence prevention work forward, we must integrate the latest research into the current knowledge base, reexamine old assumptions, and strengthen the existing framework within which the field operates. While acknowledging the important role of crisis and criminal justice interventions, domestic violence prevention efforts must also look beyond these interventions to new strategies. Engaging new constituencies in these efforts, such as teens and young adults, builds new lines of work that will be fruitful for the movement as a whole.

This Report begins with an analysis, in Chapter I, of current responses to domestic violence and challenges that must be met to make significant advances in the field. Chapter II describes why adolescents and young adults are an important population to reach. The third chapter summarizes what the research says about certain youth populations who are at particular risk of violence. Chapter IV reviews key themes in child and adolescent development literature that can be used as a basis for creating violence prevention strategies. Chapter V suggests steps for building a new domestic violence prevention agenda centered on promoting healthy relationships among teens and young adults. The FVVPF hopes that this Report will encourage a critical level of public dialogue and debate about how to reduce domestic violence in young people's lives.

Chapter I

Current Policy and Practice: Challenges for the Field

As the problem of violence between intimates has gained acknowledgement and understanding over the past 25 years, the range and scale of responses has also grown. Remarkable advances have been made including: increased recognition that the experience is real, pervasive and damaging to millions of women; development of a significant constituency; creation of a network of responses and services; and construction of a legal framework and infrastructure. However, the FVPPF's inquiry revealed serious challenges to achieving marked progress in eliminating domestic violence and its consequences for children. In order to see what must change, we first describe the current state of the field.

Prevention has largely been absent from policy and programs, which focus primarily on adult victims, crisis response and criminalizing domestic violence.

The domestic violence field has largely focused on adults and, among the adults involved, primarily on victims. Strategies have concentrated on responding to the immediate needs of battered women; educating the public about domestic violence; convincing the public that domestic violence is a crime; strengthening criminal sanctions against perpetrators; developing batterer intervention programs; and testing ways to coordinate community responses. This emphasis on systems that can create safety and, to a lesser extent, independence after victimization is consistently reflected in public policy. The vast proportion of public resources dedicated to addressing domestic violence have been spent on criminal justice responses and shelter and related services for battered women and their children.

The funds specifically targeted to address domestic violence are primarily federal and have grown markedly since passage of the Violence Against Women Act (VAWA) in 1994 and increases in Victims of Crime Act funding. Most are administered by the U.S. Department of Justice (DOJ) and used to support criminal justice programs, law enforcement strategies, and victim advocacy. Human services approaches receive considerably less funding and also focus principally on post-victimization services provided by a relatively limited and under-funded system of mostly shelter-based domestic violence service providers. Newer efforts to address domestic violence in the context of healthcare remain focused on women after they are victimized, are rarely publicly funded, and are not systematic.¹ To the extent that state funds have been used, they have followed a similar pattern.

In large measure, efforts to prevent domestic violence—by focusing on adults at risk of becoming victims or perpetrators, on preventing children's exposure to domestic violence, or on helping children and young people to achieve healthy nonviolent relationships—have been scarce. There are few relevant curricula available for school-age children.² Attempts to include positive parenting skills in shelters and batterer intervention programs are erratic and untested.³ Furthermore, focused public education campaigns aimed at young people are fledgling at best. Where any of these approaches are underway, they are reaching only a small number of people and have had only limited evaluation.

Strategies have not been sufficiently sensitive to the range of choices women need.

Most law enforcement, health, and social service strategies assume that battered women should, and will, leave their batterers. As a result, much policy and programming has been designed to create shelter and refuge for victimized women and their children, and to separate batterers from their victims through protective and restraining orders. David Kennedy describes the focus as a “heavy emphasis on helping victims avoid patterns of intimacy with abusers, disengage from abusers with whom they are involved, physically remove themselves from abusive settings, and *ex post facto*, address the damage created by abuse and patterns of abuse.”⁴

“Some domestic violence victims do not view leaving as the most desirable, safest, or even possible approach to protecting themselves or their children”

Some domestic violence victims do not view leaving as the most desirable, safest or even possible approach to protecting themselves or their children. For these women, there is no real choice between leaving with few resources and significant disruption to their children, and staying in familiar surroundings, even with the threat of continued violence. Such decisions are very dependent on individual and family circumstances, the stage of the pattern of violence, and what resources are available. In some locales, women are placed in shelters that are far away from their homes, forcing them to give up their jobs and take their children out of school to get the protection they need.⁵

Limited resources focused on men, including batterers.

Throughout the development of the movement to end domestic violence, there has been considerable tension between assuring that victims have the resources, protection and supports they need and addressing the needs and behaviors of those who victimize them. While interventions for batterers are gaining additional resources, these have come more recently. Although some states have quality standards for batterer intervention programs, others do not, and there is wide variability in the quality and effectiveness of these programs nationwide.⁶

Low-income communities have been neglected despite disproportionate experience of domestic abuse.

Violence between intimate partners spans geographic, age, income and ethnic boundaries. Nevertheless, low-income women experience violence at significantly higher rates than women of higher incomes.⁷ Protective assets and resources—such as mobility, financial resources, private physicians, responsive clergy, and other informal networks of support—are much less likely to be available to low-income individuals and communities. Current responses to domestic violence often fail to address women’s economic needs. Without job counseling and training, poorer women may not see leaving their batterer as an option. Women who do choose to leave may also have trouble finding and keeping housing beyond the shelter stay limits.

Current responses do not address persistent racial discrimination or allow for cultural differences.

The public systems charged with responding to violence—principally social services, police and courts—are widely perceived as being disproportionately punitive towards people of color. Women of color who are domestic violence victims may be reluctant to use these systems, especially if using them means incarceration for the batterer. Shelter and advocacy services have not been accessible to a wide range of non-English speaking, immigrant women. Efforts to generate responses that are both respectful of and sensitive to culture and race have emerged only in the past few years.⁸

Despite evidence of violent behavior beginning in adolescence, few are paying attention to partner violence during this formative period.

Little attention has been paid to “potential pathways to prevent exposure to domestic violence *per se*.”⁹ The most recent comprehensive report on youth violence addresses aggravated assault, rape and homicide, as well as the developmental pathways that lead to violence generally. However, it makes no mention of intimate partner violence among young people, or the pathways that lead to it.¹⁰

Schools and other mainstream institutions may be reluctant to address domestic violence because it is a family-related issue and also involves issues of sex and sexuality. Especially in working with younger adolescents, identity formation, gender relationships and exposure to family violence are often viewed as too sensitive. As a result, many opportunities to help young people forge positive norms and acceptable identities are lost. While a few federally supported school-based efforts to address dating violence have been developed and appear promising, they have been implemented and tested in very few places.¹¹

“Teens exposed to violence have few options within the fragile network of services for battered women.”

Teens exposed to violence have few options within the fragile network of services for battered women. While shelters often house younger children, many do not admit teenagers, especially boys. Few shelters accommodate teenage mothers and their children. One consequence is that domestic violence service providers and advocates have yet to develop programming for these vulnerable young people who may be at significant risk of being victimized or committing violence with their own partners.

Children, who are often affected by domestic violence, have received only limited attention in policy or programs.

Many adult victims and perpetrators of domestic violence are also parents. Their children may be affected by the violence in any number of ways. Evidence from battered women’s shelters suggests that women who take refuge in shelters often bring their children with them. The majority of shelter residents are children, usually under the age of 10. As noted above, battered women with teenagers are often turned away from shelters completely. Even where shelters have established programs for children, they have generally been designed to provide supervised activities without a specific therapeutic purpose.

There is increasing evidence that significant numbers of children are exposed to violence, and that at least a substantial portion of them may need special supports and attention. Still, mainstream programs for children rarely address the developmental needs of children exposed to violence. Teachers may not recognize that their students may be acting out in school as a result of such exposure.¹²

Childcare programs, schools, after-school programs, and health and mental health providers have begun to address domestic violence only recently, if at all.¹³ To the extent that they have made efforts, most are piecemeal, brief, and not evaluated. Interventions within the health care system are the most likely to have been evaluated.¹⁴ The other exception is Early Head Start, one of the largest programs for very young children, which began in the mid-1990s. While it does not specifically target domestic violence prevention, it is already showing promising results in addressing some of the associated risk and protective factors, including “increasing supportive parenting and decreasing detached and harsh parenting.”¹⁵

Current policy and practice are not outcomes driven, and there has been only limited evaluation.

Rigorous evaluation of programs and policies in the domestic violence field has been scant, in part due to the absence of clear, measurable outcomes.¹⁶ To a large extent, however, the lack of evaluation results from a lack of dedicated funding. Some research on the prevalence of domestic violence has been funded for several decades, but only since the passage of VAWA, have funds been specifically appropriated for research and evaluation of domestic violence programs.¹⁷ The program that supports shelters and related services, administered by the U.S. Department of Health and Human Services (DHHS), still has no dedicated research and evaluation resources.

Consequently, law enforcement policies have been implemented, health screening and services have been instituted, and social services have been provided; but there is no comprehensive plan in place to determine if these strategies are effective, for whom, and under what circumstances. In recent years, researchers have begun to conduct more rigorous evaluations of specific strategies, and there are several thoughtful meta-analyses and literature reviews that capture the key findings from the field.¹⁸ Such research holds promise for shaping outcome-based policy and program strategies for the future. Yet, there is still very little research on how effectively current programs *prevent* future domestic violence. It is not well understood, for example, whether current services have contributed to the decline in the prevalence of domestic violence over the past decade.

From our investigation, it is clear that the field faces major challenges in moving forward effectively to reduce the amount of domestic violence, as well as meet the needs of current victims. In the remainder of this Report, we focus on two major issues—the need for more prevention and the desirability of focusing resources on violence in the relationships of adolescents and young adults.

Chapter II

Domestic Violence in the Lives of Children, Adolescents, and Young Adults

Children, adolescents and young adults are significantly affected in numerous ways by intimate partner violence—as victims, perpetrators, or household members. Involvement in, or exposure to, violence between intimate partners significantly impairs development in many spheres. Evidence suggests that violence is one of the key barriers preventing many young people from forming lasting relationships, feeling good about themselves, and participating productively in school or the workforce.¹ Experiences of violence, including intimate partner violence, are especially prevalent among adolescents. In addition, many of the most vulnerable adolescents and young adults are themselves parents. Thus, there is a need for much more attention to this age group.

Significant numbers of young children are exposed to domestic violence, potentially compromising their healthy development in serious ways.

While estimates of prevalence vary significantly, it is clear that millions of children are exposed to domestic violence annually.² Recent research suggests that young children are more likely than older children to be present in homes with domestic violence, and more likely to be exposed to multiple violent incidents as well as to substance abuse.³ Using a nationally representative sample of Head Start programs, which serve children aged 3 to 5, researchers found that 17 percent of the low-income children studied had been exposed to domestic violence.⁴

“Children who experience domestic violence are more likely than their peers to suffer behavioral and emotional problems and delays in cognitive functioning.”

Domestic violence is not a series of unrelated incidents, but is a patterned, persistent, and cumulative process. Zweig and Burt postulate that violence that escalates over time may pose especially serious and negative consequences and more complex safety concerns for the primary victims, as well as for child witnesses.⁵ For children, exposure to domestic violence is likely to be recurring against someone who protects and cares for them, and perpetrated by one of their caregivers.

Research is accumulating on how children are affected by exposure to violence between their primary adult caregivers. While the definitions and methodologies vary,⁶ most studies find that children who experience domestic violence are more likely than their peers (in otherwise similar circumstances) to suffer behavioral and emotional problems, delays in cognitive functioning, and other harms.⁷ Edleson, who has conducted recent reviews of the research, found that similar proportions of children who are exposed to domestic violence do not exhibit negative consequences, but the factors contributing to their resilience are not well understood.⁸

Edleson also found that a significant proportion of children who witness violence may have long-term developmental problems, including depression, trauma-related symptoms, and low self-esteem.⁹ Drawing on the few available prospective studies, as well as retrospective studies, Yoshikawa and Rosman

find that “being a victim of early violence and witnessing violence have also been found to predict later perpetration of domestic violence.”¹⁰

Teenagers who are exposed to adult intimate violence are also at risk of significant behavioral and emotional consequences. In an article reviewing the 31 most rigorous studies on children who witness adult domestic violence, Edleson cites two studies that speak to the effects on adolescents. First, a study of young adolescents in the Cleveland region found that “recent exposure to violence at home...was one of the most significant predictors of a teen’s use of subsequent violence at school or in the community.”¹¹ Another study compared incarcerated adolescent boys who had or had not been exposed to violence at home. The boys who had been exposed believed more than others that “acting aggressively enhances one’s reputation or self-image.”¹² Other research has also found that teenagers who are exposed to violence are more apt to exhibit violent behavior, frequently as “preemptive strikes in the face of perceived threats.”¹³

Intimate violence is prevalent in the lives of adolescents and young adults.

Crime victimization surveys report that adolescents and young adults experience the highest degree of intimate violence of any age group. Surveillance data consistently indicate that 16 to 24 year old women are the most highly victimized group.¹⁴ Yoshikawa and Rosman also cite community samples of teens and young adults indicating that “about one third of all respondents engage in physical violence against their partners.”¹⁵ A recent study of female public high school students in Massachusetts

found that about one in five has experienced physical and/or sexual dating violence.¹⁶ Young women, especially young mothers, are particularly vulnerable to intimate partner violence. One study found that 26% of new mothers between 13 and 17 years old experienced intimate partner violence in the three months after the birth of their child.¹⁷

“Community samples of teens and young adults indicate that about one-third of all respondents engage in physical violence against their partners.”

It is useful to consider the intimate violence that young people experience—whether as victims, witnesses, or perpetrators—in the context of the multiple types of violence that pervade their lives. High rates of young people both commit violence and are the victims of crime. While there has been notable progress in reducing homicides and arrests among youth during the past decade, there are also indications that youth violence in general is continuing at a high rate. Confidential self-reports by young people in the late 1990s indicate that the prevalence violent acts by youth remained unchanged, and occurred at a considerably higher level

(10 times greater) than suggested by official crime statistics.¹⁸ An estimated 30 to 40 percent of male and 15 to 30 percent of female youth report having committed a serious violent offense at some point in their lives.¹⁹ A significant proportion of young people who have engaged in violent behavior will not come to the attention of the justice system at all. Among those who are reported, most will not be arrested.²⁰ Many studies indicate that serious violence co-occurs with other problem behaviors, including substance use, gun ownership, dropping out of school, early sexual activity, reckless driving, and the commission of property crimes.²¹

While the public's image of teens is primarily as perpetrators of all types of violence, it is clear that adolescents and young adults are also a highly victimized group. A recent study demonstrates that teens are victimized at home, at school and in the community. Based on data from the Adolescent Health Survey, it found that about 20 percent of teens surveyed in 1995 reported being victimized by a violent crime, a considerably higher percentage than reported in the National Crime Victims Survey.²²

Young women are especially victimized by sexual crimes. While juveniles (males and females ages 17 or younger) made up only 26% of the population, they accounted for 71% of all sex crime victims in 12 states, according to an analysis of 1997 National Incident-Based Reporting System (NIBRS) data.²³ Additional evidence of teens' victimization emerges from child abuse and neglect reports. According to the national child abuse reporting system, an estimated one in four of the substantiated child abuse and neglect reports represents—close to a quarter million annually—involved a teenage victim.²⁴ The DHHS reports that in 2000, the national rate of victimization for children aged 12 through 15 was 10.4 per 1000, and for 16 and 17 year olds, 5.8 per 1000. Neglect, the most frequent form of child maltreatment, may accelerate vulnerability to additional victimization or to perpetration of violence.²⁵

In sum, a significant proportion of young people are involved in domestic violence in some way: as witnesses of adult violence, as victims of intimate violence at the hands of other youth, or as perpetrators. These experiences can seriously impair their social relationships, their learning, and their opportunities for healthy and safe development into adulthood. Among young people, some are more vulnerable than others to involvement with violence and thus more appropriate for targeting interventions. We look at these groups next.

Chapter III

Vulnerable Teens and Young Adults

Intimate violence is all too common among teens and young adults. Yet efforts to protect them, ameliorate harm they may experience, or prevent patterns of violence from emerging in the first place have been largely absent from the agenda of domestic violence reduction. Our investigation led us to look more carefully at young people not only because they are at such high risk for becoming victims or offenders, but also because adolescence is a formative developmental period.

Applying a child development lens, Yoshikawa and Rosman make a strong case for focusing on early adulthood (from the late teens to the mid-twenties). This group includes “individuals who have not yet begun dating, dating couples, young parents who are having their first child, and families with infants or young children. Patterns of intimate relationship violence have not had as much time to develop in teens as they have in older individuals.”¹

The most vulnerable of these adolescents and young adults are also generally isolated from mainstream institutions, except possibly school or welfare. Too often, they are connected to or transitioning out of difficult settings such as jails, gangs, foster care, juvenile detention, or prison. In addition, many are young parents who may not have access to information or support regarding positive parenting.

Because much violent behavior begins in early adolescence, focusing attention on 10 to 15 year olds will be a valuable adjunct to stemming domestic violence in 16 to 24 year-olds. Early adolescence is a

“Child Trends estimates that approximately 5.6 million young people 14–24 could be considered ‘vulnerable.’”

period of very rapid growth and development, when issues of gender and sexual identity are salient, and most young teens are still connected to family and school. These characteristics of early adolescence create critical opportunities to promote positive social interactions and healthy relationships.

As a framework for understanding new violence prevention strategies, we next describe what is known about especially vulnerable populations of older adolescents and young adults, and explore the reasons why early adolescence, as a critical period of development, may be an especially opportune period for interventions.

Older Adolescents/Young Adults

Child Trends, a non-profit research organization that studies children, estimates that approximately 5.6 million young people ages 14 to 24 could be considered “vulnerable.” They include young people who are out of school and unemployed, youth with incarcerated parents, welfare recipients and youth leaving incarceration or foster care. Many of these groups overlap.² As a whole, this population is at high risk for violence or victimization. As discussed elsewhere in this Report, we found that violence, including domestic violence, is not only common to the lives of adolescents, but is also associated with poverty, tenuous attachment to work, and low educational attainment. Exposure to adult intimate violence can also affect teenagers’ emotional development and social behavior.

Some of these “vulnerable young people” are particularly susceptible to experiencing domestic violence. They could be victims or batterers, or have a history of exposure to abuse. Those at highest risk include youth transitioning from foster care, young people in the juvenile justice system, teens connected to gangs, participants in fatherhood programs, individuals reentering communities after incarceration, and young people in immigrant and newcomer communities. All of these young people are also at risk for teen pregnancy and parenting, are often still dealing with their own challenges, and are not prepared for the responsibilities of parenthood. We describe three particularly vulnerable groups below.

Young parents

Young women and men who become parents as teens or young adults are often more vulnerable than if they waited until they had more emotional maturity and financial security. In 2000, there were nearly 480,000 births to young women under age 20; of these, 22 percent were repeat births.³ Far too many of these young parents experience domestic violence at the hands of an intimate partner during pregnancy or early parenting.

Young mothers on welfare appear to experience domestic violence at very high rates. In a representative sample of teen mothers on welfare in Chicago, 55 percent experienced some level of violence at the hands of their boyfriends in the previous 12 months; 41 percent of these experienced “severe aggression,” 32 percent experienced “physical aggression,” and 27 percent experienced “verbal and/or symbolic” abuse. The rate of abuse experienced by the youngest girls (ages 11 to 15) in this study was higher than among young teens in the general population.⁴

“One study found that 26 percent of new mothers between ages 13 and 17 experienced intimate partner violence in the three months after birth.”

Both the child development literature and research on battered women’s health and mental health suggest that mothers’ sense of self-efficacy has marked effects on young children’s emotional and behavioral outcomes.⁵ Battering in adulthood, as well as earlier exposure to abuse, may also affect a battered mother’s capacity to carry out parenting functions.⁶ As summarized by Cohen and Knitzer, “Those who have been traumatized by violence may, like their children, become anxious, withdrawn or depressed. Under such circumstances, parents cannot respond spontaneously and joyously to their children, making it difficult for the children to develop strong, secure attachments to their parents. Substance abuse and domestic violence, which often co-exist with poverty and maternal depression, have especially negative consequences because of their impact on the ability of parents to provide needed nurturing.”⁷

Youth transitioning from foster care or juvenile detention

Among the most vulnerable young people in the nation are those who have been in foster care or juvenile justice institutions and are making the transition to independence. They may have entered these systems for any number of reasons, but regardless of the reason, placement in substitute care represents a significant disruption of their family and community life. Children entering these systems typically move from placement to placement over a period of time. Leaving these systems, if the

experience was a positive one, means moving out into the world, hopefully with continuing attention from former foster parents. Equally likely, however, is the scenario in which young people leaving foster care or juvenile justice institutions enter the adult world with few moorings, little connection to the workforce, and significant barriers to developing a strong personal identity and positive relationships.

Between 18,000 and 30,000 youth transition from foster care each year, but little is known about what becomes of them “beyond the fact that many drop out of high school and experience periods of homelessness.”⁸ Many of these young people return to their neighborhoods and communities, and some to their families, which are the same ones where a significant proportion experienced abuse or neglect. These young people need support to achieve “consistent and sustained relationships.”⁹

Child Trends estimates that approximately 457,000 youth ages 14 to 24 leave the juvenile justice system, federal and state prisons, or local jails each year.¹⁰ While most of these youth are male, delinquent girls may be at especially high risk of violence and being victimized again. They often associate with criminal men, and many are single mothers with fragile home and community situations.¹¹ A study of teen girls on probation in a California county found that 20 percent were victims of physical abuse, 17 percent were victims of sexual abuse, and over half said they had witnessed severe abuse or violence.¹² In another study in the same county of teen boys and girls entering juvenile detention, teens reported similarly high proportions of having been “physically hurt by someone in their home or someone close to them,” “forced to engage in sexual activity against their will,” or that “police or child protective service workers were called to their house as a result of domestic disputes.”¹³

Serious offenders

One particularly identifiable group of likely domestic violence offenders includes those who commit serious and multiple criminal acts.¹⁴ Yoshikawa and Rosman cite studies that reinforce the notion that there are “life-course persistent persons” whose antisocial behavior may begin in early or middle childhood, continue during the teenage years and endure into adulthood.¹⁵ These individuals are much more likely to be “violent in multiple contexts of their lives, including intimate relationships.” Based on his work with urban youth gangs, Kennedy also posits that it is possible to identify a group of serious and chronic offenders.¹⁶ This possibility is supported by the U.S. Surgeon General’s recent report on youth violence.¹⁷

Two strong predictors of violence are involvement with delinquent peers and gang membership. There is evidence that when violence is committed or experienced by young people who are involved with gangs, it often occurs in group settings.¹⁸ Still, there has been little attention paid to the prevalence or role of domestic violence in communities where such group violence is concentrated.¹⁹ In addition, both Kennedy and Fagan note that, in the past, law enforcement has not been consistent in its actions in dealing with serious offenders.²⁰ As a result, the consequences of involvement in violent crime are neither clear nor predictable to the perpetrators. Based on his research, Kennedy suggests various strategies that could address intimate partner violence as well as other violence among these serious offenders.²¹

Young Adolescents

Early adolescence—the period between ages 10 and 15—is a time of active physical, emotional and social change and maturation. Emerging evidence suggests that patterns of violence and victimization may develop in early adolescence, and that by middle to late adolescence such patterns are more difficult to reverse. “Although risk factors for violence vary by stage of development, most youth violence emerges during the second decade of life,” and can begin as early as age 10.²² Further, several important studies have found that problem behaviors in early adolescence are predictors of subsequent partner abuse.²³

“Patterns of violence and victimization may develop in early adolescence.”

There is little literature on the patterns of interaction among young adolescents, especially the development and patterns of friendship and intimate relationships. However, in the aftermath of several high-profile school-based killings by teenagers, the ways young adolescents relate to one another and their mental health needs have received more attention and resources.

Some school-based research on bullying and teasing suggests that identity formation and gender ideology may be important elements in dealing with violent behavior. A study of young adolescents from working and middle class white and Latino families found that both girls and boys come under pressures to conform to a gender ideology. Boys have pressures to prove themselves, to be masculine, and to demonstrate their identity very publicly. They “need to know what to do with a girl,” and have considerable fear of homosexuality. Girls, on the other hand, need to be “good girls” who are passive but also know how to protect themselves.²⁴

While there is a growing awareness of the need to strengthen girls’ identity, several researchers have highlighted similar needs for boys and young men. Boys and young men need support systems and safe places to develop alternative, culturally specific concepts of manhood that include nonviolence.²⁵ While some of the 8th grade boys in the Wellesley study argue that eighth grade is too late, the researchers themselves argue that middle school is the critical time to work with young teenagers about how to have healthy relationships.²⁶

Unlike older teens, who are more likely to be disconnected from mainstream institutions, young adolescents are typically still connected to institutions that make universal prevention approaches possible. The vast majority of youth in middle childhood attend school. An increasing proportion of these young teenagers also participate in some kind of after-school or summer group activity. Chapin Hall researchers indicate that primary services—voluntary programs that create expectations, consequences and norms—may provide useful settings and strategies for delivering positive developmental and social messages.²⁷

Based on our findings about vulnerable young people’s involvement with violence, we pursued an expansive investigation into what the current literature and experience suggest are the best ways to prevent such violence from occurring in the first place. There are many promising approaches. We review them next.

Chapter IV

Emergence of Promising Strategies

Over the past decades, a number of interventions have shown promise in enhancing the healthy development of children and reducing the likelihood that they will engage in violent or antisocial behaviors. They range from high quality child care for very young children, to supports for parents of newborns, to curricula more directly focused on relationship-building for teens. These programs provide a foundation for building new comprehensive strategies to prevent intimate partner violence among young people.

Most of the programs that have been favorably evaluated involve early and middle childhood, although some focus on adolescence. We discuss examples of those that appear most promising.

Promising Approaches for Young Children

For children under age 10, Yoshikawa and Rosman conclude that “programs that affected multiple pathways to delinquency appear to be the ones that have had long-term impacts on delinquency.”¹ Among the most effective are: high quality, center-based child care for 0 to 5 year olds; The Incredible Years program, which reduced aggressive behaviors in young children; and the PATHS curriculum, which reduced aggressive behaviors in middle childhood.²

“For children under age 10, ... ‘programs that affected multiple pathways to delinquency appear to be the ones that have had long-term impacts on delinquency’.”

Particular attention has been paid to home visiting which was designed to prevent child abuse. A wide set of variations on the home visiting strategy are currently in use.³ One model, developed by David Olds, uses

nurse-trained home visitors to target high-risk, first-time single mothers. It has been replicated and rigorously evaluated in a number of communities. In addition to reducing child maltreatment, this program has “proven effective in reducing children’s antisocial behavior at age 15...”⁴ Recent reanalysis of the data suggests that this approach has limitations when severe domestic violence is involved.⁵ This finding, however, suggests a critical opportunity to build on the model’s successes by more intentionally addressing the risks of intimate partner violence within this vulnerable population. Others note that home visiting programs may provide opportunities to observe whether domestic violence is present as well as to determine the capacity of both parents to keep their children safe and fulfill other key parenting responsibilities.⁶

On the clinical practice side, the most promising work is being conducted in small hospital-based programs that focus primarily on traumatized battered mothers and their young children. Through intensive counseling by skilled practitioners working with mother and child together, the mother’s parenting behaviors and the child’s cognitive capacities have both shown marked improvements.⁷ Two noted programs have become part of the recently established, federally supported Child and Adolescent Trauma Network. Over time, this network has the potential to expand and deepen the knowledge

base and practice guidelines for addressing the developmental needs of young children exposed to domestic violence, and for increasing the parenting capacities of the adults in their lives.⁸ One new effort will embed programs for young children (such as Head Start, child care, pediatric offices, and police response programs) with an understanding of domestic violence, and train caregivers in how to identify and respond to children's exposure.⁹

Recent evidence suggests that the ways parents interact with and support their children's activities in early childhood and school are critical to their children's success. Intensive, long-term parent involvement is the primary distinguishing characteristic of effective high quality early intervention programs.¹⁰ Studies, including one that looked at children attending U.S. Department of Defense schools, demonstrate that parent involvement in children's learning and in their schools is a critically important influence on academic achievement, regardless of socioeconomic status.¹¹

Promising Approaches for Adolescents and Young Adults

Some promising approaches have also been identified for adolescents. The *Safe Dates* intervention, which was tested in rural schools serving young teens in North Carolina, has one year follow-up data demonstrating changes in dating violence norms, gender stereotyping and awareness of community services. This multi-faceted intervention included a student theatrical performance, a multi-session curriculum, and services and supports for teens engaged in abusive relationships.¹²

Several other programs have been effective in reducing aggressive behavior, conduct problems, and substance use among adolescents. Some target teens who demonstrate high levels of aggressiveness; all of them include a component of family therapy. There also are universal programs, including the *Big Brothers/Big Sisters* mentoring programs and the *Quantum Opportunities* program, that have succeeded with different strategies in reducing reports of hitting someone else, initiation of drug or alcohol use, teen parenting, and arrests, while increasing high school completion and college acceptance.¹³ Renee Spencer, a Wellesley College researcher on resiliency, is finding that young people in the *Big Brothers/Big Sisters* programs also learn how to negotiate with people more effectively.¹⁴ Some of these interventions have been more widely tested than others. However, the fact that even some have proven effective in dealing with the most problematic behaviors suggests that properly conceived and implemented programs can make a difference in vulnerable young people's lives.

“Several programs have been effective in reducing aggressive behavior, conduct problems and substance abuse among adolescents.”

A few interventions focused on young adults, especially young parents, have also shown promise. One universal approach, the *Premarital Relationship Enhancement Program*, has reduced marital breakups and improved communication among the partners. Interventions targeted specifically to low-income welfare recipients have also recently shown an impact on domestic violence. The five year follow-up of the National Evaluation of Welfare-to-Work Strategies, and the three-year follow-up of Minnesota's *Family Investment Program*, found that these interventions reduced mothers' reports of domestic violence. A recent study suggests that increased employment and greater attention to support services by case managers may be critical factors in achieving these results.¹⁵

Finally, the most recent comprehensive report on youth violence, prepared under the aegis of the U.S. Surgeon General, strongly supports the notion that it is possible to successfully change behavior among adolescents involved in violent crime. Although none of the effective programs identified in the report specifically targets partner violence, their characteristics provide useful insights for the domestic violence field. Most of these programs address risks to individuals as well as the conditions in the community or other setting. They include individual skill building as well as changing the “climate” of a place. In schools, particularly, “interventions that target change in the social context appear to be more effective, on average, than those that attempt to change individual attitudes, skills and risk behaviors.”¹⁶ Observations from the *Project on Human Development in Chicago Neighborhoods* lend credence to the concept that addressing change within the community is a critical factor in changing individual behavior. Other research shows that “collective efficacy,” defined as mutual trust and a willingness to intervene for the common good, is the critical feature distinguishing low-crime neighborhoods from comparable neighborhoods with high crime. Efforts to build on community assets such as collective efficacy hold promise as violence prevention strategies.¹⁷

New Approaches to Deter Battering

In the criminal justice arena, various community policing and deterrence-based strategies have shown powerful results in reducing serious crime, homicide, and gun use by teens over the past decade or more.¹⁸ These strategies rely on consistent messages from a wide range of stakeholders, new roles and responsibilities for police and other law enforcement officers, and new technologies that enable more precise targeting of patterns and geographic areas of violence. In some communities, such as Boston which undertook *Operation Ceasefire*, a wide range of key community leaders gave legitimacy to the notion that the police were serious about enforcement that consequences were real, and that help was available as an alternative to violence.

To date, these new approaches have rarely included domestic violence as a crime for which serious offenders understand there will be consequences. David Kennedy, who has been particularly instrumental in creating innovations to reduce homicide among urban youth gangs, postulates that some of the same strategies may apply to the most serious domestic violence offenders. He suggests more effective use of information in the public domain (for example, data from service-based interventions and supports, restraining orders, and arrests), more aggressive gathering and use of information from victims and frontline workers, and clear and consistent messages about expectations, behavioral parameters and consequences. His approach also involves many segments of the community, providing legitimacy to the effort and offering young people consistent messages from multiple sources.¹⁹

A few locales throughout the country have developed intervention programs specifically for adolescents who have perpetrated intimate partner violence.²⁰ These programs, too, provide consistent messages to young people that domestic violence is not acceptable and hold them accountable for changing their behavior. Such programs should be evaluated to determine their effectiveness in preventing further violence by these teens.

Promising Approaches to Reaching Marginalized Groups

There is a new set of programs that reach very vulnerable and marginalized groups, including young fathers who are disconnected from their children and the mothers of their children, youth leaving the child welfare system, and young men who were incarcerated for drug offenses and are returning to the community. Early efforts to reach marginalized young men and fathers did not invite them to address domestic violence directly, but to share their values and shape the lives of their children. Preliminary evidence demonstrates that this approach enabled these young men to see a role for themselves with their children, and has engendered a positive response.²¹ Recent polling suggests that, in general, men respond well to the notion that they are role models who can steer boys away from abusive behavior.²²

Some of the programs designed to assist marginalized young men and teens include responsible fatherhood programs, independent living programs and prisoner reentry programs. While many of these programs are relatively new and few have been evaluated, some, such as independent living programs for young people transitioning out of foster care, have garnered significant federal resources. Others, such as the *Jim Casey Youth Opportunities Initiative*, are testing the use of financial supports, such as Individual Development Accounts, for youth transitioning out of foster care. Links to financial resources may provide a critical incentive for behavior change and development of healthy relationships, especially if the connection is intentionally highlighted and supported.²³

“In general, men respond well to the notion that they are role models who can steer boys away from abusive behavior.”

While these interventions to reach at-risk youth and young fathers have not focused specifically on reducing domestic violence, they should be examined to see if they can be used for this purpose. Engaging young fathers through an examination of the role of fatherhood and the effects of domestic violence on children may be a particularly promising approach for prevention.

Interconnections between Domestic Violence and Poverty

In designing programs that address the needs of young people, it is necessary to consider the evidence that domestic violence may be intertwined with structural factors that prevent young people from leading productive lives as adults. Poverty may increase the likelihood of perpetrating domestic violence. Being a victim of domestic violence may prevent many youth from connecting successfully with school or the labor force.

A number of studies have identified poverty, high unemployment or community-wide environmental stressors as possible predictors of when and where violence and victimization may occur. The DOJ has noted a significant link between poverty and increased incidence of domestic violence. The agency reports that in 1992-3, “women with an annual family income of under \$10,000 were more likely to report experiencing violence by an intimate than those with incomes over \$10,000.”²⁴ And a review of several studies has shown an important association between welfare receipt and physical abuse.²⁵

Conditions such as intermittent employment, recent unemployment, and having less than a high school education have also been linked to a higher likelihood of injury during domestic violence episodes.²⁶ Girls whose boyfriends lack a high school diploma are more likely to experience high levels of domestic violence than are other girls.²⁷

The developmental literature also suggests associations between low levels of human capital²⁸ and higher levels of domestic violence. Yoshikawa and Rosman conclude that *both* family-level poverty *and* neighborhood-level poverty affect life-course antisocial behavior.²⁹ A combination of risk factors has been identified as contributing to violence, including low income, exposure to violence, low acceptance within family and/or peer group, and low risk of consequences (from family, peers, or law enforcement). While more research is needed to identify the relative contributions of these different factors, it may be the combination of risks, not any single one, which increases the likelihood that a young person will become violent.³⁰ The impact of poverty definitely must be considered in designing prevention and intervention strategies.

Chapter V

Toward a Next Generation Agenda

Violence is all too common in the lives of adolescents and young adults. It can inflict both physical and emotional damage, and can be an obstacle to pursuing or remaining in school or a job. Violence also severely compromises young parents' capacity to nurture their children, affecting the development of the next generation. As the promising programs described above imply, it is both important *and* possible to address the harmful consequences of intimate partner violence in young people's lives. Based on these findings, and on the need to modernize the conceptual framework for domestic violence prevention, we suggest several new strategies to eliminate intimate violence in the lives of teens and young adults. By focusing on this group, we can improve the odds for the next generation as well.

An effective strategy must be based on developing appropriate supports for advancing healthy development and preventing violent behavior among teens and young adults. Such supports

maximize the likelihood that vulnerable youth will participate in education, training, and work experiences that lead to decent and stable employment. They also help young people build healthy social and intimate relationships. Programs for youth should seek specific outcomes, including reductions in intimate partner violence, increases in positive parenting, and greater stability and success in education, training, or work.

“Programs for youth should seek specific outcomes, including reductions in intimate partner violence, increases in positive parenting, and greater stability and success in education, training or work.”

The following program and policy recommendations focus on four groups: young parents; youth transitioning from foster care and incarceration; serious offenders; and young adolescents. We also recommend two more general activities to complement targeted programs: engaging communities willing to try new approaches; and developing social messages aimed at changing societal norms. These activities will provide a significant base in which to set new programs, build organizational and community capacity, and develop policy for each of the targeted groups.

Build the field of intimate violence prevention for adolescents and young adults.

It will take significant work over the coming years to create a coherent field focused on preventing intimate violence. This must begin by emphasizing the importance of working with adolescents and young adults and broadening the constituency for a prevention approach. Other essential early steps must include knowledge-building, practice and policy development, and the creation of networks of interested researchers and policy leaders. We will also need to engage a broad group of stakeholders in dialogue about these new approaches. Over time, we can not only add a significant new component to the domestic violence field, but also embed intimate violence prevention in adolescent and child development and family-centered research, practice and policy.

Building Knowledge

Much more needs to be learned about the characteristics of older adolescents and young adults who may be involved with or at risk of intimate violence. We need to find creative ways to reach these vulnerable young people, many of whom may only be tenuously connected, if at all, to mainstream institutions such as schools or employers.

We can considerably improve our understanding of who and where these young people are by applying a new lens to existing longitudinal surveys and other data. We need to better understand, for example, who among 16 to 24 year olds may be perpetrators, victims, or witnesses of intimate violence. In addition, we need to develop a more detailed inventory and analysis of specific policies, programs and communities that offer opportunities and new strategies for meeting the needs of these vulnerable youth.

While more is known about younger adolescents, ages 10 to 15, there are still significant gaps in understanding. In particular, we need to learn more about early adolescent development with regard to identity formation, gender ideologies, development of romantic relationships, and opportunities to shape or reconstruct positive norms.

Another way to gain insight into early adolescence is to conduct focus groups and interviews with diverse groups of young people. Such direct interaction with younger adolescents can help us understand how they perceive violence in their families and in their relationships. Direct engagement with youth is also an essential tool for identifying and developing effective messages and incentives for specific audiences, and for learning what media, messengers and institutions can deliver those messages most effectively.

“For young parents, programs that provide links to education and employment may be especially promising targets for prevention messages.”

stand how they perceive violence in their families and in their relationships. Direct engagement with youth is also an essential tool for identifying and developing effective messages and incentives for specific audiences, and for learning what media, messengers and institutions can deliver those messages most effectively.

Because parents play a critical role in guiding younger adolescents’ social and emotional maturation, it may also be useful to conduct focus

groups with the parents of 10 to 15 year olds. Hearing how they perceive their children’s relationships and behavior will help us identify opportunities to involve parents in reinforcing healthy relationships, and develop effective parenting resources.

Developing New Program and Policy

In addition to knowledge development, several areas are ripe for designing new programs and policy. Our recommendations are organized according to the particular group of young people each involves.

Older adolescents/young adults

Supporting young parents. Young parents are more vulnerable to relationship violence than older adults, and it is critical to reach them as early as possible. Many young mothers and fathers also have limited education and tenuous attachments to work, which are risk factors for their children as well. Opportunities exist to significantly strengthen programs that are already effective in working with young parents, but have yet to address the relationship norms that are so crucial for child development and stable adulthood. The anticipation of and the birth of a child can serve as a motivating time for

parents to connect to education and work, either in recognition of the need to support a family or as a result of Temporary Support for Needy Families (TANF) and child support requirements. Thus, programs that provide links to education and employment may be especially promising targets for prevention messages.

Separate, though related, strategies may be necessary to reach pregnant and parenting teen girls and young women, as opposed to teen boys, young men and young fathers. One approach to connecting with young mothers is to be much more intentional about dealing with domestic violence in existing programs. This may involve embedding promising models of early engagement with abused mothers, their abusers, and their children in programs such as home visiting programs, *Early Head Start*, *Head Start*, child care, fatherhood programs, and *Healthy Start/STRIVE*. Another approach involves strengthening self-efficacy among pregnant girls and young women as a way to improve parenting skills and reduce violence.

On the policy front, the recently developed, federally supported Child and Adolescent Trauma Network (the Network) is generating a robust group of research and practice venues across the country. The Network may yield useful findings and promising practices, and help identify when these emerging activities will be ready for dissemination and adaptation to other settings. It may also be possible to bring these findings and practices to bear on 16 to 24 year olds by strengthening the law and policy that established the Network.

Since teen boys and young men at risk of early fathering are often difficult to locate and engage, it is critical to think expansively about how and where to reach them. One approach for consideration involves incorporating violence prevention, healthy relationship building, and parenting skills into independent living programs, responsible fatherhood programs, batterers programs and prisoner reentry programs.

A series of federal and state programs that currently reach low-income and minority young women and men may also provide new opportunities and incentives for domestic violence prevention. These include: TANF, Child Support Enforcement, Family and Medical Leave, and the Workforce Investment Act. These laws provide opportunities to consider domestic violence prevention in the context of policies affecting marriage, child support, employment training, work, and financial supports for young parents.

Supporting Young People Transitioning from Substitute Care to Independence. Older adolescents and young adults who are leaving the child welfare system or exiting the penal system are highly vulnerable to victimization and abuse. They already have histories of disrupted lives and relationships. They are entering or reentering society with few support systems and few positive connections to family, peers, school or employment. Several new initiatives are developing to provide supports and services to youth transitioning to independence from foster care, and to incarcerated individuals who are reentering the community. Violence prevention and cessation strategies and parenting supports should be incorporated into programs serving these at-risk groups. Such programs include federal and foundation-sponsored independent living programs for former foster children, as well as prisoner reentry programs especially for juveniles and young adults. A set of federal and state laws governs many of these and other programs that reach young people in institutional and transitional settings. It is essen-

tial to investigate the full range of potential policy opportunities and incentives for domestic violence prevention contained in these laws and programs.

Stopping Intimate Violence by Serious Offenders. A small group of serious offenders perpetrates a significant proportion of all violent crime, including many different kinds of violence. Some recent, innovative efforts have succeeded in drastically reducing serious crime, especially homicide, by these offenders, yet domestic violence has not been one of the crimes of focus.

It may be possible to select a small number of communities and identify what processes and resources they need to develop and implement *both* community-driven supports *and* sanctions for these offenders. Communities that already have mechanisms for local organizing around domestic violence prevention will be promising places to try this approach.

Some communities have ongoing initiatives to stop gang violence, which often involves serious offenders. Another strategy worth trying is to add domestic violence as a focus for such initiatives and to monitor the results.

Various federal and state programs involve law enforcement strategies related to serious offenders, including batterers. Domestic violence prevention activities might be built into these laws and programs to strengthen the clarity and consistency of messages that offenders receive, and to ensure that a range of supports is available. Developing or expanding interventions that help batterers get employment training, work, and parenting education will also build a base of constructive alternatives for violent young people.

Young adolescents

It is also important to support efforts that focus on younger adolescents (ages 10 to 15) at high risk of early parenting and/or relationship violence. For this age group, creating norms of healthy relationships,

“We recommend focusing innovations [creating norms of healthy relationships, helping establish positive identities, and focusing on intimate partner violence] in school and community-based after-school and summer activities.”

helping establish positive identities, and focusing on intimate violence prevention can be done through mainstream institutions and activities in which young people are already involved. Given the sensitive nature of the issues, and the increased focus on academic learning during school hours, we recommend focusing these innovations in out-of-school experiences,

especially school and community-based after school and summer activities.

In selected communities, school district-wide programs (such as team sports, *New York City Beacons*, *The After-School Corporation*, and *LA’s BEST After School Education, Recreation, and Enrichment Program*) provide strong foundations for incorporating violence prevention strategies. In other communities, it may be more appropriate to embed these approaches into programs provided by independent organizations

(such as *YouthForce*, *City Year*, *Boys and Girls Clubs*, *Girls, Inc.*, and intensive youth theatre and arts programs such as those highlighted by the *Coming Up Taller* awards). Two curricula that have been evaluated favorably, rural North Carolina's *Safe Dates* Project and Austin's *Expect Respect* program, provide a departure point for replication in other settings. These intimate violence prevention activities should be tied to broader social marketing campaigns that reach the larger community and reinforce the norms, values and behaviors that the activities seek to teach.

Another essential focus of investment should improve the capacity of those who work with young adolescents to guide them in non-violent relationships and identity formation. Intensive professional development is needed for teachers, coaches and after-school youth workers on the following issues: adolescent development; the implications of relationship violence for adolescent development; the potential consequences of exposure to violence in the home; and how to refer adolescents who have been exposed to violence to appropriate services. Innovative educators, such as those who developed the Museum of Tolerance, may be creative collaborators in developing and implementing such training.

Finally, there are significant, publicly supported programs that may provide openings to strengthen policy. Efforts should be made to investigate opportunities to foster positive identity formation and domestic violence prevention activities, as well as for professional development, in federal and state programs such as *21st Century Community Learning Centers* and the Child Care and Development Block Grant.

Other Concurrent Strategies

Strengthening community assets and engaging community partners

Two processes should proceed concurrent with expanding the knowledge base and designing interventions for targeted groups. First, it will be important to identify communities interested in testing new approaches and to link them with other ongoing efforts. These communities should bring a combination of need, as determined by income, diversity, levels of violence and other factors, as well as assets, such as active national and local partners, community-based organizations open to new approaches, and a positive state and local policy environment. Communities currently engaged in related innovations may be especially open to participating in such an effort. Such communities include, for example: neighborhoods using new community policing strategies; communities with intensive, coordinated youth-focused efforts; neighborhoods testing coordinated community responses to domestic violence; localities developing community partnerships in child welfare; and the Annie E. Casey Foundation's *Family to Family* and *Making Connections* sites.

Crafting social messages

A second parallel process involves message-building. It will be useful to begin early to develop and promote population-specific messages designed to change social norms among vulnerable teens and in fragile communities.

Public campaigns, community education and targeted media messages over the past decade have raised considerable awareness about the prevalence and seriousness of domestic violence. Polling conducted for the Family Violence Prevention Fund, which has developed and sponsored the most systematic and widespread social marketing campaigns to address domestic violence, have shown increasing aware-

ness and understanding of domestic violence.¹ More recent polls show that respondents are beginning to act on this new understanding, and are particularly interested in talking with boys about violence against women and girls.²

Preparing the way for targeted social marketing requires considerable development time to select appropriate technical partners, conduct polling and focus groups, consider media or other communication vehicles, and test potential messengers and messages. The information gleaned through this research phase will also contribute significantly to the knowledge base about young people: their perceptions and understandings of violence and healthy relationships, their aspirations, and opportunities for their engagement.

“The goal is to develop messages and social marketing activities that complement prevention and intervention strategies for specific populations.”

The goal is to develop messages and social marketing activities that complement prevention and intervention strategies for specific population groups and communities. These targeted social marketing campaigns should build on successful social marketing activities in the domestic violence field, as well as other efforts aimed at adolescents, particularly teen pregnancy prevention and HIV/AIDS prevention campaigns. As the new campaigns get underway, it is essential to monitor for whom and under what circumstances they are effective. Ongoing evaluation will provide a basis for adjustments that can improve overall effectiveness. We should also test, in selected communities, the combined effects of targeted social marketing with the intensive on-the-ground prevention and intervention strategies described above.

Conclusion

The William and Flora Hewlett Foundation has enabled the Family Violence Prevention Fund to conduct a wide-ranging investigation of current activities to stem domestic violence, and to develop new ideas that can contribute to that goal. Through this in-depth inquiry, several disparate strands of thinking have been synthesized and, when considered together, offer steps toward a new comprehensive agenda to prevent domestic violence.

To bring this agenda to action requires extensive dialogue and planning. This Report is designed to stimulate a public conversation across a broad group of researchers, service providers, advocates, policymakers and philanthropists who are involved with the domestic violence, child and adolescent development, gender studies, criminal justice, child abuse prevention, and related fields. We hope it will generate additional research, foster experimentation with new interventions, create more effective social messages, find entry points for reaching neglected communities and constituencies, and contribute to new policy formulation. Through this process, it will be possible to bring to fruition a new strategy that will enable young people to build healthy relationships, become capable and caring parents, and participate in productive work—free from the terrors of domestic violence.

Appendix: The Investigative Process

Over a period of a year, the Family Violence Prevention Fund (FVVPF) undertook a major review and exploration both within and beyond the usual areas of research, services, and policy that comprise the domestic violence field. The investigation engaged varied perspectives and experiences, a racially and ethnically diverse cadre of thinkers, practitioners and community leaders, and experts who span the public and private sector, disciplines, developmental focus, and links to larger networks. Three background papers were commissioned to address: what is known about the dimensions of domestic violence and current strategies and interventions to address it;¹ opportunities for primary prevention of domestic violence in the child and adolescent development field;² and the applicability of innovative, place-based crime reduction strategies to reduce serious domestic violence.³ In addition, noted academics and researchers joined in four major consultations,⁴ each focused on a particular issue or issues, including: child protection and child welfare, primary services, and community-focused reform; early childhood development and family support; gender identity and relationship development for adolescents; and law enforcement and criminal justice. The FVVPF also benefited from a range of individual interviews with practitioners, community leaders, academics and foundation officials, consultations of other groups, and its own ongoing work.

Through this yearlong, comprehensive, foundation-sponsored investigation, we found important new thinking about domestic violence. We also learned about research and interventions in other fields, which may offer new ideas and opportunities for reducing domestic violence. As our investigation proceeded, the Foundation encouraged the FVVPF to apply our findings to a more targeted inquiry into improving domestic violence-related outcomes for disconnected youth: 16 to 24 year olds with few or no ties to school or work.

The Family Violence Prevention Fund and the William and Flora Hewlett Foundation are grateful for the expertise and wisdom of many people who participated through consultation meetings and individual interviews in the creation of this report.

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Notes

Introduction

¹ For additional information about this investigative process, see the Appendix.

Chapter I

¹ Report to the President by Secretary Donna E. Shalala, U.S. Department of Health and Human Services, October 1, 1997.

² United States Department of Education and United States Department of Health and Human Services. *Report to Congress: Youth Education and Domestic Violence Model Programs*. Prepared by Laurel Consulting Group. Contract number # 105-96-8214 .1996; see also Christopher D. Maxwell and Lori A. Post, "An Assessment of Efforts to Prevent Violence Against Women" (paper prepared for the *Workshop on Issues in Research on Violence Against Women*, National Academy of Science, Washington, DC, January 3-4, 2002).

³ See recent papers prepared for consultation, "Early Childhood, Domestic Violence and Poverty: Taking the Next Steps to Help Young Children and Their Families," supported by the David and Lucile Packard Foundation, Grant #2001-16630, The University of Iowa School of Social Work.

⁴ David Kennedy, "Controlling Domestic Violence Offenders," (paper prepared for the Family Violence Prevention Fund and the Hewlett Foundation, April, 2002), 2.

⁵ Wellesley Centers for Women consultation, March 4, 2002.

⁶ Batterers intervention programs have received mixed evaluations. See especially Gondolf, Edward W., "Batterer Programs: What We Know and Need to Know," *Journal of Interpersonal Violence*, 12 (1997), 83-98. For a multi-site evaluation of the batterers intervention system, see Daniel G. Saunders and Richard Hamill, "Offender Interventions to end Violence Against Women: A Research Synthesis for Practitioners," (paper prepared for the *Workshop on Issues in Research on Violence Against Women*, National Academy of Science, Washington, DC January 3-4, 2002).

⁷ Janine M. Zweig and Martha R. Burt, "Domestic Violence: Where are we and where should we be going?" Urban Institute, Washington, DC, (draft paper prepared for the Family Violence Prevention Fund, April 9, 2002), p. 45.

⁸ Since 1993, the Department of Health and Human Services has developed several entities to address domestic violence in specific racial and ethnic groups: The National Institute on Violence in the African American Community, Alianza Latina de Violencia Domestica, Sacred Circle, and the Asian and Pacific Islander Institute on Domestic Violence.

⁹ Hirozako Yoshikawa and Elisa A. Rosman, "A Research Agenda for Primary Prevention of Domestic Violence Perpetration in Young Adulthood," (paper prepared for the Family Violence Prevention Fund and The Hewlett Foundation, New York University, April 2002), p.4.

¹⁰ U.S. Department of Health and Human Services, *Youth Violence: A Report of the Surgeon General*, (Rockville, MD: GPO, 2001), 51.

¹¹ Some examples of these programs are *Expect Respect* and *Safe Dates: Expect Respect*, Cisco Garcia, Austin Safe Place, Austin, Texas, www.austin-safeplace.org and *Safe Dates*, Dr. Vangie Foshee, University of North Carolina, Mission Hill, North Carolina, Tel: 919-966-6353.

¹² Vera Mouradian, interview by author, Wellesley Centers for Women consultation, Boston, MA, March 4, 2002.

¹³ Report to the President by Secretary of Health and Human Services, Donna E. Shalala, October 1, 1997; See also, recent papers prepared for consultation, "Early Childhood, Domestic Violence and Poverty: Taking the Next Steps to Help Young Children and Their Families," supported by the David and Lucile Packard Foundation, Grant #2001-16630, The University of Iowa School of Social Work, for preliminary reviews of how to infuse domestic violence services in programs for young children such as Head Start, child care and pediatricians offices.

¹⁴ In 1999, the Agency for Health Care Research and Quality of the U.S. Department of Health and Human Services, funded a research program to identify and evaluate the effectiveness in health care systems of interventions to address domestic violence.

¹⁵ Yoshikawa and Rosman, 11.

¹⁶ Rosemary Chalk and Patricia A. King, eds., *Violence in Families: Assessing Prevention and Treatment Programs*, Committee on the Assessment of Family Violence Interventions, National Research Council and Institute of Medicine, 1998; Panel on Research on Child Abuse and Neglect, National Research Council, *Understanding Child Abuse and Neglect*, National Academies Press, 1993.

¹⁷ The principal research activity is led by the National Institute of Justice in the Department of Justice and the Centers for Disease Control and Prevention of the Department of Health and Human Services.

¹⁸ See, for example, J. Fantuzzo, R. Boruch, and A. Beriama. "Domestic violence and children: Prevalence and risk in five major U.S. cities. *Journal of the American Academy of Child and Adolescent Psychiatry* (1997) 36: 116-22. See also Edleson, J.L., "Children's Witnessing of Adult Domestic Violence," *Journal of Interpersonal Violence*, (August 1999) 14:839-70.

Chapter II

¹ *Youth Violence*, 51.

² Estimates of children's exposure to violence vary (from 3 million to 10 million, and one estimate as high as 17 million) as a

result of different conceptual, definitional and methodological approaches. More research is needed to accurately assess the magnitude of the problem; see also Ernest N. Jouriles, Renee McDonald, et al, "Issues and Controversies in Documenting the Prevalence of Children's Exposure to Violence," in *Domestic Violence in the Lives of Children: The Future of Research, Intervention, and Social Policy*, edited by Sandra Graham-Bermann and Jeffrey Edleson, American Psychological Association, June 2001, 13-43.

³ J. Fantuzzo, R. Boruch, A. Beriamo, 116-122; The NCVS collects information about many persons under age 12 are in the household (of victims), but does not seek information about the respondent's relationship to the children. Personal communication with Callie Rennison, Bureau of Justice Statistics, June 5, 2002

⁴ E. Cohen and J. Knitzer, "Children Living with Domestic Violence: The Role of Early Childhood Programs," prepared for the meeting 'Early Childhood, Domestic Violence, and Poverty: Taking the Next Steps to Help Young Children and Their Families,' May 2002.

⁵ Zweig and Burt, p. 5 (April draft); personal communication with Susan Schechter, June, 2002

⁶ John W. Fantuzzo and Wanda K. Mohr, "Prevalence and Effects of Child Exposure to Domestic Violence," *The Future of Children* 9(3) Winter 1999; Ernest N. Jouriles, Renee McDonald, et al., "Issues and Controversies in Documenting the Prevalence of Children's Exposure to Violence," in *Domestic Violence in the Lives of Children: The Future of Research, Intervention, and Social Policy*, edited by Sandra Graham-Bermann and Jeffrey Edleson, American Psychological Association, June 2001, 13-34.

⁷ Edleson, J.L. "Children's Witnessing of Adult Domestic Violence," *Journal of Interpersonal Violence* (August 1999) 14:839-70.

⁸ Edleson, J.L. "Should childhood exposure to adult domestic violence be defined as child maltreatment under the law?" in P.G. Jaffe, L.L. Baker and A. Cunningham, eds., *Ending Domestic Violence in the Lives of Children and Parents: Promising Practices for Safety, Healing, and Prevention*, (New York: Guilford Press (in press)).

⁹ Edleson, J.L. "Children's Witnessing of Adult Domestic Violence," *Journal of Interpersonal Violence*, (August 1999) 14:839-70.

¹⁰ Yoshikawa and Rosman, 5.

¹¹ M.I. Singer, D.B. Miller, S. Guo, K. Slovak, and T. Frierson, "The mental health consequences of children's exposure to violence," Cleveland, Ohio: Cuyahoga County Community Mental Health Research Institute, Mandel School of Applied Social Sciences, Case Western Reserve University (1998);

¹² S. Spaccarelli, J.D. Coatsworth, and B.S. Bowden, "Exposure to serious family violence among incarcerated boys: its association with violent offending and potential mediating variables," *Violence and Victims*, 10 (1995) as cited in Edleson, J. L. "Children's Witnessing of Adult Domestic Violence," *Journal of Interpersonal Violence*, Vol., 14, No. 8 (August 1999); see also personal communication between Jeffrey Edleson, University of Minnesota and Janet Carter, Family Violence Prevention Fund, July 2002.

¹³ Ibid, 68.

¹⁴ Callie Rennison, Ph.D. et al., *Intimate Partner Violence*, Bureau of Justice Statistics Special Report, NCJ 178247, Washington, DC: US Department of Justice, Office of Justice Programs, May 2000; Patricia Tjaden, and Nancy Thoennes, *National Violence Against Women Survey*, National Institute of Justice and the Centers for Disease Control and Prevention, November 1998.

¹⁵ Yoshikawa and Rosman, 3.

¹⁶ J. G. Silverman, A. Raj, L.A. Mueci, and J.E. Hathaway, "Dating Violence against Adolescent Girls and Associated Substance Use, Unhealthy Weight Control, Sexual Risk Behavior, Pregnancy, and Suicidality," *Journal of American Medical Association*, August 1, 2002, Vol.286, No. 3.

¹⁷ AGI, "Pregnancy Risk Assessment Monitoring System State Specific Survey of New Mothers," *Family Planning Perspectives*, 31(2): 106+, 1999, as quoted in *Interpersonal Violence and Adolescent Pregnancy: Prevalence and Implications for Practice and Policy*, Center for Assessment and Policy Development and National Organization on Adolescent Pregnancy, Parenting and Prevention, Inc., Washington, DC: October 2001 as cited in internal memo, Center for Law and Social Policy, undated.

¹⁸ *Youth Violence*, 1.

¹⁹ Ibid.52.

²⁰ *Youth Violence*, 6, 18, 26.

²¹ Ibid. 49.

²² M. Wordes, and M. Nunez, *Our Vulnerable Teenagers: Their Victimization, Its Consequences, and Directions for Prevention and Intervention*, National Council on Crime and Delinquency and National Center for Victims of Crime, July 2002.

²³ D. Finkelhor and R. Ormrod, *Characteristics of Crimes Against Juveniles*. Washington, DC: US Department of Justice, Office of Juvenile Justice and Delinquency Prevention, June 2000 in Crime Safety Week materials, Department of Justice.

²⁴ U.S. Department of Health and Human Services, National Child Abuse and Neglect Data System (NCANDS), 1999, as cited in M. Wordes, and M. Nunez, *Our Vulnerable Teenagers: Their Victimization, Its Consequences, and Directions for Prevention and Intervention*, National Center on Crime and Delinquency and National Center for Victims of Crime, 2002.

²⁵ U. S. Department of Health and Human Services, *Child Maltreatment 2000*, Washington, D.C. 2002.

Chapter III

¹ Yoshikawa and Rosman, 1.

² Richard Wertheimer, Tara Croan, and Justin Jager. "Quantitative estimates of vulnerable youth in transition to adulthood: Final

Report,” (paper prepared for the Annie E. Casey Foundation, Child Trends February 13, 2002.

³ Child Trends, “Facts at a Glance,” *Child Trends Online* [home page on-line]; available from <http://www.childtrends.org/PDF/EAAG2001.pdf>; Internet; accessed 1 August 2002.

⁴ Jody Raphael, “Domestic Violence and Birth Control Sabotage: A Report from the Teen Parent Project,” Center for Impact Research, February 2000.

⁵ Interview with Carolyn Mazure, Yale University School of Medicine, February 14, 2002 based on research with young pregnant and parenting mothers; see also Alicia Lieberman interview.

⁶ Lundy Bancroft and Jay G. Silverman, *The Batterer as Parent* (London: Sage Publications, 2001).

⁷ E. Cohen and J. Knitzer, “Children Living with Domestic Violence: The Role of Early Childhood Programs,” prepared for the Meeting ‘Early Childhood, Domestic Violence, and Poverty: Taking the Next Steps to Help Young Children and Their Families,’ May 2002.

⁸ Jim Casey Youth Opportunities Initiative, “Strategies, Outcomes, and Investments,” October 2001

⁹ Ibid.

¹⁰ R. Wertheimer, T. Croan, and J. Jager, “Quantitative estimates of vulnerable youth in transition to adulthood: final report,” submitted to Annie E. Casey Foundation, Child Trends, Washington, D.C., February, 2002.

¹¹ Veronica Herrera, Wellesley Centers for Women consultation, March 4, 2002.

¹² M. Wordes and M. Nunez, *Our Vulnerable Teenagers; Their Victimization, Its Consequences, and Directions for Prevention and Intervention*, National Center on Crime and Delinquency and National Center for Victims of Crime, 2002.

¹³ Ibid.

¹⁴ *Youth Violence*, 47

¹⁵ Yoshikawa and Rosman, 4.

¹⁶ Kennedy, 23-25.

¹⁷ *Youth Violence*, 48.

¹⁸ Ibid, 13.

¹⁹ Kennedy, 19-34.

²⁰ Fagan, Jeffrey, “Policing Guns and Youth Violence,” 2001 (forthcoming).

²¹ Kennedy, 19-34

²² *Youth Violence*, 3

²³ Yoshikawa and Rosman, 6.

²⁴ Michelle Porche, Wellesley Centers for Women consultation, March 4, 2002.

²⁵ Martha Burt, Urban Institute consultation, January 7, 2002; Wellesley Centers for Women consultation, March 4, 2002.

²⁶ Michele Porche, Wellesley Centers for Women consultation, May 4, 2002

²⁷ Joan Wynn, Chapin Hall consultation, January 23, 2002.

Chapter IV

¹ H. Yoshikawa, “Long-term effects of early childhood programs on social outcomes and delinquency,” *The Future of Children*, 5 (3) 1995, as cited in Yoshikawa and Rosman, 12.

² Yoshikawa and Rosman, 10.

³ *The Future of Children*, “Home Visiting: Recent Program Evaluations,” 9(1), Spring/Summer 1999; Ahsan, Nilofer, “Revisiting the Issues: The Family Preservation and Support Services Program,” *The Future of Children*, 6(3), Winter 1996.

⁴ Yoshikawa and Rosman, 11.

⁵ Eckenrode, et al., “Preventing child abuse and neglect with a program of nurse home visitation: The limiting effects of domestic violence,” *Journal of the American Medical Association*, 284, 1385-1391.

⁶ Cohen and Knitzer, 4.

⁷ Alicia Lieberman, Interview by Author, San Francisco, CA, February 5, 2002.

⁸ Please see programs led by Alicia Lieberman and Betsy McAllister-Groves. Dr. Lieberman is the Director of the Child Trauma Research Project at San Francisco General Hospital. Her current research involves a treatment outcome study of child-parent psychotherapy with preschoolers who have witnessed domestic violence. Ms. McAllister-Groves is the founder of the Child Witness to Violence Project at Boston Medical Center. See also the Cuyahoga County (Cleveland) Mental Health Agency’s Child Witness to Violence Project, which uses both a clinical and systems change approach.

⁹ See unpublished papers prepared for the May 2002 meeting, “Early Childhood, Domestic Violence, and Poverty: Taking the Next Steps to Help Young Children and Their Families,” supported by the David and Lucile Packard Foundation, Grant #2002-16630, to the University of Iowa School of Social Work.

¹⁰ *Youth Violence*, 64

¹¹ Claire Smrekar, James W. Guthrie, Debra E. Owens et al, “March Toward Excellence: School Success and Minority Student Achievement in Department of Defense Schools,” *A Report to the National Education Goals Panel*, September 2001, available at <http://www.negp.gov/reports/DoDFinal921.pdf>.

- ¹² V.A. Foshee, A. Bauman, X.B. Arriaga, R.W. Helms et al, "An evaluation of Safe Dates, an adolescent dating violence prevention program," *American Journal of Public Health*
- ¹³ Yoshikawa and Rosman, 13-14; Philadelphia, one site in the Quantum Opportunities program, stood out for its effectiveness.
- ¹⁴ Wellesley Centers for Women consultation, May 4, 2002.
- ¹⁵ Yoshikawa and Rosman, 15.
- ¹⁶ *Youth Violence*, 13.
- ¹⁷ Personal communication with Felton Earls, Harvard University School of Public Health, February 2, 2002; Robert J. Sampson, Chapin Hall consultation, January 23, 2002. Robert J. Sampson, Stephen W. Raudenbush, and Felton Earls. "Neighborhoods and Violent Crime: A Multilevel Study of Collective Efficacy." *Science*. Vol. 277, August 15, 1997. For information about the Project on Human Development in Chicago Neighborhoods, see <http://phdcn.harvard.edu>.
- ¹⁸ Kennedy, 6; Jeffrey Fagan, "Policing Guns and Youth Violence," 2001 (forthcoming).
- ¹⁹ Kennedy describes one community, Brockton, Massachusetts, which has several partners working together to target domestic violence offenders, 26.
- ²⁰ Personal orrespondence with Susan Schechter, University of Iowa, April 2003.
- ²¹ Preliminary evidence reveals that after the first four months of this targeted campaign, six percent more men are talking with their children. This information is taken from Ad Council, "Family Violence Prevention Fund Continuous Tracking and Post-Wave Tracking Report August 5, 2001-August 31, 2002" (prepared for the Family Violence Prevention Fund, November 2002).
- ²² See the Family Violence Prevention Fund-sponsored research in 2000 and 2001 by Peter D. Hart Research Associates, which included a national public opinion poll of adult men, dial sessions to explore men's reactions to various PSA and video segments, and a series of focus groups with men of different ages and races.
- ²³ Personal communication with Gary Stangler, Director, Jim Casey Youth Opportunities Initiative, June 2002.
- ²⁴ The Family Violence Prevention Fund, "Economic Independence" *The Family Violence Prevention Fund Online* [home page on-line]: available from <http://endabuse.org/programs/economic/>; Internet, accessed on 1 August 2002.
- ²⁵ Raphael, Jody, "Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare," *Project for Research on Welfare, Work, and Domestic Violence, a collaborative project of Taylor Institute and the University of Michigan Research Development Center on Poverty, Risk and Mental Health* (April 1997); available at http://www.ssw.umich.edu/trapped/pubs_trapped.pdf; Internet; accessed 1 August 2002.
- ²⁶ Zweig and Burt, 9; Yoshikawa and Rosman, 8; The National Crime Victimization Survey (NCVS), which is the basic law enforcement data base for identifying domestic violence, cannot currently be used to identify the following key characteristics of victims: education, employment, or parenthood (personal communication with Callie Rennison, U.S. Department of Justice, June, 2002).
- ²⁷ Raphael, Jody, Center for Impact Research, February 2000. Available at <http://impactresearch.org>
- ²⁸ Here low levels of human capital include the following: tenuous if any attachment to the labor force, low education levels, and limited income.
- ²⁹ Yoshikawa and Rosman, 5-6.
- ³⁰ V.J. Felitti, R.F. Anda, D. Nordenberg, et al, "Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study," *American Journal of Preventive Medicine* 14(4) (1998): 245-258; *Youth Violence*, 59.

Chapter V

¹ Yoshikawa and Rosman, 17; see also Maxwell and Post.

² E. Klein, J. Campbell, E. Soler, and M. Ghez, *Ending domestic violence: Changing public perceptions/halting the epidemic*, (London: Sage Publications, 1997). See also the tracking poll conducted in November 2002 by Millward Brown. For additional information about the results of this poll, please contact the Family Violence Prevention Fund at 415-252-8900.

Appendix

¹ Janine M. Zweig and Martha R. Burt, "Domestic Violence: Where are we and where should we be going?" Urban Institute, Washington, DC, (draft paper prepared for the Family Violence Prevention Fund, April 9, 2002).

² Hirozako Yoshikawa and Elisa A. Rosman, "A Research Agenda for Primary Prevention of Domestic Violence Perpetration in Young Adulthood," (paper prepared for the Family Violence Prevention Fund and The Hewlett Foundation, New York University, April 2002).

³ David Kennedy, "Controlling Domestic Violence Offenders," (paper prepared for the Family Violence Prevention Fund and the Hewlett Foundation, April, 2002), 2.

⁴ The four consultations took place at Chapin Hall, University of Chicago, Chicago, Illinois; Yale University, New Haven, Connecticut; Urban Institute, Washington, D.C.; and Wellesley Center for Women, Wellesley College, Wellesley, Massachusetts. A list of consultation participants is available upon request from the Family Violence Prevention Fund, (415) 252-8900.

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Ann Rosewater provides consultation services to foundations, universities, not-for-profit and governmental organizations in strategic planning and policy development. She held several senior positions at the U.S. Department of Health and Human Services (HHS), including: Regional Director for the eight south-eastern states, Counselor to the Secretary, Deputy Assistant Secretary for Children and Families, and Deputy Assistant Secretary for Human Services Policy. She served on the National Advisory Committee on Violence Against Women and chaired the HHS Departmental Steering Committee on Violence Against Women. Prior to serving at HHS, Ms. Rosewater helped create and served as staff director of the Select Committee on Children, Youth and Families in the U.S. House of Representatives. She helped write the Family Violence Prevention and Services Act of 1984. Ms. Rosewater has written extensively on child and family policy, child health, education, disabled children, and comprehensive strategies to reduce urban poverty. She recently authored *Child Welfare Summit: Looking to the Future*, an examination of the state of child welfare and recommendations for action, on behalf of the Center for Community Partnerships in Child Welfare of the Center for the Study of Social Policy; and was a major contributor to *Effective Interventions in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice*, issued by the National Council of Juvenile and Family Court Judges.

About the Family Violence Prevention Fund

For more than two decades, the **Family Violence Prevention Fund** (FVPPF) has worked to end violence against women and children around the world, because everyone has the right to live free of violence. Instrumental in developing the landmark Violence Against Women Act passed by Congress in 1994, the FVPPF has continued to break new ground by reaching new audiences including men and youth, promoting leadership within communities to ensure that violence prevention efforts become self-sustaining, and transforming the way health care providers, police, judges, employers and others respond to violence. For more information, visit www.endabuse.org.

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