

WHITE PAPER
Recent Advances in Understanding and Preventing Youth Violence:
Top 5 Lessons Learned, Examples, and Best Practices
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Overview

Over the past several years we have been haunted by highly publicized examples of youth violence in the U.S. Almost every week we hear new stories that make us gasp at the severity of the act, the age of the perpetrator, or the random and purposeless nature of the crime. A 14-year-old Miami student is charged with murder for stabbing and killing another student with an 8-inch knife. A 44-year old man is beaten in downtown Seattle by eight teenage boys, the youngest being 11 years old. Near Tampa, two boys viciously attack llamas being raised as pets with golf clubs and a meat cleaver, killing one llama and severely injuring another. Childhoods are routinely torn apart by gang violence—a 4-year-old waiting for ice cream is caught in neighborhood crossfire. The list goes on.

The most dramatic stories involve youth perpetration of multiple shootings in schools, churches, and shopping malls. The less dramatic stories involve a regular dose of bullying, fighting, harassment, extortion, and aggression that have come to define youth culture in many schools and communities across the nation and worldwide. These harmful actions often go unrecognized and unpunished by the criminal justice system. Still, although highly publicized events may have sensitized us to the urgency of the problem, youth violence is not a new phenomenon but has been a cause for concern for several decades. This concern has led to a wide array of prevention and intervention programs—parent training and education, family counseling, mentoring, tutoring, recreation, cognitive-behavioral interventions, social skills training, gang prevention efforts, community policing and more—provided in schools, after school, in homes, and in communities. With so much energy invested in the prevention of youth

violence for so many years, the two most important questions we must now ask are: (1) Is youth violence preventable? (2) What programs are effective and how can they be supported and sustained?

The answer to the first question is “yes”—but that does not mean the solution is simple. In a recent book, *Murder is no Accident*, Dr. Deborah Prothrow-Stith, a prominent physician and public health advocate, describes how Boston created an interdisciplinary citywide movement that brought youth violence and crime rates down across the city. As she discusses in her book, some programs were particularly critical to the success of the Boston Model. This leads to our second question: What programs are effective and how can they be supported and sustained? The answer to this question is that evidence supports certain programs and strategies but not others—support is greatest for comprehensive programs that begin early, involve families, provide positive role models, and address individual and contextual risk and protective factors. However, the best programs can only be effective if they are sustained, requiring ongoing enthusiasm and vigilance. Indeed, the effectiveness of the Boston Model appears to have waned somewhat over time as regular monitoring and support dwindled.

In this paper, we will consider five of the most important lessons learned over the past two decades that help us understand what we need to do to prevent youth violence and how best to do it. These are:

- Violence is Adaptive
- Aggression and Violence are Multiply-Determined Behaviors
- Earlier is Better (but late can work)
- Use Evidence-based Programs and Principles
- Identify Strengths and Build Core Competencies

To begin with, let us first reflect on what we mean by “violence” —including a discussion of how specific definitions provide an important level of precision to guide individual

and community-level programming. Aggression has been defined broadly as behavior intended to harm or injure another person or persons, with *violence* being a more extreme form of aggression typically involving serious physical injury. In practice, aggression is most commonly used to describe children's behavior, whereas such behavior in adolescence is called youth violence. Serious delinquent behaviors are defined by criminal law and include behaviors that cause more extreme harm to others—this definition includes violent behavior that is illegal but is not restricted to it. Further, youth violence can be self-directed, including self-injury and suicide, although discussions of youth violence prevention rarely address harm to self.

Part of the difficulty in putting forth a clear definition of violence lies in the fact that violence represents a *heterogeneous* set of behaviors. Revenge is different from impulsive rage, predatory aggression is different from self-protection, and suicide is different from homicide. Violence is not one behavioral pattern but several. In addition, specific disciplines have their own terms and definitions of violence with differing emphasis on individuals or actions—for example, conduct disorder (psychiatry) focuses on individual pathology, felony assault (criminal justice) emphasizes a specific action, and serious emotional disturbance and behavior disorders (education) emphasize actions in a specific context.

In spite of variations in the conceptualization of violence across disciplines and contexts, some relatively simple distinctions have been proposed that can be useful in understanding etiology and related prevention strategies. One important distinction related to the function of violence hinges on whether it is *proactive* in the strategic service of self goals or *reactive* to provocation or blocked self goals. Proactive aggression can be more calculating and delayed whereas reactive aggression is more likely driven by characteristics such as impulsivity, frustration, and low social competence. This distinction also may shed light on the inconclusive

findings linking testosterone and aggression in humans—high levels of testosterone in males have been shown to predict defensive or reactive aggression related to heightened threat perception rather than proactive or offensive aggression. In terms of links to prevention programs, reactive aggression is likely to be more amenable to change through programs that emphasize impulse control and anger management, whereas these programs are unlikely to impact proactive aggression. Understanding the functions of violence is an important first step in developing individual-level interventions and in establishing responsive community-level policies and initiatives.

Violence is Adaptive

One of the main reasons that violence is difficult to prevent is that “it works”—in other words, violent behavior in humans (and primates as well) often serves a purpose. Unlike illness and other forms of injury, outcomes which most everyone wants to prevent, violence can provide clear advantages to the perpetrator and serve a social purpose. From an evolutionary perspective, aggression and violence help us solve adaptive problems in specific contexts. Two leading evolutionary psychologists, David Buss at the University of Texas and Todd Schackelford at Florida Atlantic University, have described several “functions” of violence including (a) co-opting resources of others (b) defending against attack; (c) negotiating power and status hierarchies; (d) inflicting costs on rivals; and (e) deterring rivals from future aggression.

Clearly, the human nervous system is biased towards survival—the brain has entire circuits dedicated to the detection and processing of survival-relevant stimuli, including an alarm system that focuses on threatening events and a fine-tuning mechanism that prevents self defense from shifting into dangerous overreactions. Advances in brain research also suggest that we are “pre-wired” for some more subtle types of aggression—for example, certain areas of the brain

that indicate satisfaction light up when we inflict actual punishment on others in response to violations of social norms. But aggression can be adaptive or maladaptive. Adaptive aggression stays within bounds and is tailored to correspond to the level of environmental threat. When threats are distorted or the intensity of the response is inappropriate, aggression becomes maladaptive.

This also does not mean that aggression and violence are inevitable. Just as we are capable of acting aggressively, we are also capable of peaceful and cooperative solutions to the problems of everyday life—which path we take depends, in part, on what we see and learn as we grow up. Violence is *less* likely when youth learn skills and have opportunities to effectively navigate their social worlds, learn how to adjust or “calibrate” their behavior to accurately match the demands of the environment, and spend time in settings where aggression is not adaptive.

Understanding the functions of aggression and violence provides clear directions for preventive efforts. One strategy is to reduce or minimize the “functional” value of aggression in a given context. For example, a well-known intervention approach for aggressive children and their families developed by Gerald Patterson and colleagues at the Oregon Social Learning Center stresses the importance of providing rewards for positive behavior while at the same time not allowing children to shape family processes through coercive actions that result in attention and reinforcement. Another strategy is to teach individual skills and provide opportunities for personal, social, and career development that encourage prosocial and responsible attitudes and behaviors. An example of this strategy is a widely-used program, Life Skills Training developed by Dr. Gilbert Botvin of Cornell University. Life Skills Training teaches cognitive and behavioral competencies and skills and has been found to reduce both violence and substance use in youth.

Considering the adaptive functions of aggression for social status, popularity, and control and the potential for group dynamics to elevate the status of aggression within the context of preventive intervention programs, it is important to recognize that motivation to change cannot be assumed. Rather, to the extent that aggression and popularity are linked in a given peer context, being “tough” and aggressive might be seen as a desired goal. This may also hinder efforts to encourage bystanders to intervene to stop aggression, particularly if this behavior carries a risk for loss of social status, and contribute to what has been labeled *deviant peer contagion*, or the tendency for programs that group antisocial youth together to have harmful effects on youth behavior.

Aggression and Violence are Multiply-Determined Behaviors

Another reason that it is difficult (but still possible) to prevent youth violence is that there is no single “cause” of this complex behavior. Indeed, research over the past few decades has identified multiple factors that contribute to aggression and violence including characteristics of individuals, their relationships with friends and family (close interpersonal relationships), and the influence of schools and communities (proximal social contexts).

Individual characteristics. A variety of individual characteristics have been identified that increase risk for childhood aggression and youth violence. Some of these individual factors (such as perinatal trauma) begin in utero, whereas others (such as difficult temperament, fearlessness, impulsivity, low verbal ability, and lack of control) begin at birth or shortly after. Over time, distinct dimensions of personality including low agreeableness and low conscientiousness also crystallize and increase the likelihood of aggression. In other words, a host of individual predispositions, whether written on a child’s biological birth certificate or

emerging early in the course of development, render certain children more prone to aggression than others from a very early age.

Without intervention, children who develop aggressive behavioral patterns early in life are also more likely to graduate to more serious aggression in adolescence and continue such behavior chronically. For this reason, elevated aggression and its precursors in early childhood are among the best factors for selecting individuals or subgroups for focused prevention and intervention programs. However, selecting children based on early aggression does not provide specific guidance for the content and scope of the intervention itself. Indeed, many individual risk factors linked to temperament, personality, and neuropsychological functioning are difficult to change, although how these unfold in a given context can dictate their course. It is important to bear in mind that children both shape and are shaped by their environments, a point we will return to in our subsequent discussion of contextual risk for aggression and the cumulative and interactive influence of risk factors. For instance, difficult temperament is more likely to result in ineffective parenting and ineffective parenting is more likely to exacerbate the relation between difficult temperament and later aggression.

It is also the case that children actively navigate and interpret their social worlds. How they come to understand both their own behavior and the behavior of others has important implications for action. Over time, children learn specific patterns of cognition that make aggression more or less likely. For example, one of the most robust findings in the social-cognitive literature on children's aggression is the tendency of more aggressive children to attribute hostile intent to others under ambiguous circumstances, known as *hostile attributional bias*. This means that a child who interprets another's glance as hostile is more likely to respond with aggression than a child who believes the same glance is neutral or benign.

Beginning in the 1960s, there has been an increasing recognition of the cognitive underpinnings of aggression. Most social-cognitive models of childhood aggression draw heavily from cognitive information-processing theory, emphasizing both discrete social information-processing skills as well as specific types of social knowledge stored in memory (the ‘data base’ that individuals develop over time). Furthermore, because the child’s cognitive system develops over time, it is amenable to early preventive efforts while cognitions are most malleable as well as later efforts to modify maladaptive patterns of thought. Indeed, cognitive-behavioral prevention and intervention programs consistently have been shown to be effective for aggression, violence, and delinquency.

This leads us to ask what specific social information-processing skills and/or specific types of social knowledge are the most robust risk factors for childhood aggression *and* are the most viable targets for prevention and intervention? Much of the work in this area has emphasized discrete and sequential social information-processing skills that involve encoding and interpretation of cues, response search, evaluation, decision, and action. In short, the cognitive system is seen as processing inputs of social stimuli (what happened and why?), searching memory for relevant information (what does this mean?), and generating outputs accordingly (what should I do and what are the consequences?). In addition to hostile attributional bias, aggression is associated with increased attention to aggressive cues, generation of more aggressive solutions, and anticipation of positive outcomes such as tangible rewards for aggression.

However, a child’s choice of an appropriate response also hinges on what is encoded in memory as acceptable behavior. We have referred to these internalized standards as *normative beliefs* about the appropriateness of aggression. These beliefs develop from observation of one’s

own behavior and the behavior of influential models as well as from direct instruction across contexts. As children get older, normative beliefs about aggression become increasingly predictive of their own aggressive behavior. A normative context that supports or sanctions aggression can also influence individual children's behavior within that context and is thus an important focus for prevention and intervention programs.

Information-processing shortcuts and memory structures help decrease the cognitive workload. Over time, many of these biases and beliefs are invoked automatically without deliberate attention. Furthermore, expected events and actions often are linked together in *scripts* or event schemas that serve as guides for behavior in everyday situations. Because scripts also simplify cognitive processing, in many cases a particular scripted response becomes dominant or automatic. More aggressive children presumably have more well-connected and dominant aggressive scripts encoded in memory. This highlights the need to consider the importance of automatic as well as controlled processing for social-cognitive interventions.

Close interpersonal relationships. Aggression is molded and shaped by contextual influences. Even highly heritable characteristics such as temperament have been shown to interact with contextual factors such as parenting styles to exacerbate risk. Furthermore, individual factors that are primarily learned are highly influenced by models and reward structures across settings. From birth, children are embedded in a series of close interpersonal relationships with parents, relatives, caring adults, siblings, and peers that shape their development rather than rubber stamp their genetic destiny. There is now a substantial literature documenting the effects of these relationships on aggressive behavior, with particular emphasis on the influence of parents and peers.

Several aspects of the parent-child relationship have been shown to influence the development of aggression, including the quality of the parent-child relationship, parenting practices, and parental monitoring. A consistent finding in the research literature is that certain parenting practices and parent-child relationships can increase the likelihood of child aggression, and that the influence of these factors is particularly salient for younger children. Children who experience rejection, neglect, or indifference from parents are more likely to display aggressive behavior. Parents who are neglectful or disengaged are often unresponsive to the needs of their children and demand little of them. These children may engage in aggressive behaviors to gain attention from their parents. In contrast, parents who are warm, supportive, and responsive have children who are less aggressive and exhibit less behavioral problems.

The quality of the parent-child relationship also influences child aggression. Although consistent discipline practices have been linked to lower levels of aggression, problematic discipline practices and erratic expressions of anger promote aggression in children. Children become less inhibited from displaying aggression when discipline is inconsistent and parenting practices are inept. This often leads cycles of mutually coercive behavior. Parents who use inconsistent discipline tactics have been found to punish children not only for deviant behaviors but for prosocial behaviors as well. However, children are also part of this coercive cycle. Children will purposely use aversive behaviors, such as whining or tantrums, to coerce their parents into giving them what they want. The children are then rewarded for this behavior, because the parents give in, which reinforces the aggressive or aversive behavior.

The use of corporal punishment also has been associated with increased aggression in children. There are several reasons for this. First, when parents resort to physical means of controlling and punishing their children they send a message that aggression is a normative,

acceptable, and effective way to gain compliance. When corporal punishment is used in response to children's aggression, in essence, parents are punishing children with the very behavior they are trying to eliminate. This, in turn, communicates to the child that it is acceptable to hit others when they behave in ways they do not like. Second, the use of this disciplinary tactic leads to avoidance of the disciplinary figure, reducing parental opportunities to direct and influence their child. Third, corporal punishment also promotes hostile attributions, which in turn, predicts aggressive behavior. Experience with harsh treatment from parents results in children who are hyper-vigilant to hostile cues, who attribute hostile intent to others, access more aggression potential responses, and view aggression as a way to attain social benefits. Taken to the extreme case of physical abuse, the evidence is compelling, with physical abuse linked to early aggression as well as violent and delinquent behavior during adolescence.

One of the goals of parenting is to teach children to behave independently in morally and socially acceptable ways. Attributing compliance to internal rather than external sources is an integral part of this process, and corporal punishment also has been found to interfere with this process by promoting external attributions. Physical force by the parent provides external controls to which children can attribute their compliance, and therefore, can propel children to avoid misbehaviors in order to avoid future punishment but does not teach children the responsibility to behave independently in morally and socially acceptable ways. Thus, the child may never learn socially acceptable ways of handling situations and instead views aggression and violence as a reasonable option for solving social conflicts.

As children grow and become adolescents, a lack parental monitoring is associated with higher levels of aggression, violence, delinquency, as well as poorer relations with peers and teachers. Monitoring refers to parents knowing where their children are, whom they are with, and

what they are doing. Good supervision allows parents to respond appropriately to antisocial and delinquent behaviors, as well as minimizes the adolescent's contact with risky circumstances.

In addition to parental influences, characteristics of a child's peer group can increase risk for aggression, although the specific mechanisms seem to vary by age. For younger children, aggression can lead to peer rejection (which then leads to increased aggression), particularly when this behavior is ineffective and/or excessive. Indeed, by the time children are in second and third grades, children demand more social competence from their friends where problem solving with less physical coercion is expected. Aggressive children who are quick to fight and slow to employ negotiation, bargaining, and other forms of problem solving are more likely to be rejected by peers. However, as mentioned earlier, aggression does not always lead to peer rejection. When children are viewed as defending themselves, they are usually viewed positively by their peers. In some settings and particularly as children get older, aggression and bullying can lead to increased popularity and social status. To the extent that aggression becomes more normative for certain youth during adolescence, it is less likely to engender peer rejection and more likely to elevate one's social status.

During adolescence the influence of the peer social clique or network also increases, with peer groups providing further validation and support for the standards of behavior they are defined by. Aggressive, antisocial, or delinquent peer groups tend to attract like-minded youth (a phenomenon known as *homophily*), and being in a deviant peer group tends to increase antisocial behavior, particularly for the moderately deviant youth who may still be experimenting with different behavioral styles. The peer group can provide an organizational context for more sophisticated displays of aggressive and antisocial behavior, attracting more aggressive youth and also legitimizing their behavior as normative. In more extreme cases, such as high violence

juvenile gangs, this context becomes highly structured and proscriptive with clear mandates for aggressive and delinquent behavior.

Proximal contexts. Two of the most important proximal developmental contexts for children and youth are neighborhoods and schools. These contexts exert independent influences on children's development and behavior, but also influence the quality and capacity of caregivers and others. Consistent with ecological principles, contexts are nested and interdependent. Consider the effects of community economic disadvantage. Family poverty increases the probability of peer-directed aggressive behavior by children, adolescents, and adults. One potential mechanism of influence involves the effect of poverty on parents' ability to raise their children. Faced with limited resources and support, multiple stressors, and unemployment (or multiple jobs), parents may have little time and energy left to actively participate in childrearing. For instance, in the 1990s two leading sociologists, Robert Sampson and John Laub, found that family poverty was associated with harsh discipline, low supervision, and poor parent-child attachment, which was in turn related to delinquency.

Neighborhood influences can also operate independent of their effect on families or other relationships. Consider the effect of exposure to community violence. Children (particularly boys) who are exposed to higher levels of community violence are more likely to be aggressive. Children who witness violence more regularly come to see it as acceptable behavior and internalize normative beliefs supporting aggression. It may also be that high levels of community violence create a climate of fear where children are more attentive to aggressive cues and more willing to interpret ambiguous cues as threats (for their own safety).

Other neighborhood factors can decrease the risk of violence, even within disadvantaged and more violent communities. In recent years, Robert Sampson and colleagues have coined the

term *collective efficacy* to refer to the willingness of residents to intervene for the common good based on mutual trust and solidarity. Juvenile crime rates are lower in neighborhoods where residents monitor children's play groups, intervene to prevent deviant behaviors such as truancy, confront people who are disturbing public space, and organize to maximize community resources. In essence, the community assumes a parenting role in monitoring children's behavior and garnering resources beyond what is done by individual families in their own homes.

Characteristics of schools can also increase the likelihood of childhood aggression. Some of these characteristics are directly related to the communities they serve. Schools in more disadvantaged neighborhoods typically have fewer resources, higher student-teacher ratios, and higher turnover rates. These schools may simply be less able to educate children effectively. Not only do academic difficulties portend heightened aggression, but children who are struggling with school are less likely to feel connected to their school and more likely to drop out or engage in risky behaviors. In addition, specific school practices such as ability tracking, assignment to classrooms with deviant peers for special education, and temporary suspension programs can foster negative peer group interactions and antisocial behavior. Even at the classroom level, the proportion of classmates who are aggressive and endorse aggressive normative beliefs has an influence on individual levels of aggression.

The cumulative and interactive nature of risk for aggression and violence. Specific characteristics of individuals, close interpersonal relationships, and proximal social contexts increase risk for aggression and violence. Still, no single factor explains more than a modest proportion of variance. As suggested by an ecological framework, individuals are nested within a social system comprised of relationships, settings, and larger societal influences, all of which reciprocally influence each other as well. The effects of risk on aggression can accumulate over

time and/or across settings, but the effects of risk also can be triggered only when other risk factors are present (or in direct proportion to the amount of other risk factors present).

Cumulative models emphasize the additive nature of risk such that the number of risk factors rather than any particular factor augments risk. An emphasis on how many risk factors are present suggests that children with the greatest number of risk factors should be identified for focused prevention and intervention, and that interventions should be multi-component and multi-context. Interactive models emphasize the fact that many risk factors exert their influence contingently. For example, children with an early propensity to behave aggressively appear to be more sensitive to the effects of peer rejection than their less aggressive peers. Interactive models suggest that interventions should identify those at-risk children most likely to be impacted by a specific malleable risk factor and target services accordingly.

Earlier is Better (but late can work)

Because risk escalates over time and because early aggression is perhaps the single best predictor of later aggression and violence, the “earlier is better” dictum is important to keep in mind. Further, children whose aggression is more marked and extreme early in development are more likely to develop chronic and persistent patterns of antisocial behavior later in life. Bear in mind that the stability of aggression over time is a “relative stability” within a population—low aggressive children stay low on aggression and high aggressive children continue to act aggressively. Consider the following scenario:

A young boy with a difficult temperament is physically abused by adults, learns that hitting is an effective strategy and becomes hypervigilant to threat. His father is absent, he enters school with few role models and poor social skills. He acts aggressively toward peers leading to early peer rejection that also triggers more aggression. Aggression becomes a characteristic and habitual response in social situations. His aggressive behavior leads to academic failure resulting in school drop out and lack of job skills. He is drawn to social groups marked by violence, joining a juvenile gang. He has no investment in a conventional lifestyle.

Or, as stated simply by a teenage offender:

Why did I get into trouble? I wanted attention, to be in the spotlight. I made bad decisions and didn't listen to my mom after my dad left. I also saw a lot of violence all around me, like my mom getting beat up when I was 6 years old, so I learned to react with violence. Then I just started kicking it with the homies—they were in a gang, so I joined too. (From Hoge, Guerra, & Boxer, *Treating the Juvenile Offender*, 2008).

How many risk factors are there in this story? Lack of attention, single parent, father absence, family violence, community violence, learning violence, bad decisions, lure of gangs—and just from a brief recollection. What this story illustrates is that risk comes from many sources and has cumulative effects over time. Early risk factors can set in motion a downward spiral of events that continue to increase the likelihood of aggression and violence. For this reason, early prevention before behaviors become habitual is more likely to demonstrate success than interventions during adolescence. The importance of preventive efforts beginning during the early years (infancy and preschool) is supported by several comprehensive reviews showing that programs for very young children can have short-term impacts on behavior as well as long-term impacts on the prevention of adolescent delinquency.

- **Home visitation, enhanced preschool, and parent training** programs have all been shown to be effective in helping parents and preventing aggression. The most well-known program is Nurse-Home Visitation (now called Nurse-Family Partnerships) that consists of intensive and comprehensive home visitation by nurses during a woman's pregnancy and the first two years after birth of her first child. This program has been certified as a "blueprint" program for effective violence prevention, with preventive effects in childhood and adolescence (<http://www.colorado.edu/cspv/blueprints/model/programs/NFP.html>)

- Programs for elementary school children should **optimize learning, teach social and cognitive-behavioral skills (self regulation, social problem solving)** and provide special attention for children with early aggressive behavior. At the same time it is important to continue with parent training and family interventions and provide needed resources and supports. One example of an effective school-home partnership for parents of infants, preschool and elementary school children is Families and Schools Together, a nationally-recognized program (www.wcer.wisc.edu/FAST). FAST is a family-strengthening and parent involvement program that builds relationships between parents and schools, empowers parents to become “protective agents” for their children, and helps parents learn family management and parenting skills.

Although early prevention and intervention programs are recommended, this does not mean that it is too late to have any impact with older youth. A number of studies and reviews of programs for teenage youth have found that certain types of programs work better than others. These include highly structured interventions (rather than unstructured programs) that involve a cognitive component linked to specific skills, interventions that engage families and reduce familial risk, and interventions that are more comprehensive and address multiple risk factors across different contexts. Interventions that group deviant youth together and involve harsh treatment (such as boot camps) have been found to be ineffective and even harmful.

Use Evidence-Based Programs and Principles

Another advance in preventing aggression and violence has been the identification and packaging of evidence-based programs. Evidence-based programs provide a structured approach for preventing aggression and violence, and typically offer technical assistance services for

implementation. Perhaps the most well-known listing of evidence-based (and promising) programs is the *Blueprints for Violence Prevention* project at the University of Colorado (www.colorado.edu/cspv/blueprints). Another listing of proven and promising programs is available from the National Youth Violence Prevention Resource Center (www.SafeYouth.org).

In this paper, we have mentioned a number of programs considered evidence-based or promising youth violence prevention programs based on carefully conducted research studies. These include the Olweus Bullying Prevention Program, Life Skills Training, Nurse-Family Partnerships, and Families and Schools Together. Several other family-based programs round out this list, including The Incredible Years parent training program for families of young children (www.incredibleyears.com) and Multisystemic Family Therapy for older youth (www.mstservices.com).

However, it is important to keep in mind that evidence-based programs may only be appropriate and effective with individuals, families, and/or communities similar to participants in the original program as evaluated. The evidence-base is often particularly limited for certain groups, for instance, incarcerated delinquents or some ethnic groups. This means that some evidence-based programs will be relatively easy to adapt if the “fit” is a good one. In other cases, programs can be adapted or developed in line with evidence-based principles for effective programming. We have mentioned a number of important **evidence-based principles**. To recap:

- Prevention should begin early and provide enhanced services for the more aggressive children.
- Preventive interventions should be multi-component and multi-context, addressing individual, peer, family, school, and community risk factors—families are particularly important from infancy through adolescence.

- Preventive interventions should incorporate cognitive-behavioral skill-building programs that address multiple cognitive factors most closely linked to risk.
- Structured interventions are more effective than unstructured approaches that only provide counseling and social work.
- Deviant peer influences are particularly important during adolescence—programs should redirect youth and their peer groups to prosocial engagement.

Build Strengths in Youth

Although we have emphasized the role of multiple and cumulative risk factors over time in the learning of aggression and violence, this does not mean that prevention of risk precludes building strengths in children and youth. In practice, there has been a certain amount of dissatisfaction with risk-focused approaches to prevention because they tend to emphasize what is “wrong” instead of what is “right” with children and their families. In other words, youth are seen as problems to be fixed, and development is portrayed as a process of overcoming deficits. As supporters of strength-based models have noted, a risk-focused approach can obscure the fact that the teenage years are also a time of mastery linked to each child’s unique talents, strengths, skills, and interests. An emphasis on the positive and adaptive features of adolescence (often called assets, protective factors, promotive factors, strengths, or competencies) has been incorporated into a number of different models generally considered to represent “positive youth development.”

Although risk-focused versus strength-based approaches often have been viewed as opposite and somewhat incompatible ends of a continuum, at this juncture it is more useful and cost-effective to emphasize their commonalities. Communities that want to embrace the talents and strengths of all youth also must address the very real problems of some youth that interfere

with their own development as well as the lives of others. The question then becomes how promotion of healthy development can also be an effective prevention tool against not only violence but other common youth problem behaviors. One strategy is to consider the most important strengths or competencies for healthy social and emotional development that also have been identified (at low levels) as risk factors for these youth problem behaviors.

In our own recent work, we have identified a set of “core competencies” for healthy development that have also been linked to risk for violence, substance use, early school leaving, and high risk sexual behavior. We describe these in detail in a forthcoming volume, *Core Competencies to Prevent Problem Behaviors and Promote Positive Youth Development* (Guerra, N. G., & Bradshaw, C., Eds., New Directions in Child and Adolescent Development).

We emphasize the importance of programs that build strengths in five key areas:

- **Positive sense of self**, including an accurate assessment of strengths and weaknesses, positive identity and sense of purpose, hopefulness, self esteem based on actual strengths, and “agency” or the ability to exert influence over relevant life events.
- **Self control**, including emotion regulation of internal feeling states (such as anger) and behavioral regulation of actions in service of goals (for instance, delay of gratification).
- **Decision-making skills**, including coordinating information, imagining future outcomes and their likelihood, and learning from negative consequences.
- **Moral system of belief**, including normative beliefs that discourage violence and harm to others and the development of a moral identity where moral action is linked to one’s self evaluation.

- **Prosocial connectedness**, embedded in a psychological state of belonging where youth perceive they and others are cared for, acknowledged, trusted, and empowered within a given context.

Some of the more comprehensive youth prevention programs available incorporate some of these core competencies. For example, Aggression Replacement Training (ART) emphasizes decision-making skills, impulse and anger control, and moral reasoning development (www.aggressionreplacementtraining.org). ART focuses primarily on aggression reduction and has shown some evidence of being effective for more seriously aggressive juvenile offenders. However, it is also important that the next generation of comprehensive strength-based programs incorporates a broader set of core competencies for healthy development and moves beyond prevention of violence alone to include prevention of multiple problem behaviors.