



# Prevention-Based Approach:

*What it means, how to use it to  
help programming and fundraising*

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# Overview

- **Prevention & Fundraising (Kaile)**
- **Prevention-Based Approach (Daniel)**
  - **Part 1: Presentation**
    - **Problem - Violence**
    - **Cause – Risk Factors**
    - **Solution – Prevention & Public Health Approach**
  - **Part 2: Discussion**
    - **Incorporating Prevention**
    - **Challenges/Opportunities**
    - **Next Steps**

# Problem: Violence

*Violence is a public health problem.*



# Definitions

## ➤ Violence

- The **intentional** use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, which either results in or has a high likelihood of resulting in **injury**, death, psychological harm, maldevelopment, or deprivation.

# Definitions

## ➤ Health

- A state of complete physical, social and mental **well-being**, and not merely the absence of disease or infirmity

# Definitions

## ➤ Epidemiology

- The study of the **distribution and determinants** of health-related states or events (including disease), and the application of this study to the **control** of diseases and other health problems.

# Impact of Violence

## ➤ Who:

- Violence affects individuals, families, communities and populations

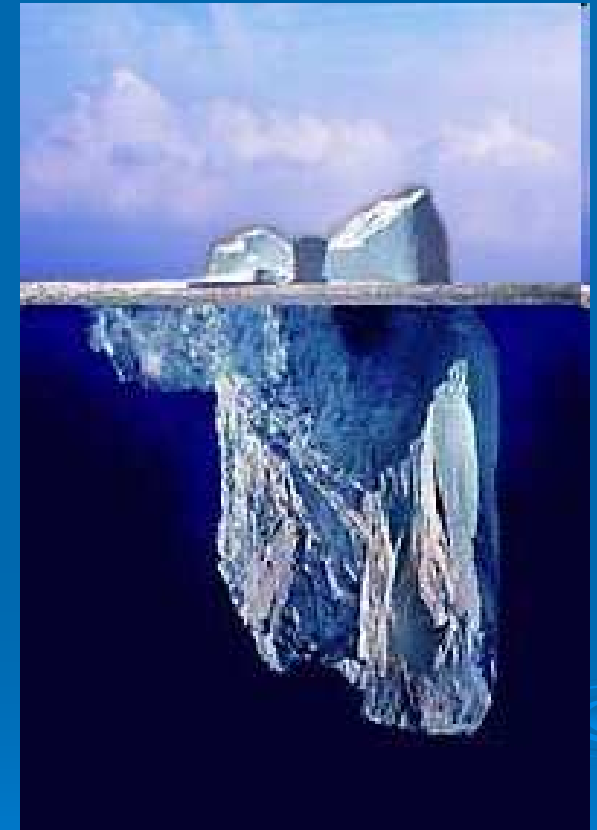
## ➤ Where:

- Violence occurs in homes, schools, workplaces and neighborhoods



# Mortality and Morbidity

- 1.6 million deaths per year, 4000 per day
- For every death, there are:
  - Dozens of hospitalizations
  - Hundreds of ER visits
  - Thousands of doctors' appointments
- Tip of the Iceberg: Much violence is never reported

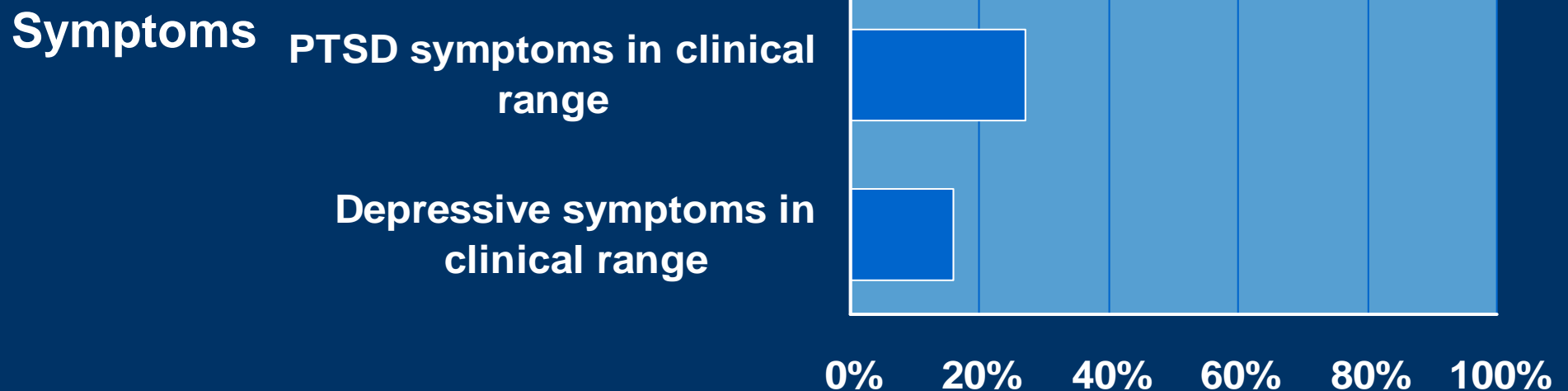
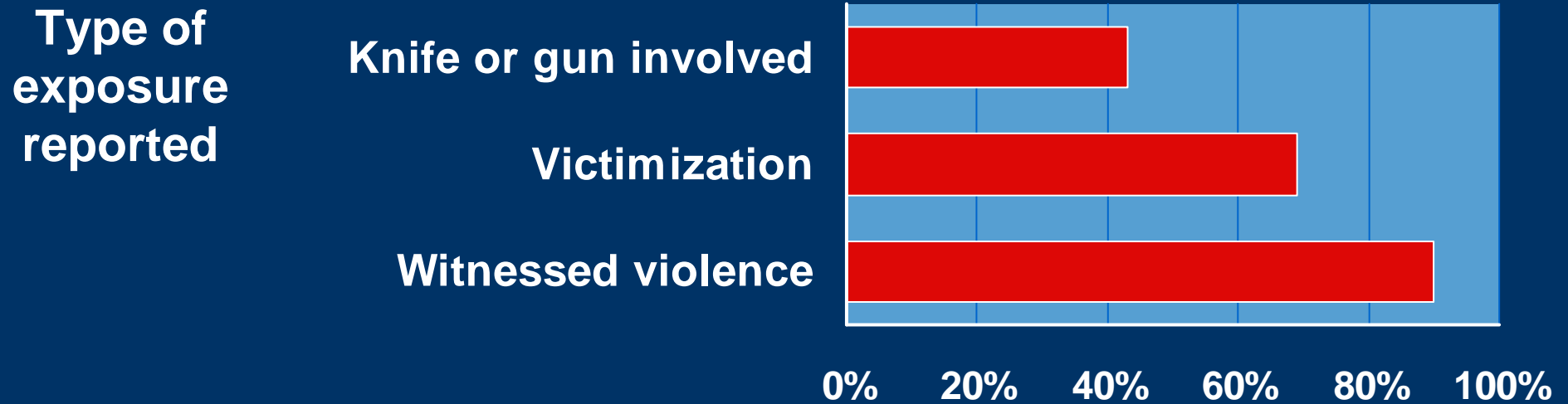


<http://www.japh.de/blog/>

# Health Impact of Violence

- Depression
- Anxiety
- Mental Disorders
- Suicide Attempts
- Chronic Pain Syndromes
- Unwanted Pregnancy
- HIV/AIDS, other STIs
- Children who are victims of violence have a higher risk of alcohol and drug misuse, smoking and high-risk sexual behavior throughout the lifespan

# Results of a school-wide screening of LAUSD 6<sup>th</sup> graders



Source: Marleen Wong, Ph.D., Director, Crisis Counseling and Intervention Services, Los Angeles Unified School District, LAUSD/RAND/UCLA Trauma Services Adaptation Center for Schools and Communities, National Child Traumatic Stress Network/SAMHSA

# Economic Burden

- Costs billions of dollars in health care, law enforcement, lost productivity
- Keeps businesses from thriving and new businesses from starting
- The average charge for a firearm hospitalization in 2006 in LA was \$76,590.<sup>2</sup>
- Gang violence in L.A. City is estimated to cost the city, county and state government over a billion dollars every year.<sup>1</sup>



By [http://infosthetics.com/archives/one\\_billion\\_dollars.jpg](http://infosthetics.com/archives/one_billion_dollars.jpg)

1. Golden, Megan and Jena Siegel. Cost Benefit Analysis. Vera Institute of Justice. p. 2.

2. Injury Hospitalization Fact Sheets. Injury & Violence Prevention Program, Los Angeles County Department of Public Health,

# Social Burden

- Causes deterioration of families and communities
- Hinders learning in schools
- Inhibits social cohesion
  - Trust and social interactions needed to build healthy communities



# Forms of Violence

- Violence in the home:
  - intimate partner violence, suicide, self abuse, elder and child abuse
- Violence in the streets/schools/workplace:
  - gang violence, bullying, sexual violence
- Nexus of Violence - co-occurrence:
  - Co-morbidity of gang violence and intimate partner/family violence

# Suicide

- 667 suicides in LA County in 2007 (6.6 per 100,000)<sup>1</sup>
  - 41% involved a firearm, 28% suffocation
- 4330 suicide attempt hospitalizations in LA County in 2007 (41.5 per 100,000)<sup>2</sup>
  - (4545, 42.7 in 2008)
- 7 times as many hospitalizations as deaths

1. Los Angeles County Department of Public Health, Injury & Violence Prevention Program (January 2010). Number and Rate per 100,000 of Suicides Among Los Angeles County Residents by Year, 2003-2007 [online data table]. Available from: [www.ph.lacounty.gov/ivpp](http://www.ph.lacounty.gov/ivpp)

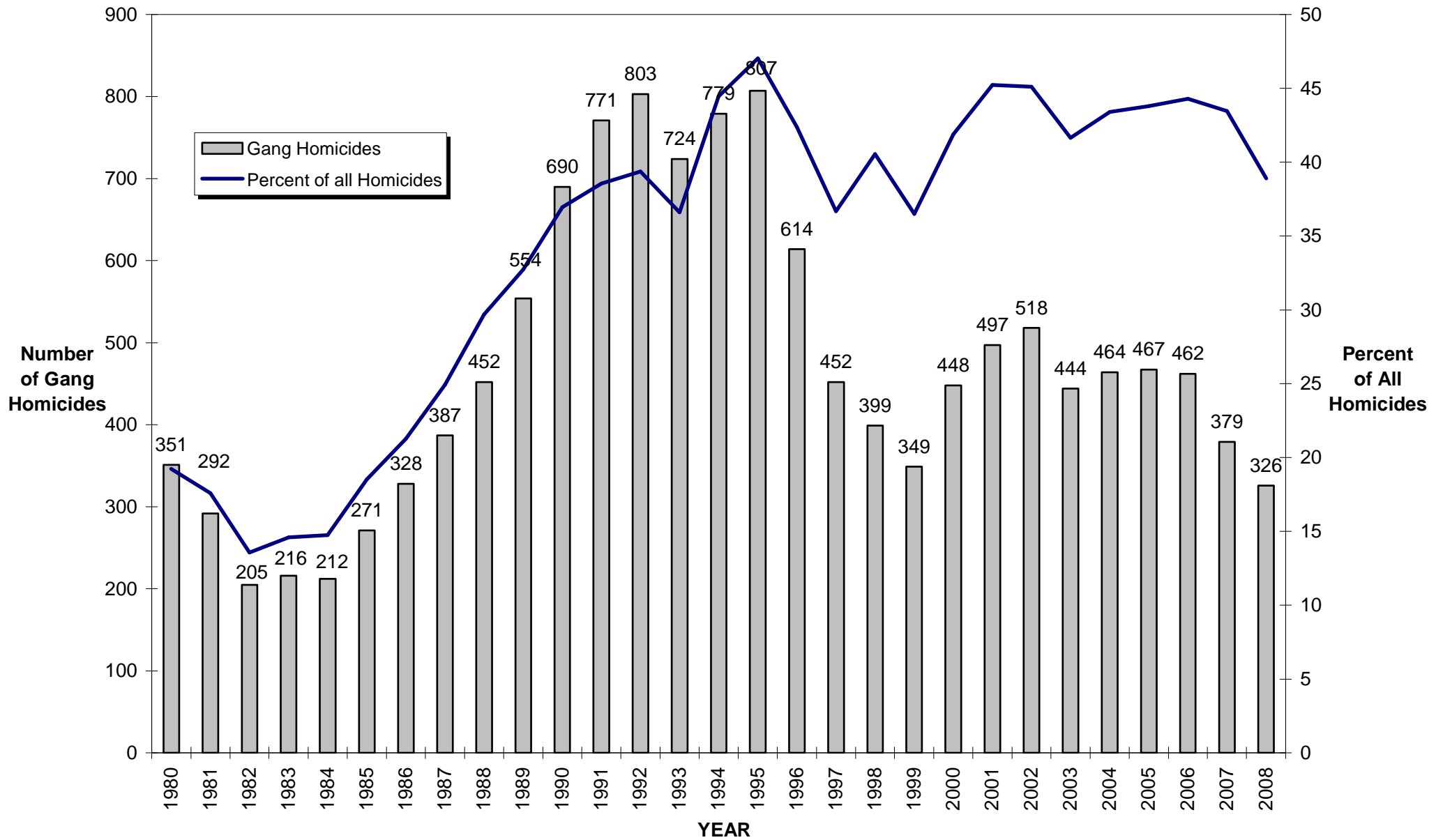
2. Los Angeles County Department of Public Health, Injury & Violence Prevention Program (November 2009). Number and Rate per 100,000 of Non-Fatal Suicide Attempt Hospitalizations Among Los Angeles County Residents by Year, 2004-2008 [online data table]. Available from: [www.ph.lacounty.gov/ivpp](http://www.ph.lacounty.gov/ivpp)

# Gang Violence

- L.A. City: In 2007, 56% of homicides in the City of Los Angeles were gang-related (220 out of 394).

Los Angeles Police Department (2008). Gang Statistics By Month, January 2008. Available online: [http://www.lapdonline.org/crime\\_maps\\_and\\_compstat](http://www.lapdonline.org/crime_maps_and_compstat). Accessed June 2009.

# Gang Homicides in Los Angeles County, 1980-2008



Prepared by Los Angeles County Dept of Public Health, Injury and Violence Prevention Program. April 21, 2011

Sources: LA Sheriff Dept, LA Police Dept, LA Dept of Coroner, CA Dept of Health Services - Center for Health Statistics, Death Statistical Master File

# Homicide in L.A. County (2009): Intimate Partner Violence (IPV), Child Abuse and Other Incidents

Circumstance	N	Number of Homicides	Percentage of Homicides
Intimate Partner Violence	31		4.7%
Child Abuse	16		2.4%
Other Argument	115		17.3%
Gang Related	333		50.1%
Drive-by Shooting	53		8.0%
Precipitated by Crime	88		13.2%
Totals (Including others)	727	665	

# Firearm Related Violence

- Firearm Violence in Los Angeles – 989 deaths due to firearms in 2007 among L.A. County Residents, 1777 non-fatal firearms hospitalizations<sup>1</sup>
- 2011 Year to Date: 446 shooting victims in LA City<sup>2</sup>

1. Los Angeles County Department of Public Health, Injury & Violence Prevention Program (January 2010). Available from: [www.ph.lacounty.gov/ivpp](http://www.ph.lacounty.gov/ivpp)

2. Los Angeles Police Department (2011). Compstat City-wide profile, 4/10/11-5/7/11. Available online: <http://www.lapdonline.org/assets/pdf/cityprof.pdf>

## Number of Firearm Hospitalizations and Average Annual Age Adjusted Hospitalization Rate by SPA, Los Angeles County, 2000-2006

SPA	Number	Rate
1: Antelope Valley	369	15.4
2: San Fernando	1,414	9.8
3: San Gabriel	1,095	8.2
4: Metro	1,956	22.6
5: West	324	7.6
6: South	5,589	70.7
7: East	1,574	15.4
8: South Bay	2,298	20.8
LA County Total	14,619	20.1

*Note: Rates are per 100,000 population. The small number of patients with unknown SPA were added to the most populous SPA (SPA 2). Source: Los Angeles County Injury Hospitalization Report 2008. LADPH Injury & Violence Prevention Program. Available online: <http://www.publichealth.lacounty.gov/ivpp>*

*One of the greatest public safety and public health epidemics of our time...  
is children's **exposure to violence.***

-U.S. Attorney General Eric Holder on  
Defending Childhood Initiative

# The Violence Toll: Children



**850,000**

LA County kids living in violent crime areas

**300,000**

LA city kids living in gang hot zones

**120,000**

LA kids exposed to chronic gang violence & poverty

# Cause: Risk Factors

*Violence is a learned behavior.*

The background features several sets of concentric circles in a lighter shade of blue, resembling ripples on water. These circles are positioned in the lower half of the slide, with one set on the left, one in the center, and a larger one on the right.

# Video

<http://youtu.be/CWUtywfwMw>

# Risk Factors

- poverty and economic disparity
- discrimination and oppression
- negative family dynamics
- firearms
- media violence
- alcohol and other drugs
- incarceration and re-entry
- experiencing and/or witnessing violence
- community deterioration
- illiteracy and academic failure
- truancy
- mental illness
- traditional gender socialization

# Risk Factors

- Biological and social risk factors for violence occur very early in life



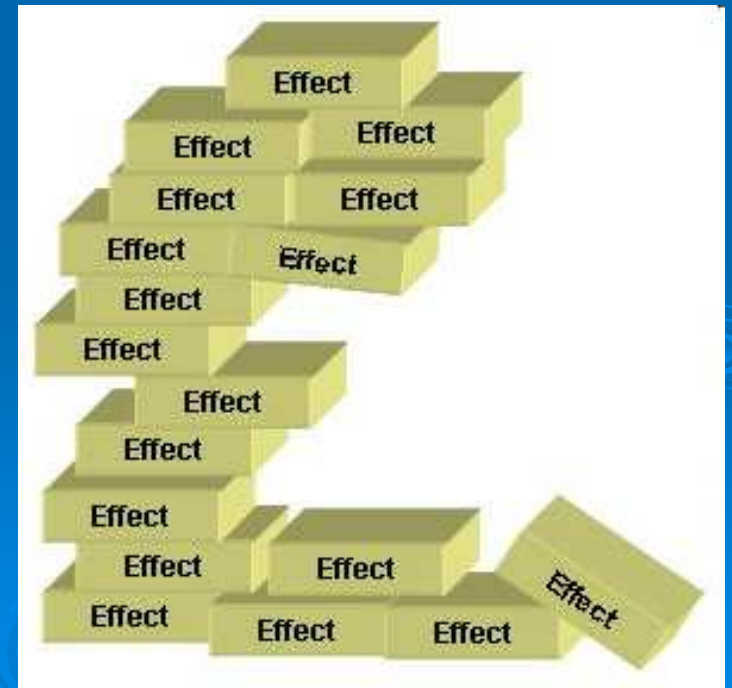
# Risk Factors

- Serious, chronic violent behavior is predictable from early antisocial behavior



# Risk Factors

- Risk is cumulative, and early exposure to risk factors increases the chance of being exposed to more risk factors later



# Resilience/Protective Factors

- economic capital
- meaningful opportunities for participation
- positive attachments and relationships
- good physical and mental health
- social capital
- built environment
- high quality services and institutions
- emotional and cognitive competence
- artistic and creative opportunities
- ethnic, racial, and intergroup relations
- media and marketing
- others?

# Solution: Prevention & The Public Health Approach

*Violence is preventable.*

The background of the slide is a solid blue color. In the lower right quadrant, there are several sets of concentric circles, resembling ripples in water, rendered in a lighter shade of blue. These circles are of varying sizes and are arranged in a way that suggests movement or a series of events.

# Examples of Public Health Interventions

- Health education campaigns to promote immunization & sanitation
  - Prevent **Infectious Disease**
- Seat belt & Motorcycle helmet laws
  - Prevent Motor-Vehicle Related **Injuries**
- Antismoking policies & Healthy eating media campaigns
  - Prevent **Chronic Disease**

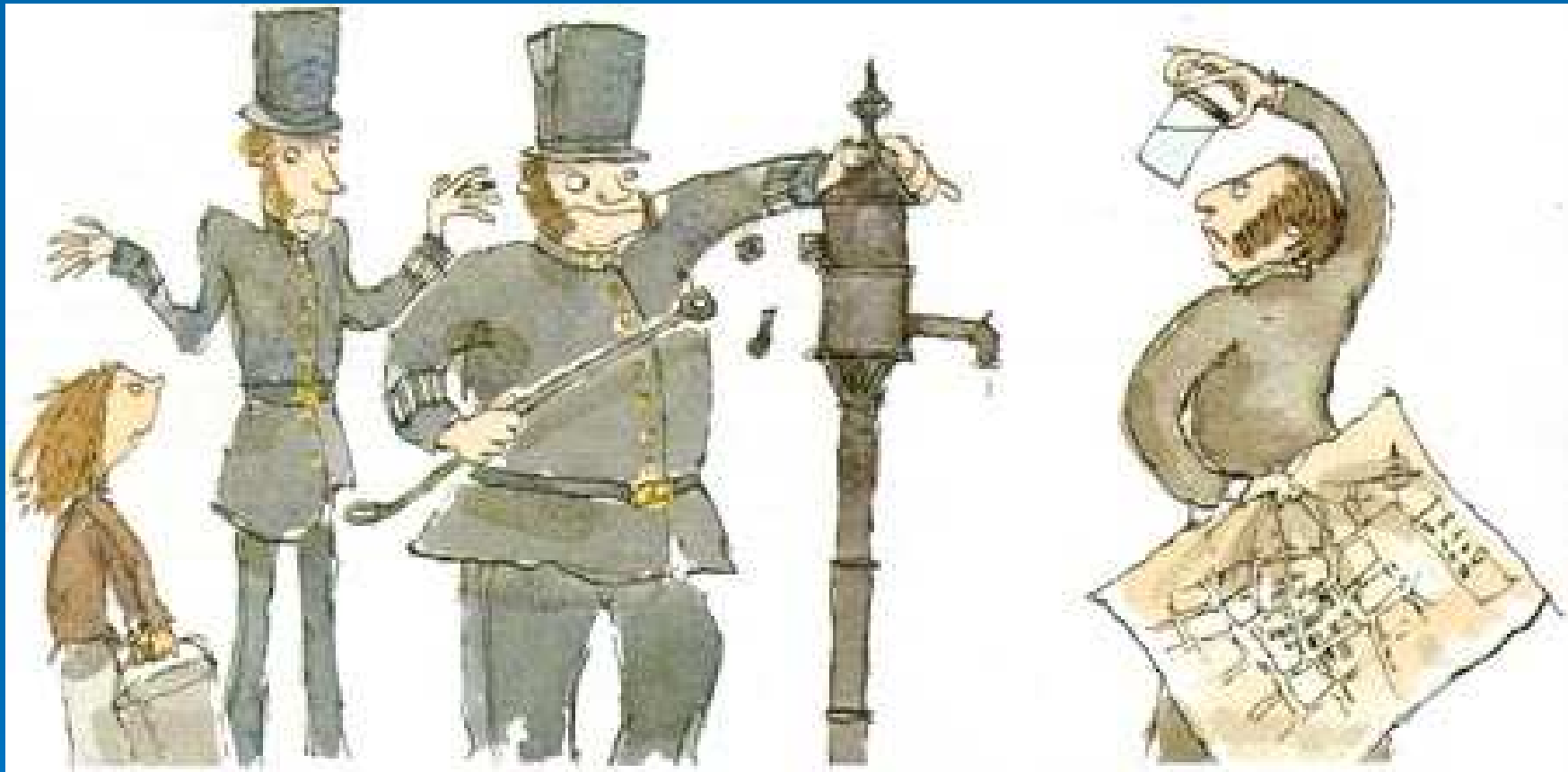


# Violence is Preventable

- Violence is not inevitable and random.
  - There are distinct, predictable patterns of occurrence in the data.
- There are modifiable risk and resiliency factors for violence.

*Violence and injuries due to violence are preventable.*

# Father of Modern Epidemiology – John Snow



Source: Tuthill, Kathleen. Cricket 31(3), pp. 23-31, Nov. 2003  
Accessed online: <http://www.ph.ucla.edu/epi/snow/snowcricketarticle.html>  
Illustration: Rupert Van Wyk (c) 2003 by Carus Publishing Company.

# Cholera Epidemic

- Look at the data
- Identify risk factors
- Reduce risk factors to prevent spread of disease
- Evaluate efforts

# Cholera Epidemic

- Source of contamination not known
  - Diaper washing later discovered
- Agent, bacterium *Vibrio cholerae* was not known until 1883, 29 years later
- It took many years before officials closed the cesspools and repaired the sewers and drains.

# Applying epidemiologic principles to violence

- How, where, and among what specific populations does violence spread?
- How do you engage a community or population in alternatives to violence on a large scale?

# Applying epidemiologic principles to violence

- How do you modify the environment so that violence does not occur?
- How do you change the social norms that condone violence?

# Applying epidemiologic principles to violence

- How do you impact conditions and systems that contribute to the spread of violence?
- What vectors of violence can be reasonably controlled to prevent the spread of violence?

# 4 Elements of the Public Health Approach



# I. Prevention

- Prevention vs. treatment
  - Address **risks** of disease/event **before** it occurs
  - Both prevention and treatment are necessary
- Prevention saves lives and \$\$\$

<b>Blueprints Model Programs</b>	<b>Benefit per Dollar of Cost</b>	<b>Outcome</b>
Big Brothers Big Sisters	\$ 1.01	Drugs, Crime, Educational
Functional Family Therapy	\$13.25	Crime reduction
Life Skills Training	\$25.61	Drug reduction
Midwestern Prevention (Project STAR)	\$ 5.29	Drug reduction
Multidimensional Treatment Foster Care	\$10.88	Crime reduction
Multisystemic Therapy	\$ 2.64	Crime reduction
Project Towards No Drug Abuse	\$55.84	Drug reduction
Nurse-Family Partnership	\$ 2.88	Crime reduction

Source: Steve Aos, Roxanne Lieb, Jim Mayfield, Marna Miller, Annie Pennucci. (2004) Benefits and costs of prevention and early intervention programs for youth. Olympia: Washington State Institute for Public Policy.

*In both industrialized and developing countries, **priority is usually given to dealing with the immediate consequences of violence** ... While such responses are important and should be strengthened wherever possible, **there needs to be a much greater investment in primary prevention of violence** – that is, measures to stop violence from occurring in the first place.*

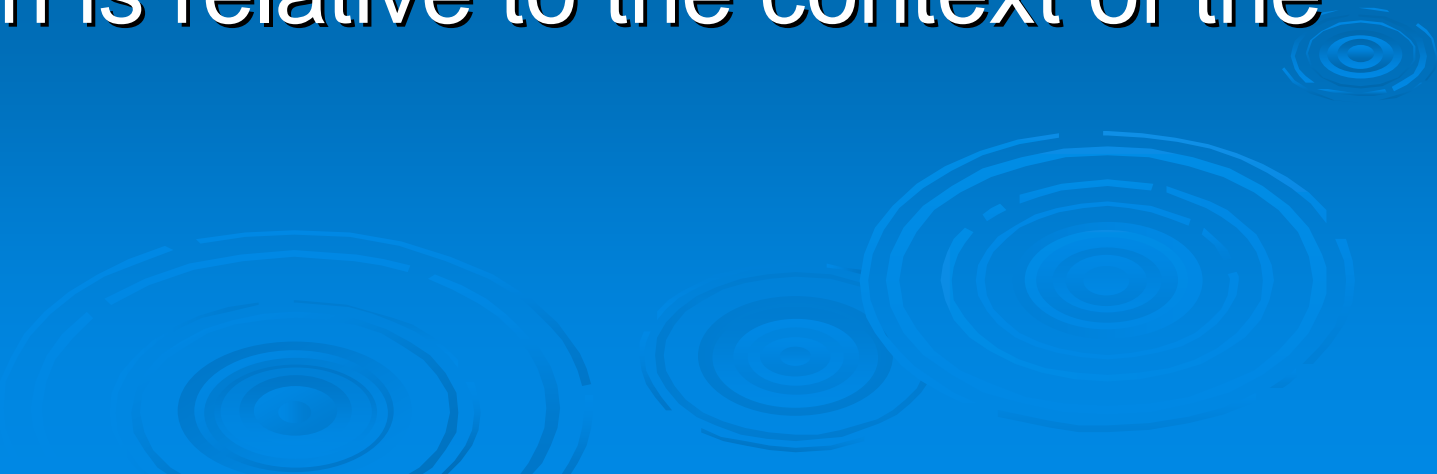
*-World Health Organization on Prevention*

# Prevention may go unnoticed

- When prevention works, the problem may never be seen
- Solution:
  - Monitor data
  - Compare data
  - Attribute data

...you can see the difference prevention makes!

# 3 Basic Forms of Prevention

1. Primary
  2. Secondary
  3. Tertiary
- What is primary, secondary, and tertiary prevention is relative to the context of the event.
- 
- The background of the slide features several faint, concentric circular ripples in a lighter shade of blue, resembling water droplets or raindrops, positioned in the lower right and bottom center areas.

# Primary Prevention

- Primary prevention is an intervention that takes place among an **entire** population, **prior** to an event occurring, to prevent its **occurrence**.
  - Proactive
  - Violent Crime “Prevention”
  - Examples:
    - Universal, school-based violence prevention program, nurse home visits

# Secondary Prevention

- Secondary prevention is an intervention that takes place among an **at-risk subset** of the population, **prior** to an event occurring, or **in the midst** of an event occurring, to prevent its **occurrence**.
  - Proactive/Reactive
  - Violent Crime “Intervention”
  - Examples: youth development and gang intervention in crime “hot spots”

# Tertiary Prevention

- Tertiary prevention is an intervention that takes place among an **affected sub-set** of the population **after** an event has occurred, to prevent its **reoccurrence**.
  - Reactive, “treatment” approach
  - Violent Crime “Suppression”
  - Examples: Incarcerating violent offenders, providing re-entry services

## II. Data Driven

- Focus of efforts is based on data
- Evaluation
- Evidence-based programs or practices

# Data Resources

## ➤ WISQARS

- <http://www.cdc.gov/injury/wisqars/index.html>

## ➤ EpiCenter

- <http://epicenter.cdph.ca.gov>

## ➤ Report: Domestic Violence Data Sources

- <http://publichealth.lacounty.gov/ivpp>

# Evaluation Resources

## ➤ Strategy Evaluation Guidebook

- [http://www.vpcgla.org/content/Tools\\_Online\\_Resources](http://www.vpcgla.org/content/Tools_Online_Resources)

## ➤ Assessment tools:

- Bullying

- [http://www.cdc.gov/ViolencePrevention/pub/measuring\\_bullying.html](http://www.cdc.gov/ViolencePrevention/pub/measuring_bullying.html)

- Youth Violence

- <http://www.cdc.gov/ncipc/pub-res/measure.htm>

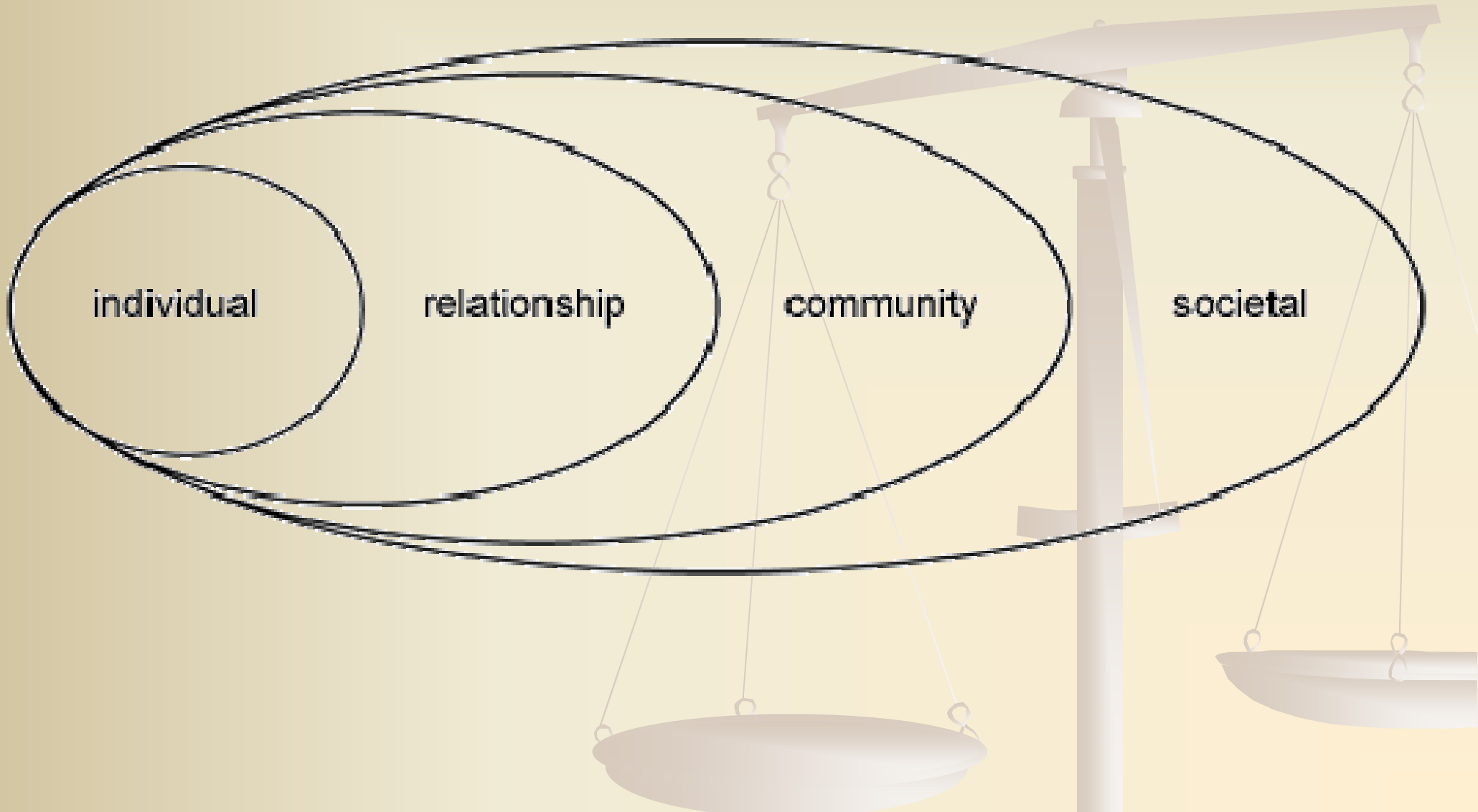
# Evidence-Based Programs Resources

- OJJDP Model Program Guide
  - <http://www.ojjdp.gov/mpg/>
- Blueprints for Violence Prevention
  - <http://www.colorado.edu/cspv/blueprints/>
- Violence Prevention: the evidence
  - [http://www.who.int/violence\\_injury\\_prevention/violence/4th\\_milestones\\_meeting/publications/en/index.html](http://www.who.int/violence_injury_prevention/violence/4th_milestones_meeting/publications/en/index.html)

# III. Population-Based

- Focus on groups, communities, institutions and society
- Maximum benefit for the largest number of people
- Scale of the problem requires scale of the solution

# Socio-Ecological Model



# 1. Individual Level Prevention Strategies

## ➤ Life Cycle

- Because risk is cumulative, **the earlier the intervention, the more effective it should be** in changing the long-term developmental trajectory toward violence

## ➤ Early prevention:

- Prenatal (before birth)
  - Improve nutrition, Prevent birth complications
- Perinatal (immediately around time of birth)
  - Prevent alcohol and drug-use among high-risk pregnant women, Teach child care & stress management skills
- Postnatal (infancy to age 5)
  - Provide therapeutic treatment for young children with behavioral problems

# 1. Individual Level Prevention Strategies

- Ages 3-5 years
  - Pre-school enrichment programs
- Aged 6 to 18 years
  - Life skills training and social development programs
- High-risk adolescents and young adults
  - Completing schooling and pursuing courses of higher education and vocational training.
- Other examples:
  - media literacy, substance-abuse prevention, counseling for victims of violence, self-defense classes

## 2. Relationships

- Providing **training for parents** on child development, non-violent discipline and problem-solving skills
- Promoting **parental involvement** in the lives of children and adolescents through programs to develop home-school partnerships
- **Mentoring** programs to develop attachments between high risk youth and caring adults in order to build social skills and provide a sustained relationship

# 3. Community

- Increasing the availability and quality of **childcare** facilities
- Increasing the availability and quality of **pre-school enrichment** programs
- Improving **school settings**, including teacher practices, school policies and security
- Forming truces between rival **gangs**
- Improving relationship between **law enforcement and the community**

# Society

- Reducing alcohol availability and misuse through enactment and enforcement of liquor licensing **laws, taxation and pricing**
- **Reducing access** to lethal means, including firearms, sedatives and pesticides
- Promoting gender **equality** through strategies such as supporting the economic **empowerment** of women

# Firearms

- **Educate** parents/guardians about risk associated with keeping a gun in the home and teach children the dangers of guns;
- **Develop policies**, such as safe storage requirements and close loopholes in secondary markets, so that acquiring a gun requires same scrutiny no matter where purchased; and
- **Intervene** in times of crisis, averting possible violent situations by providing services (e.g. suicide hotlines, anger management, conflict resolution).

# IV. Requires integrated, collaborative strategy

- Violence is complex and requires a comprehensive approach
- Everyone has a role to play



Weiss, B. Public Health Approach to Violence and Violence Prevention. Presented on April 21, 2011.

*Violence is not the problem of one neighborhood or group, and the response and solutions are not the responsibility of one sector of the community or of one agency, professional group, or business. Coming together and owning this problem and the solutions are central.*

-Dr. Deborah Prothrow-Stith,  
Co-Chair of UNITY

# Collaboration

## ➤ UNITY Assessment Report:

- Large urban cities with a higher degree of coordination, communication and attention to prevention among city agencies tend to have a lower prevalence of youth violence

## ➤ Advancement Project's Citywide Gang Activity Reduction Strategy: Phase III Report

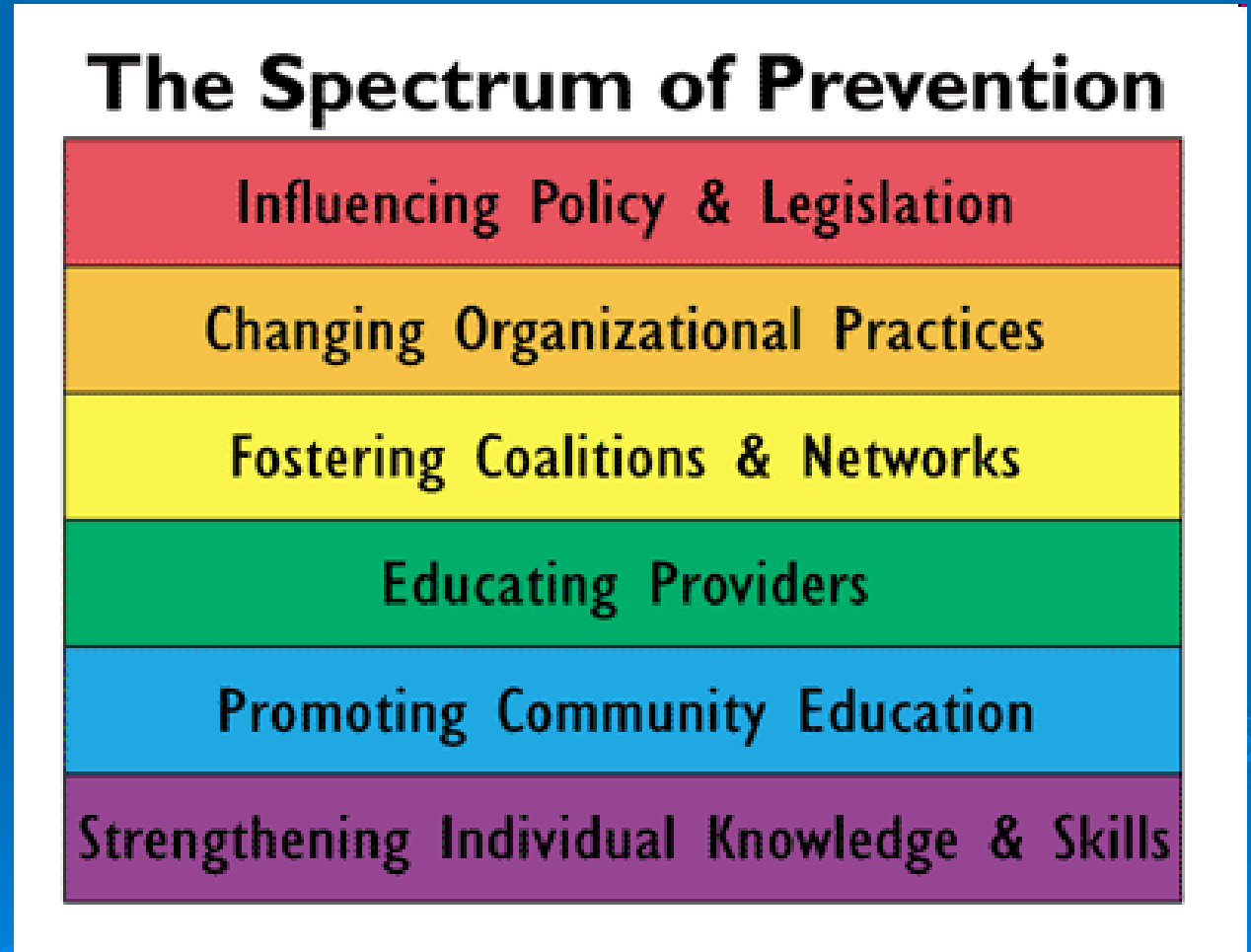
- Coordinated collaboration is key
- Belmont/Rampart Violence Reduction Collaborative



“Our Vision for Westlake/MacArthur Park 2020” Mural by Being Empowered Advocates for Street Transformation (BEAST)

# Spectrum of Prevention

- Build on existing work
- Move beyond individual strategies
- Develop comprehensive prevention plan



# Spectrum of Prevention

<b>Level of Spectrum</b>	<b>Definition of Level</b>	<b>Examples</b>
1. Strengthening Individual Knowledge and Skills	Enhancing an individual's capacity to prevent injury and promote safety	Bystander training
2. Promoting Community Education	Reaching groups of people with information and resources to promote health and safety	Stage community plays that reinforce positive cultural norms and models of bystander action

# Spectrum of Prevention

Level of Spectrum	Definition of Level	Examples
3. Educating Providers	Informing providers who will transmit skills and knowledge to others	Train teachers to build skills to interrupt inappropriate comments and promote behaviors that promote a climate condoning violence
4. Fostering Coalitions and Networks	Bringing together groups and individuals for broader goals and greater impact	Engage grassroots, community-based organizations and sectors of government

# Spectrum of Prevention

5. Changing Organizational Practices	Adopting regulations and shaping norms to improve health and safety	Implement and enforce sexual harassment and sexual violence prevention practices in schools
6. Influencing Policy and Legislation	Developing strategies to change laws and policies to influence outcomes.	Establish policies at schools to provide sexual violence prevention curriculum to all students and training to all staff

# Efforts that have shown violence is preventable

- Universal school-based violence prevention efforts decrease rates of violence among school-aged children and youth
  - (Meta-analysis of 65 studies, preK-High, median relative reduction of 15% in intervention vs. control populations, IQR: -2.3%, -44.1%)

# Public Health Approach to Gang Violence

- Boston's Operation Ceasefire
- CeaseFire Chicago
- New York City's Harlem Children's Zone and Beacon Centers
- Alameda County Blueprint for Violence Prevention



# Violence Prevention Success Stories in Los Angeles


- Summer of Success, precursor to Summer Night Lights
- Santee High School, school-community transformation
- MacArthur Park Transformation, community collaboration to make park clean and safe
- Others?

Advancement Project (2005). *Citywide Gang Activity Reduction Strategy: Phase III Report*. Available online:  
[http://www.advancementprojectca.org/doc/p3\\_report.pdf](http://www.advancementprojectca.org/doc/p3_report.pdf)

<http://www.viewfromaloft.org/2009/09/macarthurpark-meadows-opens.html>



# Benefits of the Prevention-Based Approach to Violence

- Reduced crime and injuries
  - Lives saved
  - Improved health and wellness
  - Resources better spent
  - Healthy communities
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- The background of the slide features several sets of concentric circles in a lighter shade of blue, resembling ripples in water. These circles are positioned in the lower right and bottom center areas of the slide.

# Small Group Discussion

- How do you incorporate prevention principles in your work?
- What are the challenges you face?
- How would you make the case to a decision maker about the importance of investing in primary prevention?

# Report Back

- What challenges were discussed?
- How can we work together on prevention?  
What opportunities are available?

# Next Steps

- COLLABORATE around prevention efforts
- EVALUATE prevention efforts
- ADVOCATE for prevention efforts

# Sources for more information:

- Violence Prevention Coalition of Greater LA:  
<http://www.vpcgla.org>
- Prevention Institute/UNITY:  
<http://www.preventioninstitute.org/unity.html>
- Advancement Project:  
<http://www.advancementprojectca.org/>
- CDC Injury Prevention and Control:  
<http://www.cdc.gov/violenceprevention/>
- WHO Violence and Injury Prevention and Disability:  
[http://www.who.int/violence\\_injury\\_prevention/violence/en/](http://www.who.int/violence_injury_prevention/violence/en/)