Violence refers to immediate or chronic situations that result in injury to the psychological, social, or physical well-being of individuals or groups. While acknowledging the multidimensional nature of violence, the APA Commission on Violence and Youth focused on interpersonal violence, which is defined as behavior by persons against persons that threatens, attempts, or completes intentional infliction of physical or psychological harm.

Youth is the period during which children may interact with school systems, from preschool through college: ages 3 to 22.

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Executive Summary

More than 50 years ago, psychology first brought the study of violence and aggression into the realm of science. The American Psychological Association (APA) Commission on Violence and Youth was convened to bring the findings of past and current research to bear on the troubling national problem of violence involving youth.

The Commission’s work overwhelmingly affirms a message of hope: Our society can intervene effectively in the lives of children and youth to reduce or prevent their involvement in violence. Violence involving youth is not random, uncontrollable, or inevitable. Many factors, both individual and social, contribute to an individual’s propensity to use violence, and many of these factors are within our power to change.

Laying the groundwork for preventing violence begins early in a child’s development. In their early years, children learn fundamental ways of dealing with social conflict. Everyone who comes into contact with the child—parents, educators, childcare providers, healthcare providers—has the potential to contribute to a child’s attitudes toward violence and propensity toward violent behavior. Similarly, every institution that touches children’s family, schools, mass media, community and religious organizations—can contribute positively to children’s sense of safety and to their preference for alternatives to violence.

Children who begin to show aggressive behavior early require prompt intervention. The greatest predictor of future violent behavior is a previous history of violence. Without systematic and effective intervention, early aggression commonly will escalate into later violence and broaden into other antisocial behavior.
EXECUTIVE SUMMARY

Social forces such as prejudice, economic inequality, and attitudes toward violence in the mainstream American culture interact with the influences of early childhood to foster the expression of violence. Not everyone affected by these forces, however, turns to violence. In some cases, for example, forces within the child’s ethnic culture may serve as a buffer against adverse social circumstances. Culture builds identity, sets norms for behavior, and provides a sense of group cohesion that is vital to a child’s growth and development. A promising area for intervention efforts is in identifying and strengthening the protective factors that keep the vast majority of youth from turning to violence as a response to social conditions.

When children and youth come in contact with certain social experiences, their risk of involvement with violence increases. These experiences include: access to firearms; involvement with alcohol and other drugs; involvement in anti-social groups, including delinquent gangs and violent mobs; and exposure to violence in the mass media. It is important to stress, however, that no specific social experience inevitably leads to violence. The degree of risk is strongly influenced by what the child or youth previously learned about violence and aggression. A youth is far more likely to carry or use a gun, for example, if he or she already has exhibited a propensity to use violence in other circumstances.

Children and youth who are victims of violence or who live with the chronic presence of violence in their communities require interventions to decrease their risk of future victimization and of future involvement in violence as a perpetrator. Except for hate crimes, it is the condition of social and economic inequality in which many ethnic minority youth live—and not their ethnicity—that places them at increased risk for becoming victims of violence. Certain groups of children and youth—notably girls and young women, gay and lesbian youth, and children and adolescents with disabilities—are placed at special risk not by any inherent factor related to their status, but by the biases, discriminatory behaviors, and inequalities of power in the society around them.

On the basis of these psychological perspectives, the Commission recommended a variety of specific efforts in the following areas:
- **Early childhood interventions** directed toward parents, childcare providers, and healthcare providers to help build the critical foundation of attitudes, knowledge, and behavior related to aggression.

- **School-based interventions** to help schools provide a safe environment and effective programs to prevent violence.

- **Heightened awareness of cultural diversity** and involvement of members of the community in planning, implementing, and evaluating intervention efforts.

- **Development of the mass media’s potential to be part of the solution to violence**, not just a contributor to the problem.

- **Limiting access to firearms by children and youth** and teaching them how to prevent firearm violence.

- **Reduction of youth involvement with alcohol and other drugs**, known to be contributing factors to violence by youth and to family violence directed at youth.

- **Psychological health services for young perpetrators, victims, and witnesses of violence** to avert the trajectory toward later involvement in more serious violence.

- **Education programs to reduce prejudice and hostility**, which are factors that lead to hate crimes and violence against social groups.

- **Efforts to strengthen the ability of police and community leaders to prevent mob violence** by early and appropriate intervention.

- **Efforts by psychologists acting as individuals and through professional organizations** to reduce violence among youth.
EXECUTIVE SUMMARY

Not all of these remedies are expensive. Even those that require consider-
able investment of resources are far less costly—in dollars and in human capital—
than the alternative of letting violence continue to ravage our children and our
communities. Even if we cannot do it all, it is important to make a beginning at
once. Every step we take, guided by the findings of scientific research, will make a
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More than a half-century ago, psychology brought the study of violence and human aggression into the realm of science. The Commission on Violence and Youth of the American Psychological Association (APA) was empaneled in July 1991 to bring the body of knowledge generated during the last 5 decades to bear on the troubling national problem of violence involving youth.

Although violence involving youth is hardly a new phenomenon in the United States, both the quantity and quality of this violence have undergone dramatic change within the past 10 to 15 years. Mere statistics cannot tell the story, but the following observations will suggest how much the parameters of the problem have altered:

- **Homicide is the most common cause of death for young African American females as well as for young African American males.** The probability of a young African American female dying by homicide is four times that of a non-African American female. A young African American male is 11 times more likely to die by homicide than a non-African American male.

- **Children can buy handguns on street corners in many communities.** In part because of this ready availability of firearms, guns are involved in more than 75% of adolescent killings. “Get rid of the guns,” said a teenage girl from a violent neighborhood in Washington, DC, when APA members asked her what adults could do to stop the violence in her community.

- **The intensity of violence involving children and youth has escalated dramatically.** In testimony presented to APA, Mireille Kanda, MD, who then was Director of Child Protection Services at Children’s National Medical Center in
Washington, DC, noted that the rate of penetrating trauma caused by violence seen in her emergency department increased 1,740% between 1986 and 1989.

- Children are becoming involved in violence at ever-younger ages.
In a study of first and second graders in Washington, DC, 45% said they had witnessed muggings, 31% said they had witnessed shootings, and 39% said they had seen dead bodies. A 17-year-old African American girl from Boston told a state task force that she had attended the funerals of 16 friends aged 14 to 21 who had died by violence.

Although young people are disproportionately represented on both sides of the knife or gun, it is important to consider their experiences as part of the larger picture of violence in America. By many measures, the United States ranks first among nations in its rates of interpersonal violence. The United States has the highest homicide rate of any Western industrialized country—a rate that is, in fact, many times higher than that of the country with the next highest rate. At current rates, more than 25,000 Americans are murdered each year, and homicide is the tenth leading cause of death in our nation.

In inner-city communities, violence often is dramatically evident in nightly shootings and in the daytime struggle of families to keep their children from becoming perpetrators or victims. The problem of youth violence is not limited to urban environments, however. Domestic violence, hate crimes, sexual violence, and violence among peers pose threats to children and teenagers in every American community. No one is immune to the pervasive violence in American society, although the probabilities of involvement are affected by race, social and economic class, age, geographical area, population density, and other factors.

These dismal statistics and the inescapable pervasiveness of violence affecting American youth have led people in communities throughout the country to feel a sense of helplessness and hopelessness.
Psychology’s message, however, is one of hope. The Commission overwhelmingly concluded, on the basis of the body of psychological research on violence, that violence is not a random, uncontrollable, or inevitable occurrence. Many factors, both individual and social, contribute to an individual’s propensity to use violence, and many of these factors are within our power to change.

Although we acknowledge that the problem of violence involving youth is staggering and that there are complex macrosocial, biomedical, and other considerations that must be addressed in a comprehensive response to the problem, there is overwhelming evidence that we can intervene effectively in the lives of young people to reduce or prevent their involvement in violence.

In this summary report and in a subsequent volume of papers that will be issued for study by the scientific community (see Appendix 1), the Commission on Violence and Youth will review what psychology has learned about the factors that cause and contribute to youth violence. Both the summary and the larger volume stress the practical applicability of that research—how it can guide us in creating, evaluating, and replicating effective preventive and treatment programs. The larger volume contains detailed supporting data and references for the assertions made in the summary volume.

By no means is the issuance of a report meant to suggest that the answers are all available or that the solutions are easy. In its work, the Commission encountered many of the challenges and barriers identified in recent reports by other expert panels, notably that of the National Commission for Injury Prevention and Control of the U.S. Centers for Disease Control and Prevention (CDC) and of the Panel on the Understanding and Control of Violence of the National Research Council (NRC).

Because violence is a multidetermined behavior, basic and applied research on its causes and solutions poses complex methodological issues. Even the prevalence data used by federal agencies to define the problem are fraught with contradictions—a fact acknowledged by most researchers working in the field of youth violence and discussed at length by the NRC panel in its report.
In many key areas, the Commission found a paucity of relevant research. In some cases, the gaps are a reflection of the changing nature of violence in America. For example, little research exists on the phenomenon of apparently motiveless interpersonal violence—a phenomenon that has become extensive enough to permit systematic study only within the last few years.

Another important gap is in the lack of availability of outcome data on many existing youth violence prevention or treatment interventions. In some cases, the interventions are simply too new to have outcome data; in others, program professionals may not have had access to the expertise or resources necessary to design and conduct scientifically sound evaluations. Interventions directed at youth who have been victims of or witnesses to violence, for example, present formidable challenges to evaluation because these interventions typically take place in uncontrolled settings.

These challenges and barriers notwithstanding, psychology can make a significant contribution in the area of program development, evaluation, and outcome research by linking knowledge about the nature and causes of youth violence to effective prevention and treatment and to community efforts. In a time when society’s resources are strained, it is essential that intervention efforts be based on sound scientific foundations, so that every dollar invested in solutions yields the maximum benefit. Psychologists have considerable experience in developing testable theoretical formulations and scientific methods and measures to evaluate interventions and to identify those with the greatest potential impact.

During hearings held by the Commission, expert participants repeatedly urged APA to go beyond the mere production of a report and to offer communities new and effective responses to youth violence. For this reason, APA will actively seek to promote the research-based recommendations that conclude this report among federal, state, and local policymakers and others in a position to bring about change. The Association also will seek ways to educate psychologists, other professionals, and the general public about issues related to violence and youth; to involve interested APA members in developing research-based model interven-
tions on the basis of the Commission’s perspective on prevention and treatment; and to build bridges to professionals in other disciplines for creation of multidisciplinary responses to violence involving youth.

For all Americans concerned with the increasingly violent tenor of our society and with the future of American children and youth, the Commission’s work represents a challenge and a call to action. Effective solutions to the problem of violence involving youth are within our grasp. To create these solutions, we as a society must agree to bring our intellectual, professional, and moral resources to bear on the problem and to devote our skill, care, and resources to offering young people alternative models of behavior and to addressing the alterable individual and societal factors that foster violence. Despite the gaps in data and research, despite the many unknowns and the complexity of the political and social systems that must cooperate with these efforts, we can take actions to help reduce the level of violence in our society and secure a better future for Americans young and old.
To find effective ways to prevent or ameliorate a child’s or youth’s propensity toward violence, psychology has devoted much attention to the question, “How do people become violent?” Although no definitive answer yet exists that would make it possible to predict exactly which individuals will become violent, many factors have been identified as contributing to a child’s risk profile. Biological factors, childrearing conditions, ineffective parenting, emotional and cognitive development, gender differences, sex role socialization, relations to peers, cultural milieu, social factors such as economic inequality and lack of opportunity, and media influences, among others, all are thought to be factors that contribute to violent behavior. Psychologists continue to search for a unified theoretical model that can account for these factors and assign them appropriate weight as risk factors for a child’s or adolescent’s involvement in violence as a perpetrator, victim, bystander, or witness.

The strongest developmental predictor of a child’s involvement in violence is a history of previous violence. Although the form and the absolute level of an individual’s aggression varies considerably throughout the lifespan, an individual’s relative level of aggression among age-mates shows remarkable continuity and predictability over time. Children and youth also show substantial consistency in their relative level of violence across social domains even though their absolute level typically differs considerably from setting to setting. This consistency across time and social domain may persist into adulthood, despite the well-known process of “maturing-out” of many antisocial behaviors. A number of factors contribute to keeping the pattern consistent; however, many of these factors are alterable, especially at the earlier stages of child development. For this reason, effective intervention for aggressive and violent behavior in childhood is critical, and the earlier the better.
CONTRIBUTIONS OF NATURE AND NURTURE

It is difficult to separate the respective roles of inherited factors, acquired biological factors (such as birth trauma or head injury), and learned psychosocial factors in the development of violence. Children’s inherited biological characteristics, such as temperament, activity levels, and hormonal levels, may help shape their social environments as well as their patterns of behavior. Acquired biological deficits, such as the effects of low birthweight and other prenatal and perinatal complications, exposure to lead and other neurotoxins, head injury, and other trauma, may also influence both children’s social environments and their behavior patterns. Whatever the balance between the contributions of nature and nurture, it is likely that a model stressing the interaction of these factors will most accurately describe the development and continuity of aggressive and violent behavior patterns.

Children who show a fearless, impulsive temperament very early in life may have a predisposition for aggressive and violent behavior. Those with a difficult temperament, who are hard to comfort when they are infants and who have a pattern of temper tantrums as children, also are at risk for aggressive and delinquent behavior in later childhood and adolescence. It may be that a difficult temperament may overlap with a fearless temperament and other factors that set the stage for later violent behavior.

Some evidence suggests that the developmental trajectory for females who become violent is different from that of violent males. Because relatively few serious violent crimes in this country are carried out by females, however, little of the research on violence has been conducted with females. It is not clear to what degree the differences between boys and girls in aggression can be attributed to biological gender differences or to sex role socialization into different expectations for appropriate behavior.

FAMILY FACTORS AND CHILDRearing

Family characteristics and a breakdown of family processes and relationships contribute to a foundation for the development of antisocial behav-
ors, including violence. Criminal history or antisocial personality in a parent, parental rejection of the child, and inconsistent and physically abusive parental discipline all seem to contribute to early aggressive behaviors. Lack of parental supervision is one of the strongest predictors of the development of conduct problems and delinquency. Parents who support the use of aversive and aggressive behaviors by children and fail to teach nonviolent and effective methods of solving social problems contribute to the development of coercive family interactions and to later patterns of antisocial behavior in the child.

Harsh and continual physical punishment by parents has been implicated in the development of aggressive behavior patterns. Physical punishment may produce obedience in the short term, but continued over time it tends to increase the probability of aggressive and violent behavior during childhood and adulthood, both inside and outside the family. These findings suggest a cycle in the development of aggressive behavior patterns: Abuse at the hands of parents leads children to think and solve problems in ways that later lead to their developing aggressive behavior patterns and to their continuing the cycle of violence.

Positive interactions with parents and other adults may act as protective factors for children who are at risk for violence. Among these protective factors are appropriate parental supervision, alternate adult caretakers in the family (such as grandparents, aunts, and uncles), and a supportive same-sex model who provides structure.

SCHOOL FACTORS AND ACADEMIC ACHIEVEMENT

In early childhood, aggressive and disruptive classroom behavior contributes to poor school achievement and poor peer relations. In addition to academic failure contributing to later antisocial behavior, it now seems that early antisocial and aggressive behavior patterns learned at home and elsewhere also may interfere with school learning and with the development of positive peer relations in the school context.
Particular features of the school context also may help create a milieu that is conducive to aggression. For example, the National Research Council’s report cites four characteristics of schools that may contribute to violence: (a) relatively high numbers of students occupy a limited amount of space; (b) the capacity to avoid confrontations is somewhat reduced; (c) the imposition of behavioral routines and conformity may contribute to feelings of anger, resentment, and rejection; and (d) poor building design features may facilitate the commission of violent acts.

EMOTIONAL AND COGNITIVE DEVELOPMENT

Although many believe that violence is the direct, inevitable result of extreme anger or inadequate impulse control, research suggests that inadequate impulse or emotional control puts an individual at risk for violence only if violent acts are that person’s preferred response learned through past experiences. For example, in a study done about two generations ago, it was shown that the likelihood of an aggressive reaction to frustration was a function of the frequency and consistency of past rewards for that type of aggressive behavior. Similarly, cues in the environment (e.g., guns) can trigger violent responses depending on past associations to the cue.

The cognitive deficits that sometimes accompany Attention Deficit Hyperactivity Disorder (ADHD) may contribute to the development of violent behavior. In general, children with ADHD do not develop violent behavior. Combined with other factors, however, such as conduct problems in the early years, a diagnosis of ADHD may indicate that a child is at increased risk of later delinquency and violence. Recent research suggests that the cognitive handicaps experienced by some children with ADHD may inhibit not only their academic functioning, but also their learning of prosocial skills and moral concepts.

INFLUENCE OF SOCIAL AND CULTURAL FACTORS ON COGNITIVE DEVELOPMENT

Because aggressive habits learned early in life are the foundation for later behavior, social and cultural influences in early childhood may have a life-
long impact on a child’s attitudes toward violence and likelihood of involvement with violence. Depictions of violence in the mass media, for example, may reinforce the tendency toward aggression in a young child who is already exhibiting aggressive behavior. On the positive side, early exposure to cultural influences that help the child build a positive ethnic identity and a sense of belonging to a group with shared traditions and values may help buffer the child against social risk factors for involvement in violence.

**ROLE OF DEVELOPMENTAL PERSPECTIVES IN ANTIVIOLENCE INTERVENTIONS**

In summary, youth at greatest risk of becoming extremely aggressive and violent tend to share common experiences that appear to place them on a “trajectory toward violence.” These youth tend to have experienced weak bonding to caretakers in infancy and ineffective parenting techniques, including lack of supervision, inconsistent discipline, highly punitive or abusive treatment, and failure to reinforce positive, prosocial behavior. These developmental deficits, in turn, appear to lead to poor peer relations and high levels of aggressiveness. Additionally, these youth have learned attitudes accepting aggressive behavior as normative and as an effective way to solve interpersonal problems. Aggressive children tend to be rejected by their more conforming peers and do poorly in school, including a history of problems such as poor school attendance and numerous suspensions. These children often band together with others like themselves, forming deviant peer groups that reinforce antisocial behaviors. The more such children are exposed to violence in their homes, in their neighborhoods, and in the media, the greater their risk for aggressive and violent behaviors.

Intervening to counteract, buffer, deflect, or otherwise mitigate developmental factors that are conducive to violence can reduce the risk that children or youth will become involved in violence as aggressors, victims, or bystanders who condone violence. It is critical that a developmental perspective be incorporated in all violence-related interventions.
Because no single etiology can explain violence or its recent phenomenal increase, the Commission attempted to review the broad social, environmental, and individual factors that encourage and support violence among youth. A wide range of findings demonstrate that the social and cultural contexts in which people live both promote and buffer violence.

1. SOCIETAL CHARACTERISTICS

Several characteristics of American society can be singled out as having important effects on the rate of violence. These include:

- **Attitudes toward violence in the larger society;**
- **Poverty and socioeconomic inequality; and**
- **Prejudice and discrimination.**

**ATTITUDES TOWARD VIOLENCE IN THE LARGER SOCIETY**

Violence is woven into the cultural fabric of American society. Americans long have had an ambivalent relationship with violence. Though most Americans abhor violence in their communities, homes, and schools, this country has the highest rate of interpersonal violence of any industrialized country. Our folk heros and media images—from the cowboy of the old west, to John Wayne, Clint Eastwood, and Arnold Schwarzenegger—often glorify interpersonal violence on an individual and personal level. Violent films are widely attended. American news media present image after image reflecting the violence in society, and in some cases may exploit or contribute to it. Football, one of the most violent of team sports, is an American creation. A plethora of guns and war toys are marketed and are coveted and possessed by small children. Although few Americans would claim to enjoy or encourage violence, many, at the very minimum, passive-
ly condone aggression and violence through acceptance of current film and television productions.

**POVERTY AND SOCIOECONOMIC INEQUALITY**

Many social science disciplines, in addition to psychology, have firmly established that poverty and its contextual life circumstances are major determinants of violence. Violence is most prevalent among the poor, regardless of race. At a time when most immigrants were poor Whites, rates of violence among them also were very high.

Rates of poverty are high in each of the ethnic minority groups. Fifteen percent of children growing up in nonminority homes are poor, but 38% of Hispanic, 44% of Asian and Pacific Island American, 45% of African American, and up to 90% of Native American children grow up in poverty.

Despite public stereotypes, it is very likely that socioeconomic inequality—not race—facilitates higher rates of violence among ethnic minority groups. Few differences among the races are found in rates of violence when people at the same income level are compared. But beyond mere income level, it is the socioeconomic inequality of the poor—their sense of relative deprivation and their lack of opportunity to ameliorate their life circumstances—that facilitates higher rates of violence. Socioeconomic inequality and lack of opportunity are key accompaniments to poverty for ethnic minority groups in America.

Poverty is not just the lack of money. It defines the very context in which people live. To be poor in America is to be segregated, often in decaying inner cities, in which crime and the threat of crime confine the poor to fear and isolation at best and to injury and death at worst. Violence rates in central cities are 41.3 per thousand, but in suburbs and nonmetropolitan areas they are 25.2 per thousand. In comparison to nonminorities, higher proportions of ethnic minority populations live in cities.
Poverty is relative deprivation as well as absolute deprivation. Not only do the poor in America lack the basic necessities, but they are aware that they do not have things most other Americans have and that they lack the opportunities needed to obtain them in the future. Media depictions of other Americans who are living “the good life” serve to compound the already untenable conditions of poverty with a heightened sense of deprivation.

Even in good economic times, rates of unemployment are higher for most ethnic minorities. Unemployment for African American high school graduates is 25% higher than for White dropouts. Unemployment rates for African American teens usually are twice as high as for Whites and one-third higher than for Hispanics. On some reservations, up to 90% of Native Americans (not just teenagers) are unemployed. Only Asian and Pacific Island Americans have lower rates of unemployment than the general population.

Unemployment and poverty discourage family stability. Unemployment often damages self-esteem and fosters family disruption. Limited income limits access to basic necessities of family life, including adequate nutrition and medical care and social and emotional support.

Neighborhood instability is another factor that interacts with poverty to increase the likelihood of violence. Urban neighborhoods with high rates of poverty and rapid population turnover have higher rates of violence than poor but stable neighborhoods or than unstable but affluent neighborhoods. Many factors may contribute to this relation: For example, on an individual level, frequent changes of residence disconnect people from their support systems, and people living in highly mobile neighborhoods often experience a sense of isolation.

Although rates of violence vary among the various minorities, in all ethnic groups they are highest for boys and men in the lowest economic circumstances. Domestic violence, for example, occurs at all income levels but is most prevalent in lower-income homes.
PREJUDICE AND DISCRIMINATION

Prejudice and discrimination foster social and psychological difficulties for all vulnerable populations. Historic and current prejudice and discrimination against the various ethnic minority groups, gays, lesbians, persons with disabilities, and women result in negative economic and psychological consequences for these groups.

Discrimination against the various vulnerable populations operates in different ways, but is always pernicious. For much of the history of this country, discrimination was supported and enforced by official policy or law. A few examples include: slavery, with its accompanying wretched life conditions and loss of family ties, endured for two centuries by African Americans; the Chinese Exclusion Act; the internment of Japanese Americans in World War II; the loss of land by Native Americans and their relocation to reservations; the exclusion of women from the voting franchise until 1920; and the exclusion from the armed services of homosexuals. Though many discriminatory laws have been challenged and overturned, others still remain. But even for those that have been overturned, the legacy of fear, hate, and pain remains.

Prejudice and discrimination are not a thing of the past. Though less often supported by law, they still are operating, and they burden the entire society. Discrimination against ethnic minority groups, against women, gays, lesbians, and persons with disabilities continues to operate through social policies and structural opportunities in society. It is also enacted in countless acts of interpersonal behavior each day. Such discrimination fosters vast differences in economic status among the various ethnic minority groups and nonminority Americans. It also damages the self-confidence and self-esteem of those discriminated against and lays a foundation for anger, discontent, and violence.

2. INDIVIDUAL SOCIAL EXPERIENCES

Just as general characteristics of American society may be related to the prevalence of violence, individual social experiences may also play a significant role in the
development of violent behavior. Among these, four types of experiences stand out as preeminent:

- Access to firearms;
- Involvement with alcohol and other drugs;
- Involvement in antisocial groups; and
- Exposure to violence in the mass media.

**ACCESS TO FIREARMS**

The widespread ownership of firearms in the United States has persisted throughout American history and is unique among western industrialized nations. Estimates are that between 40% and 50% of American households have guns, and half of these are handguns. According to the National Rifle Association, approximately 200 million firearms are in the hands of American private citizens; other estimates put the figure at between 100 million and 400 million. One to three million of these are large-clip, high-rate-of-fire automatic and semiautomatic assault weapons. Students carry an estimated 270,000 guns to school every day.

The availability of guns makes youth violence more lethal. There is considerable evidence that the alarming rise in youth homicides is related to the availability of firearms. Between 1979 and 1989, there was a 61% increase in homicides by shootings committed by 15- to 19-year-old White and African American youth. During the same period, the rate of homicides by objects other than guns declined 29%. According to the U.S. Centers for Disease Control and Prevention, firearms accounted for about three-fourths of the killings by African American youth.

Little research has been done to determine why young people carry guns. In some cases, the carrying of a weapon may be part of a youth’s bonding to a gang or to a drug dealer’s organization. Some youth say they carry guns because they are afraid of others who have guns. Not much is known about the factors that motivate the decision to obtain and carry a gun.
Handguns are more likely to be owned by socially deviant youth than by their more socially adjusted peers, even in those sections of the country in which firearms and hunting are fairly common. In one study of two school districts in a southeastern state, male teenagers who had dropped out of school were more than three times as likely to say they owned one or more handguns than were their nondropout counterparts. In a study of eleventh-grade students in Seattle high schools, 6% reported owning handguns, and a disproportionately high number of these handgun owners admitted having been expelled or suspended from school, having sold drugs, or having engaged in assault and battery.

When youth who are already predisposed to violence have easy access to guns, they may be more likely to become violent. The display of weapons may give people holding or seeing them hostile ideas and may evoke certain motor responses that set the stage for impulsive, violent action, especially if those involved are predisposed to violence and are ready to attack someone at the time. Results of studies indicate that ease of access to guns by violence-prone people is related to homicide rates, although these studies do not show an unequivocal relation between the number of guns in a given area and the rate of violent crimes. The greater number and availability of guns may heighten the chances that these weapons will be used by a relatively few violence-prone adolescents, but it does not necessarily mean that there will be larger numbers of adolescents using guns.

Although youth can easily obtain firearms and see them used frequently in films and on television as a method of solving problems, few violence prevention programs for youth focus specifically on preventing violence with guns. The school’s resources now are devoted chiefly to disarming youth who are carrying guns. The widespread access to firearms necessitates more education for children and adults on how to avoid or prevent firearm violence.

► INVOLVEMENT WITH ALCOHOL AND OTHER DRUGS

The Commission acknowledged the large body of psychological research supporting the conclusion that involvement with alcohol and other
drugs is an important influence on youth violence. Although the Commission focused on other areas, its work repeatedly intersected with the literature on this subject.

The use of alcohol plays a major role in interpersonal violence involving youth. Alcohol appears to lower inhibitions against violent behavior. In about 65% of all homicides, perpetrators, victims, or both had been drinking, and alcohol is a factor in at least 55% of all fights and assaults in the home. Among both youth and adults, violence frequently occurs in places in which alcohol is consumed.

Other drugs also have the potential to contribute directly to violent behavior, and they play important and well-documented indirect roles in interpersonal violence. Because some drugs are both addictive and expensive (e.g., heroin and cocaine), many users of these drugs commit crimes involving violence to support their addiction. Because many drugs are illegal and valuable commodities, drug dealers frequently become involved in violence related to the marketing of drugs. Youth who are involved in the business of drug trafficking have a greater risk of becoming involved in violence. In 1984, the National Institute on Drug Abuse estimated conservatively that at least 10% of homicides occur during drug sales.

The abuse of alcohol and other drugs by parents has been associated with violent behavior by their children, and parental substance abuse also may put children at greater risk for violent victimization. Substance-abusing parents are more apt to become physically abusive, sexually abusive, or neglectful in ways that expose their children to risk of abuse by others.

IN VolVEMENT IN ANTI SOCIAL GROUPS

GANGS

Youth are motivated to join gangs to meet the same developmental needs that all youth are seeking—a sense of connection, belonging, and self-definition. In the gang, they hope to find peer friendship, pride, an identity separate
from their families, self-esteem enhancement, status, excitement, and the acquisition of resources. The positive social identity they gain from group membership partly depends on the group’s perceived status and rank.

Gang violence results from a variety of internal and external provocations, and gang members may be hypervigilant in their attention to possible slights. Among the external factors most likely to provoke violent behavior are disputes over girlfriends or boyfriends, territorial boundaries, rumors, “bad looks” (i.e., a perceived hostile or disparaging facial expression), ethnic tensions, drinking or drug use, and out-of-neighborhood parties. Internal provocations include leader power needs, compensation for inadequate self-esteem, acting-out to convince oneself of potency, acting-out to obtain group affection, or acting-out to retaliate against real or imagined aggression.

Only a small percentage of youth join delinquent gangs, and the absolute amount of violent behavior by gang members is small. Nonetheless, homicide and aggravated assault are three times more likely to be committed by gang members than by nongang delinquents.

Gang violence appears to have increased in levels and in lethality during the 1980s. Studies in the early 1970s revealed few or no homicides in the United States attributable to gang violence. By 1980, however, there were 351 gang-related homicides in Los Angeles alone, and more than 1,500 gang-related homicides in Los Angeles between 1985 and 1989.

Gang demographics changed beginning in the 1980s: Delinquent gangs no longer are confined to certain states and to the inner city, and their membership encompasses a wider age range, with members as young as 9 and as old as 30. The new roles for younger and older gang members reflect the increase of gang involvement in drugs.

Gang activity and gang violence are overwhelmingly male phenomena. Male gang members outnumber females by 20 to 1, and less than 5% of gang crime is committed by females. Nonetheless, female involvement in gang violence is believed to be increasing.
Almost 90% of gang members are ethnic minorities. Numerically, the majority of gangs are either African American or Hispanic, although White non-Hispanic gangs, such as skinhead and neonazi gangs, are believed to be increasing. Approximately 55% of gang members are African American and 33% are Hispanic. Although these numbers may reflect law enforcement’s disproportionate focus on ethnic minority youth and an undercount of White non-Hispanic youth, they nevertheless point to incontrovertible gang problems facing ethnic communities across the United States. They also underscore the importance of cultural sensitivity in planning interventions for gang youth. Part of the explanation for the prevalence of gang membership in these communities may lie in the stressful environment of poverty, unemployment, and economic and social inequality in which these ethnic minority youth live. These stressful conditions may limit youth’s access to positive means of meeting developmental needs. As needs increase under difficult life conditions, the satisfaction gained from connection with a gang also increases.

In recent years there has been an increase in the number of gangs in the Asian and Pacific Island American communities and in the intensity of violence by these gangs. The deadliest violent crime within the Asian and Pacific Island American communities is perpetrated by gang members. In spite of the relative increase in these gangs and the violence of their activities, the absolute numbers of Asian and Pacific Island Americans who participate in gangs are rather small: Chinese gangs, for example involve perhaps 2,000 youth nationwide, and Vietnamese gang members in Southern California number about 1,000 out of a population of 140,000.

VIOLENT MOBS

Mob violence, like gang participation, can serve many psychosocial needs. These include the need to enhance self-esteem, to correct perceived injustices, to devalue the person or property that is the target of the violence, to create social change, or to benefit materially. Mob violence may occur under a variety of conditions: when rising expectations are unfulfilled, when people perceive their life circumstances as worsening, or when injustice is perceived. Often a specific
Data on participants in mob violence are inadequate, but the available data suggest that male adolescents and young adults are the most frequent participants in mob violence. Typically, those who participate in mob violence are not criminals or delinquents. It was determined that 56% of juveniles between the ages of 10 and 19 who were arrested or referred to the Los Angeles probation department during the civil disturbances in Watts in 1968, for example, had one or no previous contact with the police, 48% attended church regularly, and 53% were doing average or better work in school. Young males made up a large proportion of participants when spontaneous violence erupted in the streets of Los Angeles in 1992 following the acquittal of police officers accused of beating Rodney King, an African American man stopped for a traffic violation. The 1992 civil disturbance and its aftermath underscored the importance of studying the social and cultural factors that interact with an individual’s personal risk factors for violent behavior.

A loss of individual self plays an important role for those who participate in mob violence. Giving oneself over to the group may be experienced as a falling away of the limitations inherent in the self and of the boundaries restricting connections to other people. The resulting feelings of abandon, together with feelings of group connection and oneness, can be intensely satisfying. At the same time, the anonymity of becoming one with the mob may promote violence by leading to a diffusion of responsibility for others’ welfare and less fear of blame and punitive consequences. Although some people may be surprised by their own actions when participating in mob violence, it remains unclear whether they have actually behaved in a manner contrary to their inclinations.

In the course of mob violence, the members enter into a process of change along a “continuum of destruction.” Escalating violence can evolve quickly, through a process of “contagion.” This contagion may result from a sensitivity to other people, perhaps because of identification with others who are seen
as members of one’s group, or shared dissatisfactions, concerns, and values, or shared antagonism toward a potential victim group. Little is known about why some youth become involved in mob violence and some do not, and little is known about the psychological aftermath of involvement in mob violence as a participant, victim, or bystander.

**Bystanders have the ability to influence the mob by their action or passivity.** Mob violence that is not tied to political movements often seems leaderless, but individuals often emerge as leaders who initiate and guide the violence. In the same fashion, bystanders who attempt to interrupt the continuum of destruction can take on a de facto leadership role. The earlier bystanders act as the mob is forming, the greater their potential influence. This finding suggests that, although the police are often caught in a dilemma about when and how forcefully to intervene, it is important for community leaders to participate early in efforts to restore control. There is some evidence that the mass media also may play a role in stimulating or containing mob violence.

**EXPOSURE TO VIOLENCE IN THE MASS MEDIA**

Nearly 4 decades of research on television viewing and other media have documented the almost universal exposure of American children to high levels of media violence. Ninety-eight percent of American homes have at least one television, which is watched each week for an average of 28 hours by children between the ages of 2 and 11 and for 23 hours by teenagers. Children from low-income families are the heaviest viewers of television.

The level of violence on commercial television has remained constant during nearly two decades. In prime time there are five to six violent acts per hour; there are 20 to 25 violent acts per hour on Saturday morning children’s programs. Although there is less research on cable television and VCRs, the rate of violence for MTV, for example, far exceeds that on commercial television. More graphic violence, sexual content, and mature themes are readily accessible in the 60% of homes in which cable television and VCRs are available.
There is absolutely no doubt that higher levels of viewing violence on television are correlated with increased acceptance of aggressive attitudes and increased aggressive behavior. Three major national studies—the Surgeon General’s Commission report (1972), the National Institute of Mental Health Ten Year Follow-up (1982), and the report of the American Psychological Association’s Committee on Media in Society (1992)—reviewed hundreds of studies to arrive at the irrefutable conclusion that viewing violence increases violence. In addition, prolonged viewing of media violence can lead to emotional desensitization toward violence.

Children’s exposure to violence in the mass media, particularly at young ages, can have harmful lifelong consequences. Aggressive habits learned early in life are the foundation for later behavior. Aggressive children who have trouble in school and in relating to peers tend to watch more television; the violence they see there, in turn, reinforces their tendency toward aggression, compounding their academic and social failure. These effects are both short-term and long-lasting: A longitudinal study of boys found a significant relation between exposure to television violence at 8 years of age and antisocial acts—including serious, violent criminal offenses and spouse abuse—22 years later.

In addition to increasing violent behaviors toward others, viewing violence on television changes attitudes and behaviors toward violence in significant ways. Even those who do not themselves increase their violent behaviors are significantly affected by their viewing of violence in three ways:

- Viewing violence increases fear of becoming a victim of violence, with a resultant increase in self-protective behaviors and increased mistrust of others;

- Viewing violence increases desensitization to violence, resulting in calloused attitudes toward violence directed at others and a decreased likelihood to take action on behalf of the victim when violence occurs (behavioral apathy); and
• Viewing violence increases viewers’ appetites for becoming involved with violence or exposing themselves to violence.

Film and television portrayals of women in victim roles and ethnic minorities in aggressive and violent roles exacerbates violence experienced by women and ethnic minorities. The effects on aggressive behavior of video and film modeling of violent behaviors have been demonstrated consistently and conclusively in psychological literature. Although the television and film industries can be credited for showing more ethnic minorities and women in a wider range of roles in recent years, the more common portrayals of such group members remain negative. Ethnic minority group members continue to be cast as criminals, gang members, or delinquents—exhibiting aberrant or antisocial behavior. In some instances, the showing of specific films depicting ethnic minority group members in this way have been linked to episodes of violence.

In explicit depictions of sexual violence, it is the message about violence, more than the sexual nature of the materials, that appears to affect the attitudes of adolescents about rape and violence toward women. Sexual violence in the media includes explicit sexualized violence against women including rape, images of torture, murder, and mutilation as well as the nonexplicit sexual aggression shown on commercial TV and cable and on videos available for viewing at home. Films that depict women as erotically surrendering to a rapist and willingly being raped have been shown to increase men’s beliefs that women desire rape and deserve sexual abuse. Male youth who view sexualized violence or depictions of rape on television or in film are more likely to display callousness toward female victims of violence, especially rape. Laboratory studies also have shown an increase in men’s aggression against women after exposure to violent sexual displays. Such sexual violence is found in X- and R-rated videotapes that are widely available to teenagers.

The concept of reality and how others live is also affected by the viewing of television programming and commercials. Low-income and ethnic minority children and youth are presented with a television world often quite different from their own. The contrast between the television “haves” and their own “have
"not" status can elicit strong desires in youth eager to share in the consumer products shown in programs and commercials. Furthermore, television often demonstrates how these desirable commodities can be obtained through the use of aggression and violence.

The effects of viewing violence on television can be mitigated. Children can be taught “critical viewing skills” by parents and in schools so that they learn to better interpret what they see on television. For example, children can learn to distinguish between fictional portrayals and factual presentations. In addition, children can be taught to recognize ways in which violence is portrayed unrealistically (e.g., when it is portrayed without any negative consequences). Children can also learn to think about alternatives to the violence portrayed, a strategy that is particularly effective when an adult viewing the violence with the child expresses disapproval of violence as a means of solving problems and then offers alternatives. The availability of such protective measures for some parents, however, does not absolve the film and television industries from their responsibility for reducing the level of violence portrayed on the screen.

Television can be an effective and persuasive teacher of prosocial attitudes and has the potential to make a major contribution toward reducing violence. Among the strategies that may strengthen television’s positive effects are:

- Inclusion of more prosocial messages and nonviolent problem-solving in television productions;
- Compliance with laws requiring broadcasters to serve the educational and informational needs of children by providing television programs that help educate children to prevent violence;
- Restricting times when dramatized violence is shown; and
- Creating and using a meaningful rating system that is based on a program’s potential for damage to the child rather than on parents’ sensitivities.
3. **THE UNIQUE CULTURES OF ETHNIC MINORITY GROUPS**

Like societal characteristics and individual social experiences, culture is an important determinant of individual behavior. In discussing culture, the Commission used the following definition:

> “Culture refers to distinct preferred or actual patterns of behavior, communication, and cognition that are held in common and accepted by members of a distinct group of people.”

**The effects of culture on individuals can be distinguished from the effects of society.** Culture serves to bind groups together, to provide a set of norms that guide behavior, and to help shape the identity of the group. Differentiating between cultural influences and social influences can be difficult, however, particularly because the unique cultures of ethnic minority groups and their influence on individual behaviors have not been studied sufficiently to be well understood by many social scientists.

**Ethnic minorities must negotiate several cultural realms.** Some ethnic minorities must operate in three cultural realms: the realm of the indigenous ethnic culture, which embodies the cultural values of the original homeland; the minority realm, which embodies the elements of minority ethnic status; and the mainstream culture. The interrelations among these realms are complex, and they often come into conflict. For example, competencies that are highly valued among a cultural group may be dismissed or even punished in the mainstream culture. For Native Americans and recently arrived African Americans, Hispanics, and Asian and Pacific Island Americans, language problems compound the cultural conflicts. There may be benefits to operating in multiple cultures, however. Ethnic minority youth faced with hostile or devaluing messages from the mainstream culture may be able to buffer those messages because there they receive messages from their own cultures that help them develop identity and a sense of worth and value.
Culture can serve to mediate between social forces and behavior. For youth, culture can buffer the deleterious effects of risk factors in the social environment. It can serve as a protective mechanism by supporting positive ethnic identity formation, by providing a set of values and a pattern for living, by building a sense of group cohesion, and by giving youth appropriate guidance as they face the challenges and transitions of growing up. Culture may fail to protect, however, in a number of circumstances: for example, when social risk factors in the mainstream become overwhelming; when there is substantial conflict between mainstream culture and ethnic culture; or when ethnic culture is denigrated in the mainstream or dismissed as nonexistent. Culture also may fail to protect when, in an effort to adapt to the inequities of the mainstream, ethnic cultures adopt maladaptive behavior patterns to attempt to meet basic needs for power or for a sense of personal efficacy; or when ethnic minority youth have not been socialized to function effectively in the multiple cultural realms they must traverse.

When ethnic minority youth have few pathways to participation in mainstream American culture, the stage is set for violence. Youth who are barred from full participation in the economic and social opportunities of the mainstream may be at risk for involvement in violence, particularly when ethnic minority cultures are devalued by the mainstream culture.

ETHNIC MINORITY CULTURES

There is still much to learn about the cultures of the various ethnic minorities. More has been written about the unique culture of African Americans than about other ethnic minority groups. Only recently has there been increased attention to the cultures of Hispanics and many of the different Asian and Pacific Island American groups. Although anthropologists have studied the cultures of Native Americans, psychologists have paid scant attention to the culture of these very early inhabitants of North America.
AFRICAN AMERICANS

Over the years in the United States, the culture of African Americans has been shaped by the African ethos, the experience of slavery, legally enforced segregation, racially motivated violence, and deprivation of civil rights, as well as the influence of western culture. African Americans are the largest ethnic minority group in the country, comprising about 12% of the population. Most are individuals whose ancestors were brought into the nation from Africa as slaves. More recently there have been waves of immigrants from the West Indies, Brazil, and Africa. Within the African American community, some dominant cultural values include:

- Harmony and interrelatedness with nature;
- Spirituality and strong religious orientation;
- Communalism rather than individualism;
- Child-centeredness, emphasizing the importance of the child to ensure the continuity of the family; and
- Flexibility of roles.

HISPANICS

Hispanics come from many different countries, but nonetheless share many cultural values. Hispanics in the United States include people from many different countries and cultures including Mexico, Puerto Rico, Cuba, Salvador, Nicaragua, and other Central and South American countries as well as Spain. Among their shared cultural values are:

- Preference for participating in groups (allocentrism);
- Strong adherence to family (familism);
- Avoidance of interpersonal conflict (simpatia); and
- Deference and respect for authority systems (respeto).

Strong adherence to these values seems to be constant regardless of social or economic status. The strength of these values, moreover, are potent forces in
individual lives. For example, there is evidence of a relation between an individual’s relinquishing these values and adopting various negative health behaviors, such as smoking and drug use. In addition, there is evidence that barrio youth who are low-acculturated are better adjusted than those with medium acculturation; this is attributed to strong family support.

ASIAN AND PACIFIC ISLAND AMERICANS

Asian and Pacific Island Americans also come from many different countries and are such diverse and complex peoples that it is difficult to generalize about their cultural values. Asian and Pacific Island Americans encompass many different cultural groups, including Chinese, Japanese, Korean, Cambodian, Thai, Laotian, Vietnamese, and Philippine. Recent immigration, particularly from Southeast Asia, has greatly increased the Asian population in the United States and has drastically changed the characteristics of this population. For example, almost half of the new immigrants speak little English. Despite their many differences, cultural groups of Asian and Pacific Island Americans share a number of values, including:

- Pacifism, self-control, and self-discipline linked to Confucianism, especially among Chinese, Korean, Vietnamese, and Japanese cultural groups;
- A social order in which there is a hierarchy of interpersonal relations (i.e., parents are superior to children, men to women, and ruler to subject) and in which respect and “saving face” are highly valued;
- Strong family ties, a link to ancestors, and expected obedience of the young to their elders;
- Internal locus of control, with symbolism as a major cultural mechanism of control;
- Strong cultural affiliation and bonding; and
- A strong work ethic and achievement motivation.
The life circumstances of Native Americans have been profoundly affected by their experiences since the arrival of Europeans more than 500 years ago, but many cultural values have been retained. The terms “Native American,” “American Indian,” and “Native Alaskan” refer to the indigenous native people of North America (Alaska and the continental United States). This widely diverse population group is composed of at least 124 federally recognized tribes and bands, with an estimated 450 or more subgroupings such as pueblo units or villages with distinct traditions, customs, and mores. The language diversity among present-day Native Americans in North America mirrors this cultural diversity: More than 40 language families with more than 140 dialect variations have been identified. An estimated one-fourth of the Native American population currently lives on 278 federal and state reservations. Chief among the common values found among Native American groups are:

- Harmony with and respect for nature;
- Emphasis on family and traditions; and
- Emphasis on group cooperation rather than on individual achievement.

There are many potential conflicts between values in the dominant American culture and those of ethnic minority cultures. More than almost any other society in the world, the dominant American culture values individuality. As a value, it often comes in conflict with the African American emphasis on communalism, with the Hispanic and Asian and Pacific Island American emphasis on family harmony, and with the Native American value of cooperation within the group. The dominant American culture also stresses individual achievement, in which winning is everything. Some Native American tribes regard such competitiveness as a lack of respect for and lack of loyalty to the group. Cultural attitudes proscribing the relationship between people and nature have fundamental and pervasive
effects on how people live their lives. For centuries the dominant European and American cultural value has been that nature is to be conquered: the environment mastered, land cleared, dams built and rivers diverted. Hispanics, Native Americans, and many Asian and Pacific Island American groups, however, expect to live in harmony with nature and not to change it.

**Cultural values of minorities can serve to enhance resilience and protect individuals against harsh and stressful life conditions.** Most minority youth who grow up with the stresses of poverty, lack of opportunity, discrimination, community breakdown, and family disruption do not engage in violent behavior. The values of communalism, familism, and group harmony are thought to be important deterrents to violent behavior. These values are apt to increase the availability of social support from outside the family and the opportunity to establish close relations with a caring adult, factors that have been identified as modifiers of stress. The strong religious orientation prevalent among all four ethnic minority groups also may serve to protect some youth from difficult life stresses.

**Strengthening culture’s ability to protect youth may be an important means to help prevent violence.** Negative messages about ethnic minority cultures within the mainstream culture undermine culture’s ability to protect. Psychologists can promote greater respect for culture by helping to increase understanding about culture, by promoting acceptance of cultural diversity, and by respecting ethnic minority cultural values and norms and incorporating them into violence prevention programs.
Violence and fears of violence pose threats to all American children and youth. Teenagers are 2 1/2 times more likely to be victims of violent crimes than those over the age of 20. Much of this violence occurs around schools. It is difficult to know the full extent of youth vulnerability to violence in the society because so much information is lacking. Data on many forms of violence are not collected on a national basis. In general, rates of violent behavior are collected and reported in the categories “Black,” “White,” and “Other,” so reliable national information for other ethnic minority groups is not available, and we must rely on regional data, small studies, or both. Information is most complete for homicide; for other types of violence, information is more fragmentary or does not exist.

Even youth who are not direct victims of violence may be victimized by the chronic presence of violence in their communities. In some communities, violence is a part of daily life: In a study of 8th graders in Chicago, for example, it was found that 73% had seen someone shot, stabbed, robbed, or killed. It is clear from research findings that witnessing shooting and killing in the community is highly disturbing to children. As they see their neighbors, friends, and relatives fall victim to intentional and apparently random acts of violence, they learn quickly to suppress their sadness and grief. There also has been shown to be a significant relation between the amount of violence children witness and the number of adverse psychological symptoms they experience. Posttraumatic stress, which includes intrusive imagery, emotional constriction and avoidance, fears of recurrence, anxiety, sleep difficulties, disinterest in significant activities, and attention difficulties, has been documented in cases in which children have known the victims of violent acts.
RELATIONSHIP BETWEEN VICTIM AND PERPETRATOR

Despite high levels of publicity commonly given to violence perpetrated by strangers, interpersonal violence occurs most frequently, and typically in its most violent forms, among people who are connected to each other in some way. They may be in the same peer group or family, or they may only know of each other through social relations by moving in the same or overlapping social circles. Frequently their relationships can be described as a “ruptured personal relation” among neighbors, friends, relatives, and intimate partners.

Because the relationship between perpetrator and victim is far more complex than merely that of “actor” and “acted upon,” studies of this relationship may yield information that will help build effective preventive interventions. For example, peer violence often involves perpetrator and victim engaging in a sequence of interacting and escalating events. One expert observed that in more than one-fourth of homicides studied in Philadelphia, victims played a role in precipitating violence by striking the first blow or showing a deadly weapon. Even in “stranger violence”—a growing and much-feared but still much less common form of violence—strong selective factors generally connect the perpetrator and the victim. Aggressors and victims commonly resemble each other in terms of race, educational background, psychological profile, alcohol and other drug use, and reliance on weapons.

VICTIMIZATION AS RISK FACTOR FOR FUTURE VIOLENCE

Much more needs to be learned about the ways in which having been a victim of violence may increase a child’s or adolescent’s likelihood of becoming a perpetrator of violence. For example, the experience of being victimized by crime has been found to increase certain individuals’ propensity for perpetrating violence, juvenile crime, adult criminality, and adult violence toward family members. In a study following a group of males born in 1945 in Philadelphia, two-thirds of cohort members who indicated having committed an act of serious assaultive violence (e.g., rape, homicide, or assault with serious victim injury), had
themselves been the victims of serious violence (e.g., either shot or stabbed). Among the factors examined as potential predictors of assaultive violence (including race, gang membership, and weapon use), the experience of having been a victim of serious violence was found to be the strongest predictor of serious assaultive offenses in the careers of cohort members.

THE EXPERIENCE OF VIOLENCE AMONG ETHNIC MINORITY GROUPS

Except for hate crimes, ethnicity is not, of itself, a risk factor for violent victimization. As previously discussed, it is the sociocultural context in which many ethnic minority youth live that places them at greater risk.

There are significant similarities among ethnic groups in vulnerability to violence. For example:

- Violence and victimization rates for all ethnic groups are higher among the young, those who have not completed high school, are unmarried, who do not own their own homes, and who have the lowest incomes.

- In every crime category, except forcible rape, males across ethnic groups are significantly more likely to be victims of reported crimes than females; 78% of murder victims are males. However, research shows that females are extensively victimized by violence in the home, and these assaults are vastly underreported.

- For all ethnic groups, more violence occurs within the same group than between groups: 93% of African American homicide victims are killed by other African Americans, and 86% of Whites are killed by other Whites.

- For all ethnic groups, the risk of violence by intimates and acquaintances far exceeds the risk of stranger violence.
AFRICAN AMERICANS

African American women and men in the United States are at the highest risk for homicide, hate crimes, and other forms of interpersonal violence, and those rates are increasing. Since 1978, homicide has been the leading cause of death for African American males between the ages of 15 and 24. Their homicide rates are five to eight times as high as for White males the same age. Though less well publicized, homicide is also the leading cause of death for African American females in the same age group. Homicide rates among African Americans continue to increase.

Carrying of weapons and involvement with drugs puts African American males at risk for becoming victims of homicide. In a study of gun-related violence in and around inner-city schools, it was found that the risk for an African American youth becoming a victim was influenced not only by whether the youth carried a gun, but also by the extent to which a family member or other person with whom they affiliated carried a gun, and whether or not the youth used or sold drugs.

HISPANICS

Rates of victimization among Hispanic males and females are higher than rates for other Whites and slightly lower than those for African Americans. In the case of robbery, Hispanics sustain a victimization rate nearly three times that for non-Hispanics. Although all the reasons for this are not clear, the possession of guns and other weapons is thought to play a significant role.

Many of the demographic characteristics and other factors that put all groups at risk are high among Hispanics. The Hispanic population is young, with half the population under the age of 26, in comparison to 33 years for the rest of the population. Only half of all Hispanics have completed high school, and Hispanic youth are twice as likely as Whites to live in poverty. Hispanic, male,
high-school-age students are more likely than their African American or White peers to admit carrying weapons.

**ASIAN AND PACIFIC ISLAND AMERICANS**

Asians and Pacific Island Americans’ experiences of violence differs in several ways from other ethnic minority groups. Little can be said with certainty about Asian and Pacific Island Americans’ experience of victimization, because these groups are not specifically identified in statistics on victimization but only in statistics on perpetration of violence. The data on perpetration, however, show several striking differences from other ethnic groups. For example, the arrest rate of these groups is about one-third the rate of their numbers in the population. In addition, their arrest rate is higher among rural dwellers rather than urban dwellers, although other ethnic groups experience higher arrest rates among urban dwellers. Although these figures do not directly reflect on Asian and Pacific Island Americans’ experience of victimization, they suggest that differences might be found there as well if better data on prevalence and distribution were available.

Demographic characteristics that make people vulnerable to violence vary greatly within this group, particularly between recently arrived Asians and Pacific Islanders and those longer established. For example, violence-related research suggests that low educational achievement is associated with adult and youth violence. Although Asian Americans generally have very high educational levels, this is not the case for some recently arrived groups such as Filipinos, Laotians, and others from Southeast Asia. Similarly, those between the ages of 12 and 24 are most often the victims of crime; a larger percentage of Asian and Pacific Island Americans than Whites are under the age of 24, and the disparity is even larger among recently arrived Asians and Pacific Islanders.

Asian and Pacific Island Americans are increasingly vulnerable to hate crimes. These groups comprise less than 3% of the population, but in four large American cities (i.e., New York, Chicago, Boston, and Los Angeles), they were victims of more than 11% of hate crimes. In the Los Angeles riots of 1991 following
the verdict on the Rodney King trial, some 3,500 Asian American owned businesses were damaged or lost. Two Asian Americans were killed, and dozens were shot or beaten.

Domestic violence may be a hidden problem in the Asian and Pacific Island American communities. Although rates of reported domestic violence in these communities are comparable to their rates in the total population, many human services workers in these communities believe most of such crimes go unreported. There are concerns that pressures related to cultural differences and to family disputes over acculturation may lead to family conflicts and to violence as men try to assert their authority over women and as parents try to retain control over their children.

NATIVE AMERICANS

Rates of violence, including homicide, are very high for Native Americans. Homicide rates for young Native American males are lower than rates for African Americans and about the same as those for Hispanics. In New Mexico, however, for 16- to 24-year-old Native American males and females during a 30-year period, homicide rates exceeded those for Hispanics. In a recently completed study of health behaviors among 13,000 Native American adolescents surveyed in the continental United States and Alaska, almost one-fifth of those surveyed reported being knocked unconscious by another person once or twice. Nearly 4 out of 10 among the respondents said they had hit or beaten up somebody within the past year, with 4% admitting to 6 or more such incidents within that time frame. Higher levels of involvement in violence were reported by respondents who also indicated regular use of alcohol or marijuana. In another study conducted in Minnesota, physical abuse was almost twice as prevalent for both male and female Native American youth as among a comparison group of rural Whites. Almost 24% of older adolescent females reported such victimization.

Studies conducted by the Indian Health Service report that higher rates of child physical abuse and other domestic violence are associated with other...
family problems, such as alcohol abuse, family history of violence, and high mobility. Alcohol abuse within the family, the strongest correlate found in these studies, also has been implicated as a factor in higher rates of spouse abuse, and in fatal violence among friends and acquaintances. Native American girls are at significant risk for abuse. Among adolescent girls in the eleventh and twelfth grades, nearly one-fourth reported physical abuse, and more than one-fifth reported sexual victimization.

EXPERIENCE OF VIOLENCE: VULNERABLE POPULATIONS

For certain groups of children and youth—notably girls and young women, gay and lesbian youth, and children and adolescents with disabilities—prevailing social attitudes create special vulnerabilities for violent victimization. These children and youth are placed at risk not by any inherent factor related to their status, but by the biases, discriminatory behaviors and inequalities of power in the society around them.

GIRLS AND YOUNG WOMEN

Although sexual violence by and against children and adolescents occurs across age and gender lines, girls and young women are particularly vulnerable to sexual violence, including sexual assault, dating violence, and child sexual abuse. Girls are two to three times more likely to be sexually abused than are boys. Girls and young women are particularly likely to experience victimization in situations of trust. Community-based surveys indicate that 7% to 62% of women and 6% to 15% of men have experienced child sexual assault. Adolescent girls are particularly vulnerable to date rape and acquaintance rape. For adolescent girls, more than half of sexual assaults occur in a dating situation. Nearly one out of every ten high school students experiences physical violence connected with dating.

Within the family, the risk of physical (nonsexual) abuse for girls is lower than for boys during the younger years but increases with age. The rela-
tive risk reaches a peak during the preadolescent and adolescent years, when girls become more at risk for physical abuse than boys.

An important contributing factor to girls’ vulnerability is the historical pattern of social dominance of males over females in the United States. Significant risk is produced by the intersection of this inequality of status with the physical and emotional vulnerability of youth and with the socialization of girls to be compliant.

The psychological effects of sexual violence can be both immediate and enduring. The psychological impact of child sexual abuse endures longer than physical harm. Identified mental health problems include fear, depression, guilt, suicidal ideation, changes in sleeping and eating patterns, sexual acting out, mistrust, hostility, compulsive masturbation, and school problems. Adolescents who experience rape may respond with fear, anxiety, depression, sexual dysfunction, and suicidal ideation. The percentage who experience posttraumatic stress disorder is unknown.

Among the more promising interventions to reduce girls’ and young women’s risk of victimization are ones that are directed toward boys and men as potential victimizers. Traditional prevention programs directed at girls and women center on victimization prevention that, although important, implies that girls and women are responsible for their victimization. It is important to focus preventive interventions on the perpetrators or likely perpetrators as well as on the victims or potential victims.

More community-based studies are needed to learn more about violence in intimate relations. For example, more study is needed of the relation between witnessing violence in the family of origin and subsequent involvement in dating violence—a relation so far inconclusively demonstrated.
Gay male and lesbian youth are vulnerable to violence that ranges from harassment, threats, and vandalism to assault and murder. This vulnerability is a direct result of widely accepted prejudice against people of homosexual orientation. It is difficult to estimate the number of gay and lesbian youth assaulted because of their sexual orientation. Bureau of Justice statistics do not address issues of crimes against youth who are gay and lesbian, and most of the literature on the subject addresses the violence directed at adult gay males and lesbians. A community-based agency in New York that provides services to gay male and lesbian teenagers and their families documents that, of the teens reporting violent physical assaults, 46% reported that the assault was related to their sexual orientation and 61% of the violence related to sexual orientation occurred within the family. Several studies of lesbian and gay victimization on campus noted that 3% to 5% of respondents had been physically assaulted, 16% to 26% had been threatened with violence, and 40% to 76% had been verbally harassed. A survey of lesbians and gay men conducted by the National Gay and Lesbian Task Force found that 37% of respondents reported experiencing threats, harassment, or violence in high school or junior high school.

Gay and lesbian youth risk falling victim to harassment and hate violence if they reveal their sexual identity, but are at increased risk of self-directed violence if they do not. If gay or lesbian youth make their sexual orientation known, they may be able to make contact with the small number of existing resources for gay and lesbian youth, but they risk prejudice and disapproval from adults and peers, violence at home, and hate violence in their communities. Youth who fear such reactions may keep their homosexual orientation secret, choosing instead to live a “double life” that leaves them isolated from other youth and cut off from positive adult guidance. Such young people have been shown to be at greatly increased risk of suicide.

To reduce the risks of violence against this youth population, interventions must be developed to train teachers, school administrators, social workers,
and guidance counselors to confront homophobia, counsel victims of bias-related violence, and dispel myths about homosexuality. Improved documentation and reporting of bias-related crimes also are important. In addition, programs that provide in-school support for gay and lesbian youth through the identification of trained and sympathetic staff may relieve some of the pressure on the gay or lesbian youth. Integration of education about sexual orientation into the curriculum may be a means of reducing student biases, but intense community opposition often derails such attempts.

CHILDREN AND ADOLESCENTS WITH PHYSICAL OR MENTAL DISABILITIES

Existing data strongly suggest that children and adolescents with disabilities are particularly at risk for physical abuse and sexual assault. Because of inconsistent definitions of “disability” and “abuse” and the resulting methodological problems when interpreting data, comprehensive and reliable prevalence data are not available to determine how frequently children with disabilities are violently victimized. In one study, 69% of the reported attacks against children with disabilities included physical abuse, 45% involved neglect, and 36% involved sexual abuse. A study of children with communication deficits found that 48% experienced sexual abuse, 23% experienced sexual and physical abuse, and 19% experienced physical abuse. The study also found that males with disabilities were at greater risk for sexual abuse than males without disabilities, and children in residential settings were at greater risk than those in mainstream schools. Statistics on violence against children with AIDS are generally subsumed into the statistics on children with disabilities. The violence these children experience, however, may also resemble hate violence.

The vulnerability of children with disabilities—and the probable underreporting of violent acts against them—are related to the unique characteristics of their life situation. These unique factors can include relationships of trust and dependence on their caretakers, making the child reluctant to report acts of abuse and powerless to stop them; physical inability to defend themselves or to cry out for help; and inability to differentiate between inappropriate and appropriate...
contact. Children with disabilities may also be less likely to be believed when they report abuse. Other influences may include parental factors such as single-parent status, fewer years of education, chronic unemployment, low socioeconomic status, psychopathology, poor parenting skills, and poor social-interactive skills.

To reduce the risk of violence for this youth population, one promising approach is to develop interventions that target parents, who are most likely to be responsible when children with disabilities are abused. Examples are the “home visitor” programs available in 24 states to provide parenting instruction and support on a recurring basis in the home, to teach parents how to respond to the complexities of raising children with disabilities. Children and youth also should receive instruction in how to recognize, refuse, and report inappropriate sexual contact, an approach that has been tried in several programs.

In addition, uniform definitions should be adopted for words like “abuse” and “maltreatment,” to improve collection of reports and evaluation of data. The inclusion of “special characteristics” (i.e., disability or disabling conditions) in reports of child maltreatment or abuse should also be made mandatory.
The urgent need to prevent further destruction of young lives by violence has led to a proliferation of antiviolence interventions for children, youth, and their families. Many of these interventions were created primarily for service delivery, without scientific underpinnings or plans for outcome evaluation. Some are targeted at perpetrators of violence, others at their victims, and still others at bystanders who may play a pivotal role in condoning or preventing violence. Some are preventive, and others seek to ameliorate the damage already done. Some are targeted toward changing individuals, and others seek to change the systems and settings that influence behavior, such as the family, peers, schools, and community.

Those programs that have been evaluated and show promise include interventions aimed at reducing risk factors or at strengthening families and children to help them resist the effects of detrimental life circumstances. Few programs, however, have been designed to evaluate the direct short-term and long-term effects of intervention on rates of violence; most concentrate instead on assessing the program’s effects on risk factors or mediators of violence. Many potentially effective psychological interventions have been developed and are currently being investigated, but most have been too recently implemented to have appropriately long-term evaluation data to judge their effects on rates of violence.

CHARACTERISTICS OF EFFECTIVE PROGRAMS

Effective intervention programs share two primary characteristics: (a) they draw on the understanding of developmental and sociocultural risk factors leading to antisocial behavior; and (b) they use theory-based intervention strategies with known efficacy in changing behavior, tested program designs, and validated,
objective measurement techniques to assess outcomes. Other key criteria that describe the most promising intervention approaches include:

- They begin as early as possible to interrupt the “trajectory toward violence.” Evidence indicates that intervention early in childhood can reduce aggressive and antisocial behavior and can also affect certain risk factors associated with antisocial behavior, such as low educational achievement and inconsistent parenting practices. A few studies have included 10- to 20-year follow-up data that suggest these positive effects may endure. Some of the most promising programs are interventions designed to assist and educate families who are at risk before a child is even born.

- They address aggression as part of a constellation of antisocial behaviors in the child or youth. Aggression usually is just one of a number of problem behaviors found in the aggressive child. Often the cluster includes academic difficulties, poor interpersonal relations, cognitive deficits, and attributional biases.

- They include multiple components that reinforce each other across the child’s everyday social contexts: family, school, peer groups, media, and community. Aggressive behavior tends to be consistent across social domains. For this reason, multimodal interventions that use techniques known to affect behavior and that can be implemented in complementary ways across social domains are needed to produce enduring effects.

- They take advantage of developmental “windows of opportunity”: points at which interventions are especially needed or especially likely to make a difference. Such windows of opportunity include transitions in children’s lives: birth, entry into preschool, the beginning of elementary school, and adolescence. The developmental challenges of adolescence are a particular window of opportunity, because the limits-testing and other age-appropriate behaviors of adolescents tend to challenge even a functional family’s well-developed patterns of interaction. Also, antisocial behaviors tend to peak during adolescence, and many adolescents
engage in sporadic aggression or antisocial behavior. Programs that prepare children to navigate the developmental crises of adolescence may help prevent violence by and toward the adolescent.

**PRIMARY PREVENTION PROGRAMS**

Prevention programs directed early in life can reduce factors that increase risk for antisocial behavior and clinical dysfunction in childhood and adolescence. Among the most promising of these interventions are:

- “Home visitor” programs for at-risk families, which include prenatal and postnatal counseling and continued contact with family and child in the first few years of life. In a 20-year follow-up of one such program, positive effects could be seen both for the at-risk child and for the mother.

- Preschool programs that address diverse intellectual, emotional, and social needs and the development of cognitive and decision-making processes.

Although these results indicate improvements in factors that have been associated with violence, there is no way to tell from the findings if the programs actually had an effect on the incidence of violence. Only when outcome measures include an assessment of the frequency of violent behaviors can we determine the validity of these or any programs as violence-prevention efforts.

School-based primary prevention programs for children and adolescents are effective with children and youth who are not seriously violence-prone, but these programs have not yet been demonstrated to have major effects on seriously and persistently aggressive youth. Evaluations of such school-based programs show they can improve prosocial competence and reduce at-risk behavior among youth who are not seriously violence-prone by promoting nonviolent norms, lessening the opportunity for and elicitation of violent acts, and preventing the sporadic violence that emerges temporarily during adolescence. The programs
teach youth how to cope better with the transitional crises of adolescence and offer them behavioral alternatives and institutional constraints to keep sporadic aggressiveness within socially defined bounds.

Primary prevention programs of the type that promote social and cognitive skills seem to have the greatest impact on attitudes about violent behavior among children and youth. Skills that aid children in learning alternatives to violent behaviors include social perspective-taking, alternative solution generation, self-esteem enhancement, peer negotiation skills, problem-solving skills training, and anger management.

SECONDARY PREVENTION PROGRAMS FOR HIGH-RISK CHILDREN

Secondary prevention programs that focus on improving individual affective, cognitive, and behavioral skills or on modifying the learning conditions for aggression offer promise of interrupting the path toward violence for high-risk or predelinquent youth. To the extent that development is an ongoing process, programs that target learning contexts, such as the family, should produce the most enduring effects. On the other hand, programs for youth already showing aggressive behavior have not been successful when the programs are unfocused and not based on sound theory. Furthermore, because most interventions have been relatively brief and have emphasized psychoeducational interventions, it is not known whether they would be effective with seriously aggressive or delinquent youth.

Programs that attempt to work with and modify the family system of a high-risk child have great potential to prevent development of aggressive and violent behavior. A growing psychological literature confirms that family variables are important in the development and treatment of antisocial and violent behavior. For example, in a study of adolescents referred to juvenile court for minor infractions, an intervention that used a family-therapy approach to identify maladaptive family interaction patterns and provide instruction for remedial fami-
ly management skills was successful in reducing recidivism rates and improving family interactions for up to 18 months after treatment. Sibling delinquency rates also were reduced.

**Interventions that aim to prevent or treat violence within the family have been shown to be of great value in preventing the social transmission of violence.** Modes of transmission within the family may include direct victimization and witnessing abuse of other family members. Both the parent-perpetrators of child abuse and the child-victims require treatment to change the current situation and to help avert long-term negative consequences for the victim and for the family. Physical abuse of children and adolescents, and other patterns of domestic violence, may be effectively treated with family-centered approaches to intervention.

**Interventions to prevent and treat sexual violence by and against children and adolescents are of critical importance because of the potential long-term effects of such victimization.** Victims of sexual violence are at increased risk for future victimization and may develop a constellation of problems ranging from low self-esteem to posttraumatic stress disorder (PTSD).

- Many programs have been created to prevent sexual victimization (e.g., “good touch/bad touch” programs for young children). Although these programs have been shown to affect children’s knowledge, awareness, and skills, little is known about whether they actually affect the child’s behavior in an abuse incident or not.

- Individual treatment that involves the parents (or the nonoffending parent, if the sexual violence is intrafamilial) and includes behavioral techniques is one approach that has been found to be effective for children with PTSD symptoms.

- Youthful offenders are highly likely to reoffend if they go untreated, whereas treatment with multimodal approaches (i.e., addressing deficits in cogni-
tive processes, family relations, school performance, and peer relations) has shown great promise in reducing the rate of recidivism for both sexual and nonsexual offenses among these youth.

The concept of “diversion programs” to keep high-risk or predelinquent youth out of the juvenile justice system has great merit, and there is evidence that diversion programs with strong grounding in psychological theory can have a positive effect on recidivism rates. In one such intervention, youth 12 to 16 years old who had been referred to juvenile court were diverted to a program in which each had close contact with a trained volunteer 6 to 8 hours per week for 18 weeks. The intervention included behavioral contracting, child advocacy, help to obtain access to community resources, and involvement in the community. The contacts between the student volunteer and the youth took place in the youth’s home, recreational settings, or other convenient locales. Carefully controlled and large-scale evaluations of the diversion program have shown that the intervention reduced recidivism among participants up to 2 years after the point of intake.

Diversion programs are favored in many jurisdictions because the crowded, poorly supervised conditions of many juvenile facilities expose predelinquent youth who are referred to the courts for minor infractions to more experienced and violent youth, putting them at risk for victimization and potentially socializing them to adopt a criminal trajectory. In most jurisdictions, however, the diversion programs do not have scientific grounding and encompass little more than vaguely formulated counseling programs; the overall effectiveness of such programs has not been demonstrated.

TREATMENT PROGRAMS

Several promising techniques have been identified for treating children who already have adopted aggressive patterns of behavior. These include problem-solving skills training for the child, child management training for the parents (e.g., anger control, negotiation, and positive reinforcement), family therapy, and interventions at school or in the community.
For youth who have already shown seriously aggressive and violent behavior, sustained, multimodal treatment appears to be the most effective. Such psychological treatment consists of carefully designed and coordinated components involving school, parents, teachers, peers, and community, often coordinated around family intervention. By the time youth with antisocial behavior are referred clinically, their dysfunction often is pervasive and severe, and multiple counterinfluences need to be brought to bear to achieve significant impact. Research has demonstrated that adolescents with aggressive, antisocial, or delinquent behavior can improve with such treatment. Although long-term outcome data are not available, existing data show the improvements are maintained at least up to 1 year.

Interventions with gang members, a small but significant number of whom are among the most seriously violent and aggressive youth, also must be multimodal, sustained, and coordinated. Such interventions should combine and coordinate current and past approaches to intervening with gang youth, including social control methods (i.e., surveillance, incarceration, probation), “gang work” methods (i.e., building relationships between gang members and social workers who help gang members abandon delinquency and adopt conventional ways of behavior), and “opportunities provision” methods (i.e., jobs programs, educational development). Because ethnic minorities make up a large proportion of gangs and gang membership, the importance of cultural sensitivity in these gang interventions cannot be overemphasized.

SOCIETAL INTERVENTIONS

The partnership between police and community represented by community policing may play a pivotal role in reducing youth violence. Although the effect of community policing on youth violence has not been evaluated, community policing is believed to have great potential, making the officer’s role one of preventing problems, not just responding to them.
Interventions can mitigate the impact of children’s continued and growing exposure to violence in the media. Some successful or promising approaches include:

- Empowering parents to monitor their child’s viewing;
- Helping children build “critical viewing skills” or develop attitudes that viewing violence in the media can be harmful;
- Working with the Federal Communications Commission to limit the amount of dramatized violence available for viewing by children during the “child viewing hours” of 6 am and 10 pm; and
- Working with the media to better inform and educate children in strategies for reducing or preventing their involvement with violence.

DESIGN AND EVALUATION OF INTERVENTION EFFORTS

Intervention programs should be carefully designed to fit the specific needs of the target group. Program design must take into account significant differentiating factors identified in psychological research as relevant to an intervention’s success. Chief among these factors is the need for interventions to be linguistically appropriate and consonant with the cultural values, traditions, and beliefs associated with the specific ethnic and cultural groups making up the target audience. The gender, age, and developmental characteristics of participants are other factors that must be carefully considered in the design of any intervention.

Improvements in evaluation techniques have been a major contributing factor in the development of scientific approaches to antiviolence interventions with children and adolescents. Evaluations identify the relative strengths and weaknesses of an intervention and the direction of the effects. In addition, programs vary in their breadth of impact, and it is critically important to document whether or not an intervention has a broad impact (e.g., across multiple social
domains, multiple problem behaviors, or both) or a more focused impact (e.g., altering use of one substance but not others and improving social competence but not altering at-risk behaviors).

In addition to evaluation’s role in identifying promising interventions, an important reason for evaluating programs is that even well-designed programs may have no effect or, occasionally, adverse outcomes. Programs may be ineffective for a variety of reasons, such as poor staff training, weak interventions (i.e., interventions unlikely to affect behavior, such as information and education materials only), lack of cultural sensitivity, departures from the intended procedures while the interventions are still in effect, and lack of administrative support. In addition, the potential for iatrogenic (treatment-caused) effects must also be acknowledged in psychosocial interventions.

SOCIETAL FACTORS AFFECTING THE SUCCESS OF INTERVENTIONS

The success of intervention efforts may be limited if society continues to accept violence and aggression in certain contexts or continues to view violence and aggression as reasonable responses in certain circumstances. Public and professional education about social influences on violent behavior is essential. Although there is ample evidence to show that a number of social experiences are related to the development of violence, there is as yet no general agreement in the society as a whole on the relative importance of these factors and on what to do about them. These factors include:

- Corporal punishment of children, because harsh and continual punishment has been implicated as a contributor to child aggression;

- Violence on television and in other media, which is known to affect children’s attitudes and behaviors in relation to violence; and

- Availability of firearms, especially to children and youth. Firearms are known to increase the lethality of violence and encourage its escalation.
The potential success of antiviolence interventions may be limited by the social and economic contexts in which some Americans spend their lives. These macrosocial considerations are beyond the scope of psychological interventions and require a society-wide effort to change. They include:

- Poverty, social and economic inequality, and the contextual factors that derive from these condition (i.e., living in crowded housing and lack of opportunity to ameliorate one’s life circumstances), which are significant risk factors for involvement in violence;

- Prejudice and racism, particularly because strongly prejudiced attitudes about particular social or cultural groups, or being a member of a group subjected to prejudice and discrimination, is a known risk factor for involvement in violence; and

- Misunderstanding of cultural differences, which must be addressed in intervention planning.
Recommendations for Psychological Research

Although psychology has contributed much that is of value during a half century of research on violence, there still is much that remains to be known if society is to prevent violence successfully or lower the frequency of its occurrence. To improve the scope and quality of research on violence involving youth, the Commission on Violence and Youth of the American Psychological Association urges incorporation of the following recommendations into planning and implementation of research efforts.

1. RESEARCH TO IDENTIFY EFFECTIVE INTERVENTION PROGRAMS THAT ADDRESS THE CONTINUUM OF PREVENTION, EARLY INTERVENTION, TREATMENT, AND REHABILITATION.

   1.1 Community Interventions: We recommend that culturally appropriate, comprehensive interventions for youth in the context of their ecological environments be developed and implemented. To facilitate this end, we urge psychologists to:

   • Participate in studies on how to mobilize and empower communities to take responsibility for addressing violence within their own communities; and

   • Become involved in preventive interventions launched by city governments, police departments, schools, social agencies, and civic or church groups in their own communities by providing consultation on the design and conduct of evaluation efforts.
1.2 Interventions With Children: We recommend that interventions begin as early as possible to interrupt and redirect processes related to the development of violent behavior. Among the research activities needed to support this end are:

- Metaanalyses of the numerous small-scale studies that have demonstrated the ability to interrupt a child’s trajectory toward violence;

- Identification of developmental opportunities for intervention, including a consideration of critical periods in development at which age-appropriate interventions can be introduced;

- Integration of a developmental perspective into the design and evaluation of interventions, including consideration of changes over time in child functioning and the interface of these changes with the interpersonal environment; and

- Investigation of a wider range of treatment approaches for both short-term and long-term effects, including psychodynamic and client-centered treatments commonly used with aggressive and violent children as well as cognitive-behavioral interventions.

1.3 Interventions With Parents: We recommend that interventions involving parents or prospective parents be a key part of a continuum model of violence prevention and intervention. Among the research activities needed to facilitate such interventions are:

- Research on home visiting programs, which have demonstrated effectiveness in improving parental care, supervision, and discipline techniques among extremely young parents and single parents. Research is needed on: (a) how to adapt such interventions to various cultural groups; (b) how to integrate such services into
existing health and social services; (c) how to minimize the cost of such interventions; and (d) most importantly, to determine how effective such interventions are in reducing violence;

- Research to test and refine training programs to improve parenting skills with various racial and ethnic groups and in different geographic areas and to find ways of implementing the programs on a larger scale with parents of children at high risk; and

- Research on parents’ beliefs and practices in disciplining children and adolescents, including the use of corporal punishment, and their effect on concurrent and future aggression and violent behavior.

**1.4 Interventions in the Schools:** We recommend that schools play a critical part in any comprehensive plan for preventive intervention to reduce youth violence. Among the most important research priorities for school-based interventions are:

- Research on the effects of altering factors in the school environment that have been shown to be conducive to aggression. These factors include a high number of students in a limited amount of space, heavy-handed and inflexible use of rules in the classroom, teacher hostility and lack of rapport, and inconsistencies in the limits of tolerance for students’ misbehavior;

- Development and evaluation of school-based curricula and teaching strategies to help build children’s resistance to violence as perpetrators and victims. Ongoing school programs should be evaluated for efficacy in reducing violent behavior both inside and outside the school setting; and
• Development and evaluation of school-based programs to teach children and their parents “critical media viewing skills.” The effect of these programs on current and subsequent aggressive behavior should be evaluated.

2. **EXPANSION OF BASIC RESEARCH EFFORTS.**

   2.1 We recommend that psychologists expand efforts to develop collaborative, multidisciplinary research and to include such fields as anthropology, criminology, education, neurology, physiology, psychiatry, public health, sociology, and urban geography, recognizing the multiplicity of factors involved in the etiology of violent behavior.

   2.2 We recommend that basic developmental research using a biopsychosocial approach be undertaken to shed new light on the interaction between nature and nurture in the development of aggressive and violent behavior.

   2.3 We urge that studies of the role of culture in fostering and preventing violence be conducted for each ethnic minority group, including studies that examine the impact of strengthening cultural identity as a preventive strategy and studies that test the theoretical concepts of conflicting cultural demands as influences on violence.

   2.4 We recommend that, although the concept that “violence breeds violence” is widely accepted, further research be conducted to confirm the extent to which victims of violence in one sphere of life may later become perpetrators of violence in another.

   2.5 We recommend that there be more careful examination of the developmental pathways to violence and victimization among ethnic minority youth, with particular attention to contextual factors such as living conditions and life stressors.
2.6 We recommend that research be conducted to identify factors that serve to protect children who share in those risk factors but do not exhibit violent behavior, given that only some children who grow up in high-risk situations become violent.

2.7 We urge that research be conducted to identify the mediating factors that may act to buffer or protect children who have experienced harsh and continual physical punishment in the home, school, or community from developing aggressive interpersonal behavior as adolescents and adults, because many children who receive physical punishment at home do not become violent.

2.8 We encourage further research on the demographic characteristics of perpetrators of hate crimes and on their beliefs and attitudes. Research sites should include the community, schools, the workplace, and the military.

2.9 We recommend that research be conducted on the incidence of “random violence”—homicide and assault that appears unconnected with any ostensible motive—and on the characteristics of the perpetrators and the circumstances under which such violence occurs.

2.10 We urge the development of research efforts to determine whether the huge arsenal of weapons in private hands is a deterrent to crime or a source of danger. This research effort should inform the development of public policy in this area.

2.11 We recommend that research be conducted to study how the documented effects of watching violence in the mass media are engendered in the individual viewer of media violence. Among the questions to be answered are: Who is most susceptible to these media effects? Which media effects are most likely for particular individuals? Under what circumstances are these media effects most likely? Which effects are most likely under particular circumstances? By what
mechanisms do these media effects occur? How do the mechanisms underlying these effects interrelate and differ? In what ways can these media effects be altered to prevent violence? and How do effective interventions for these effects interrelate and differ?

3. RECOGNITION OF THE COMPLEX INFLUENCE OF RACIAL, ETHNIC, AND CULTURAL DIFFERENCES IN ALL RESEARCH.

► 3.1 We recommend that all research be conceptualized, designed, and conducted with unfailing attention to the traditions, beliefs, attitudes, and behaviors of the groups being studied as well as the circumstances under which they are living.

► 3.2 We urge investigators to examine their own racial and cultural assumptions for bias in conceptualization, design, methodology, and selection of participants.

► 3.3 We recommend that representatives of the study population participate at every stage of the research, from planning through execution and publication.

4. IMPROVED DATA COLLECTION AND ANALYSIS.

► 4.1 We ask that collection of data on youth violence by the U.S. Department of Justice, the U.S. Public Health Service, and other state and local governmental agencies be expanded and improved.

► 4.2 We urge the U.S. Department of Justice to make further attempts to reconcile and explain the differences between its two major data sets, the Uniform Crime Reporting Program and the National Crime Victimization Survey.
4.3 We recommend that data be collected, analyzed, and reported on the risk and prevalence of violence by and toward the various racial and ethnic groups and subgroups of Asian and Pacific Island Americans, Hispanics, and Native Americans in addition to African Americans and Whites. We further recommend that whenever possible, fine-grained distinctions should be made; for example, data should be collected not just on “Asian Americans”, but specifically on Chinese, Koreans, Japanese, Vietnamese, Thai, Cambodians, Pacific Islanders, and other subgroups.

4.4 We recommend collection of basic data on the prevalence of gay and lesbian sexual orientation among youth and on the problems these youth experience, including discrimination, sexual and other physical assaults, health practices and disease, suicide and suicide attempts, and substance abuse.

4.5 We recommend that more data be collected on the risk of violence among youth with disabilities, using standardized definitions of key terms such as “disability” and “handicapped.” Wherever possible, studies should differentiate between disability caused by violence and disability that precedes the violence.

4.6 We urge the collection of current data on the prevalence of gangs, their breadth of location, their activities, their involvement with drug distribution and use, and their use of violence, and on the psychological attributes and functioning of boys and of girls who participate in gangs.

4.7 We recommend that data be collected on participants and matched groups of nonparticipants in mob violence, and on the psychological aftermath of mob violence on both the participants and the victims. Such data gathering should go beyond basic demographic characteristics and include information on personal psychological characteristics, family experience, affectional ties, and group affiliations.
4.8 We recommend that data be collected on the prevalence of violence perpetrated by women and girls. Because women and girls are less frequently the perpetrators of sexual and other physical violence than are boys and men, samples must be of sufficient size to analyze for the characteristics of perpetrators and victims.

4.9 We urge that data be collected on the prevalence of domestic violence and on characteristics of perpetrators and victims.

5. NEW AND IMPROVED MEASUREMENT AND INSTRUMENTATION.

5.1 We recommend the development of new and improved gender-sensitive and culturally sensitive measures, psychological tests, and assessment instruments. These instruments should be normed on different ethnic and racial groups and the subcultures that comprise each group.

5.2 We recommend the development of new measures to assess the characteristics of communities and the institutions with which children and youth interact.

5.3 We recommend that, whenever possible, multiple psychological assessment measures be used, including self-report, reports of others (i.e., teachers, parents, and peers), observations of behavior in standard controlled situations, and archival data. Multilevel assessments should be used (i.e., community, family, and individual).

5.4 We urge that new instruments be developed and validated that use behavioral assessment strategies appropriate to various groups of children, in addition to self-reports, teacher and parent reports, and archival data. Ideally, measures should be both quantitative and qualitative.

5.5 We recommend development of new measures of the cost-effectiveness of intervention programs.
6. CONSIDERATION OF KEY ISSUES IN THE REVIEW, FUNDING, AND DISSEMINATION OF RESEARCH.

6.1 We recommend that funding agencies assess, as part of the review of scientific merit, the extent to which research applications (a) include subjects of varied racial and ethnic groups, genders, and sexual orientations, or justify the case when special groups have been selected; and (b) are culturally sensitive in all aspects of the planning and execution of the research projects. Scientists who are members of the study populations should have the opportunity to provide opinions in the review of applications for support. Review committees should include scientists who are members of the study populations. Furthermore, experts with community ties should have the opportunity to provide input to review committee deliberations.

6.2 We encourage the support of studies for understudied groups and problems, recognizing that research resources may need to be allocated to populations most at risk and to problems of widespread concern.

6.3 We ask that federal agencies and foundations recognize the vital interplay between basic and applied research, and reduce the dichotomy in funding categories. Basic research provides the underpinnings for informed interventions. Applied research provides direct tests of models derived from theory and basic research and represents an effort to achieve the goal of reducing or eliminating violent behavior; at the same time it generally provides new understandings of basic processes. Therefore, it is important that funding agencies issue requests for applications that permit investigation of basic and applied research within the same study.

6.4 We recommend that federal agencies and private foundations seek to develop greater coordination of research and funding plans and longer funding periods that would allow meaningful follow-up.
6.5 We urge funding agencies to increase support for follow-up of previously completed studies in which short-term reductions of either mediators of violent behavior or violent behavior itself have been demonstrated. Such follow-up studies could provide important information on the duration of effects now so often lacking in the body of prevention and treatment research.

6.6 We urge that new longitudinal studies be initiated utilizing multi-component interventions in home, school, and community, with sufficient sample size and of sufficient duration to test long-term effects.

6.7 We support an increase in federal funding commitments to comprehensive, accelerated, longitudinal designs with multiple cohorts to trace the developmental trajectory of aggression and violence across transitional stages from early childhood into late adolescence and young adulthood. The planning for such studies should take into account and complement existing longitudinal studies.

6.8 We urge every investigator involved in psychological research related to youth violence to be aware of their professional and scientific responsibilities to the community and to the society in which they work and live. These responsibilities include promoting collegial exchange of knowledge with members of other disciplines engaged in research related to youth violence; disseminating the results of studies to the scientific community and to the general public; sharing data with other investigators seeking to verify the results of the research, within the limits of any legal barrier or confidentiality restrictions applying to the data; seeking to assure that their research efforts contribute to the welfare of their subjects and the community; and encouraging the development of law and social policy that serve the interests of the study population and the general public.
Although violence involving youth is increasingly prevalent and lethal, it is not inevitable. On the basis of psychology’s understanding of how violent behavior is learned and transmitted, the Commission on Violence and Youth of the American Psychological Association encourages adoption of the following broad and coordinated set of remedies to prevent youth violence or mitigate its effects.

1. Early childhood interventions can help children learn to deal with social conflict effectively and nonviolently. In their early years, children learn fundamental ways of dealing with social conflict. Parents, guardians, child care providers, and health care providers play an important role in helping young children learn basic aspects of effective nonviolent social behavior. These primary agents of child socialization need effective intervention strategies, materials, training, technical assistance, and support services designed to help them lay the critical foundations on which children can learn to reduce aggressive behavior and prevent future violence.

1.1 We recommend that Congress ask all relevant federal agencies to identify successful and promising interventions, programs, and resources for preventing and treating youth violence and develop and disseminate a report that is based on these programs. (Such agencies would include the U.S. Department of Education, the U.S. Department of Health and Human Services, the U.S. Department of Housing and Urban Development, and the U.S. Department of Justice.)

1.2 We recommend that funding and technical assistance for implementing local violence prevention programs be distributed through such mechanisms as state block grant programs. Special attention should be directed to continuous comprehensive intervention and follow-up in health and educational pro-
grams for families at risk for violence. Such families would include very young mothers, single parent families, those with parental mental health or substance abuse problems, those with parental histories of violent offenses or domestic violence, and those at high risk for child neglect and abuse. We also ask Congress to expand funding for Head Start and other school readiness programs both to improve the overall quality of such programs and to include all eligible children.

1.3 We encourage parent-teacher associations, community health centers, child care centers, and other organizations at which parents gather, to provide parent-child management training programs to foster the development of a repertoire of parental disciplining techniques to replace coercive ones. These programs should include behavior management and social skills training curricula, which have been shown to be effective in improving family communication and reducing child behavior problems.

2. Schools can become a leading force in providing the safety and the effective educational programs by which children can learn to reduce and prevent violence. On the one hand, schools often provide multiple opportunities for bullying, harassment, intimidation, fights, and other forms of violence to occur. Students who feel that their personal safety is threatened may bring weapons to school with them. Students who show poor school achievement and poor peer relations show an increased risk of becoming involved in violence. On the other hand, schools also can provide children with repeated and developmentally appropriate opportunities to follow sound principles of personal safety, strengthen academic and social skills, develop sound peer relationships, and learn effective nonviolent solutions to social conflict. A number of promising programs in classroom management, problem solving skills training, and violence prevention for school children have been developed, but not all of them have been adequately evaluated.

2.1 We ask Congress to encourage federally supported efforts to develop, implement, and evaluate violence prevention and aggression reduction curricula for use in the schools from early childhood through the teen years. Such
efforts would involve teacher training, training for other school personnel, curricular activities, coordinated parental support activities, and technical assistance in implementing programs that apply techniques known to be effective in reducing aggression and preventing violence.

2.2 We recommend that school systems take a long view of children’s education regarding violence and make every effort to develop and implement a coordinated, systematic, and developmentally and culturally appropriate program for violence prevention beginning in the early years and continuing throughout adolescence.

2.3 We ask state educational agencies to support the development, implementation, and evaluation of programmatic comprehensive school-based violence prevention programs designed to provide a safe learning environment and to teach students sound and effective principles of violence prevention. Furthermore, we underscore the need to provide a safe school environment for all children.

2.4 We recommend that professional organizations involved with school-based programs prepare and disseminate effective and promising program materials, assessment tools, and evaluation findings germane to violence prevention for broad and flexible use by schools, even while ongoing research attempts to improve their effectiveness and adapt them for particular circumstances and local cultural groups. Such organizations would include the American Psychological Association, the National Association of School Psychologists, the National Education Association, and the National Association for the Education of Young Children, among others.

2.5 We encourage schools to engage in the early identification of children who show emotional and behavioral problems related to violence and to provide to them or refer them for appropriate educational experiences and psychological interventions.
2.6 We ask Congress, state governments, and local governments to support the funding and development of after-school programs and recreational activities in schools with high proportions of at-risk children and youth. Initiation into gangs and delinquency is commonly linked to unsupervised time after school.

2.7 We recommend that those state governments and school boards that have not already done so adopt policies and provide training to prohibit the use of corporal punishment in schools and to encourage positive behavior management techniques to maintain school discipline and safety. We also encourage early childhood educators and health practitioners to teach parents alternative methods of discipline in the home.

2.8 We recommend that violence reduction training be made a part of preservice and inservice training for teachers, administrators, school staff, and health professionals likely to serve children of school age.

3. All programmatic efforts to reduce and prevent violence will benefit from heightened awareness of cultural diversity. Throughout every aspect of the review, the increasing cultural diversity of the United States was stressed. An understanding, appreciation, and integration of the benefits of culturally diverse perspectives is an important component not only of the content of the program but also of the process by which it is developed, implemented, and evaluated. It was noted that well-intentioned people and programs often have lacked sensitivity to cultural differences and have failed to develop violence prevention programs that are responsive to those differences. The effectiveness of programmatic efforts to reduce and prevent violence is likely to be increased by involving the members of the communities as partners in the development, implementation, and evaluation of these efforts.

3.1 We call for a variety of efforts aimed at increasing sensitivity to cultural differences and reducing discrimination and prejudice that create a climate conducive to violence. Such efforts should begin in the earliest school years with
specialized curricula for children and be continued throughout the school years. To foster more widespread acceptance of cultural diversity, human relations education should be provided for adults in a variety of settings, including public and private employment, the armed services, churches, and schools.

3.2 We recommend that all public programs designed to reduce or prevent youth violence be developed, implemented, and evaluated with a sensitivity to cultural differences and with the continued involvement of the groups and the communities they are designed to serve. Current programs designed to prevent violence should also be reviewed for their appreciation and integration of diverse cultural perspectives.

4. Television and other media can contribute to the solutions rather than to the problems of youth violence. For more than 4 decades, psychologists and other researchers have investigated and reviewed the best available evidence on the relation between violence in the media and aggressive behavior. Findings have been consistent: Television and other media contribute to children’s and youths’ involvement with violence as aggressors, victims, and bystanders who support violence. Research investigation of television and other media has also provided some techniques by which the effects of violence in the media may be mitigated through the teaching of critical viewing skills. Finally, evidence indicates that television is an effective and pervasive teacher of children and youth that has the potential, consistent with its new legal obligation to educate and inform children, to make a major contribution to solving the violence problem, rather than contributing to it. Our recommendations on this subject appear in two sections: Recommendations 4.1, 4.2, and 4.3 address public policymakers, and Recommendations 10.1 and 10.2 address the policy-making bodies of the American Psychological Association.

4.1 We call upon the Federal Communications Commission (FCC) to review, as a condition for license renewal, the programming and outreach efforts and accomplishments of television stations in helping to solve the problem of
youth violence. This recommendation is consistent with the research evidence indicating television’s potential to educate young children and with the legal obligation of broadcast stations to “serve the educational and informational needs of children,” both in programming and in outreach activities designed to enhance the educational value of programming. We also call on the FCC to institute rules that would require broadcasters, cable operators and other telecasters to avoid programs containing an excessive amount of dramatized violence during “child viewing hours” between 6 am and 10 pm.

4.2 We ask Congress to support a national educational violence prevention campaign involving television programming and related educational outreach activities to address the dire need for public education to help prevent youth violence in America. This campaign would be based on our best available scientific evidence about which changes will be most effective in helping to prevent violence, and our best educational and media strategies for fostering such change.

4.3 We recommend that the Film Rating System be revised to take into account the violence content that is harmful to children and youth. We also recommend that producers and distributors of television and video programming be required to provide clear and easy to use warning labels for violent material to permit viewers to make informed choices.

5. **Major reductions in the most damaging forms of youth violence can be achieved by limiting youth access to firearms and by teaching children and youth how to prevent firearm violence.** Youth and guns often are a fatal combination. Although interpersonal violence can occur through a variety of means, the use of firearms has dramatically increased the prevalence of violent death and the severity of violent injury to America’s youth. For example, in 1987 firearms accounted for 60% of all homicides in the United States and for 71% of homicides of youth 15 to 19 years of age. For every firearms fatality there were an estimated 7.5 nonfatal injuries. Although national debates about adult access to guns continue, few would advocate that children and youth should have easy access to guns.
Nevertheless, children and youth in America generally have widespread, easy, and unsupervised access to firearms, exposure to media portrayals that glorify the use of firearms, and little opportunity to learn how to prevent firearm violence. Without society-wide restrictions it will not be possible to effectively restrict youth access to firearms. Our recommendations on this subject appear in two sections: Recommendations 5.1 and 5.2 address public policymakers, and Recommendation 10.3 addresses the policy-making bodies of the American Psychological Association.

▶ 5.1 We support the initiative of the U.S. Public Health Service to reduce weapon-carrying by adolescents.

▶ 5.2 We recommend that Congress provide funding for the development, implementation, and evaluation of school-based programs to educate children regarding the prevention of firearm violence and the reduction of both unintentional and intentional death and injury caused by firearms.

6. Reduction of youth involvement with alcohol and other drugs can reduce violent behavior. Violent behavior associated with the use of alcohol commonly accounts for about 65% of all homicides, 40% of all assaults, and 55% of all fights and assaults in the home. In addition, an estimated 10% of homicides occur in the business of trafficking illegal drugs. Alcohol and other drugs are involved in youth violence in several ways. Abuse of alcohol and other drugs by parents has often been associated with violent behavior toward children. Alcohol and use of some other drugs by youth themselves also is associated with increased rates of violence. Youth involvement in the illegal business of drug trafficking is associated with violence. Although our Commission report does not provide a thorough review of this issue, the following recommendations were nevertheless clear.

▶ 6.1 We encourage community, school, family, and media involvement in prevention and treatment programs that focus on the links between substance abuse and the prevalence of violence.
6.2 We encourage federal, state, and local agencies to provide funding for such education, prevention, and treatment programs.

7. Psychological health services for young perpetrators, victims, and witnesses of violence can ameliorate the damaging effects of violence and reduce further violence. Research has shown that a history of previous violence is the best predictor of future violence. Actually, a relatively small proportion of the population accounts for much of the serious criminal violence. More than one-half of all crime is committed by 5% to 7% of young people between the ages of 10 and 20. Therefore, it is important to target young violent offenders for a variety of interventions, including cognitive, behavioral, and social skills training, counseling, and therapy. A number of effective and promising programs have been identified for treatment of children and youth who have committed violent offenses or been referred for problems of antisocial, aggressive, and violent behavior. However, too few publicly funded mental health services have been made available for child and family treatment that can help prevent violence.

7.1 We recommend that public mental health services be reallocated so that more services are available for prevention and for early treatment of children and families with problems of aggression and violence.

7.2 We recommend that more treatment programs be developed and increased counselling services for victims be made available to the large numbers of young children and youth who witness high levels of violence in their homes, streets, and schools.

8. Education programs can reduce the prejudice and hostility that lead to hate crimes and violence against social groups. Hate crimes can be committed by individuals or groups, sometimes loosely organized, sometimes more formally organized. Hate crimes can be directed against individuals or groups. Children and youth who appear “different” in any way are more apt to be harassed and victimized by others. Children and youth often victimized include African
Americans, Hispanics, Asian and Pacific Island Americans, Native Americans, girls and young women, gays and lesbians, Jews, and those with physical disabilities. There are many competing explanations about the origins of this type of violence, but it is always associated with learned prejudice, group polarization, and hostility.

8.1 We encourage schools, colleges, and universities to adopt human relations education to dispel stereotypes, encourage broader intercultural understanding and appreciation, and reduce the incidence of hate violence. Training in mediation techniques should be provided to community leaders.

8.2 We recommend that effective interventions be developed to help victims of hate violence to recover from attacks.

8.3 We recommend that, in conjunction with these efforts, the U.S. Civil Rights Commission undertake a review of federal antidiscrimination laws, statutes, and regulations regarding race, ethnicity, religion, gender, sexual orientation, and physical disability.

8.4 We recommend that federal, state, and local governments pursue strict enforcement of antidiscrimination laws regarding race, ethnicity, religion, gender, sexual orientation, and physical disability.

9. When groups become mobs, violence feeds on itself. Mob violence may occur under a variety of conditions, including when rising expectations are unfulfilled, when social and economic conditions appear to be worsening, or when injustice is perceived. Often a specific event precipitates the violence. Mob violence may be directed against individuals or groups or may appear to be undirected. In the course of group violence, the members enter into a process of change along a “continuum of destruction.” Many of the recommendations previously made are relevant here to address the underlying conditions that encourage mob behavior, including relief from conditions of socioeconomic disadvantage, access
to increased opportunities and resources, increased cultural awareness, and reduced discrimination. Whatever the underlying roots of the disturbance, the police are called on to restore control. They are often caught in a dilemma between responding too early and too late, too much and too little. Experience has shown that the participation of community leaders in restoring early control is important.

► 9.1 We recommend that human relations training for community leaders and police be conducted jointly.

► 9.2 We recommend that police departments implement or expand their training and community policing efforts, that these efforts include social and cultural sensitivity training, and that increased participation by members of the community be included in these efforts.

10. Psychologists can act individually and in our professional organizations to reduce violence among youth. The Commissioners noted that there were many activities in which psychologists can contribute to the reduction of youth violence, in addition to those already being conducted. Such activities can be carried out through national, state, and local associations and divisions, as well as through individual actions.

► 10.1 We propose that the American Psychological Association resolution on television violence and children’s aggression be modified to cover all the mass media, including film and video as well as television.

► 10.2 We recommend that the American Psychological Association develop video and other educational materials designed to enhance the critical viewing skills of teachers, parents, and children regarding media violence and how to prevent its negative effects.

► 10.3 We recommend that the American Psychological Association revise and expand its current policy on handgun control to incorporate the following as APA policy:
Support for nationwide restrictive licensing of firearm ownership based on attainment of legal voting age; clearance following a criminal record background check; and demonstrated skill in firearm knowledge, use, and safety.

Support for federal, state, and local governments to increase specific legal, regulatory, and enforcement efforts to reduce widespread, easy, and unsupervised access to firearms by children and youth.

► 10.4 We propose that the American Psychological Association hold a series of training programs for its members on youth violence with special sessions for clinicians and for researchers.

► 10.5 We recommend that the American Psychological Association take an active role in identifying model interventions that have been demonstrated to be effective in preventing or reducing youth violence. These should be disseminated to professional audiences and to the general public.

► 10.6 We recommend that psychologists review the research findings presented in this and other reports and provide consultation to community groups interested in implementing programs to prevent youth violence.

► 10.7 We suggest that psychologists make a coordinated presentation of models of successful violence prevention programs at such workshops as the Vermont Conference on Primary Prevention.

► 10.8 We recommend that the American Psychological Association sponsor further reviews of influencing factors in violence—for example, gender, ethnicity, psychophysiology, and substance abuse.

► 10.9 We recommend that the report and recommendations of this Commission on Violence and Youth be presented to Congress, to the U.S. Department of Health and Human Services, to the U.S. Commission on Civil Rights, to the U.S. Department of Justice, and to other relevant agencies.
10.10 We recommend that education and training on youth violence be incorporated into the graduate preparation of psychologists. We also recommend that psychological training programs institute cultural sensitivity courses and training to increase cultural awareness and sensitivity to underrepresented groups that are affected by violence.
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Ronald G. Slaby, PhD, Joyce Barham, Leonard D. Eron, PhD, and Brian Wilcox, PhD
The American Psychological Association Commission on Violence and Youth was convened in July 1991 by APA’s Public Interest Directorate. The Commission’s primary purpose was to bring psychological knowledge to bear on the national problem of violence involving youth.

In giving the problem of violence and youth such extraordinary visibility within APA, the Public Interest Directorate was responding to members’ concerns about this growing problem and to their desire to make psychology, with its unique perspective on how behaviors are learned and unlearned, a part of the public dialogue.

The Commission’s 12 members have longstanding professional interest in the study of children and adolescents who are victims, perpetrators, or witnesses of violence. Ten of the 12 are psychologists and APA members; one was at the time of his appointment Chief of Police in Washington, DC; and one is an attorney with special expertise in the area of hate crimes.

- The Commission began its work by accepting APA’s charge to accomplish the following tasks:

- To articulate the state of psychological knowledge relevant to violence and youth;

- To define existing practical problems and how psychological knowledge can be applied to resolve or constructively intervene in those problems;

- To describe effective intervention models for preventing violence, mitigating its effects or resolving problems related to violence and youth;
To recommend policies, programs, or projects that will constructively influence psychological research, practice, and education relevant to violence and youth; and

To recommend promising directions for public policy, advocacy, research, and program development to prevent the spread of violence and temper its negative consequences for individuals and communities.

To address these tasks, the Commission met in plenary sessions five times: two times in 1991 and three times in 1992. In November 1991, in conjunction with one of the plenary sessions, a number of invited experts from a variety of disciplines addressed the Commission during open hearings. Those participating in the hearings, and their affiliations at the time of participating, included:

- Carol Behrer, Family and Youth Services Bureau, Administration on Children, Youth, and Families
- George Bellinger, District of Columbia Metropolitan Police Department
- Thomas Blagburn, District of Columbia Metropolitan Police Department
- Beverly Coleman-Miller, MD, President, BCM Group
- Sandy Colvard, Sexual Minority Youth Assistance League, District of Columbia
- Michael B. Greene, PhD, Juvenile Justice Administrator, Office of the Deputy Mayor for Public Safety, New York City
- Wade Horn, PhD, Administration on Children, Youth, and Families
- Dionne J. Jones, PhD, The Urban League
- Patricia Jones, PhD, Chicago School of Professional Psychology
- Mireille Kanda, MD, Director of Child Protection Services, Children’s National Medical Center
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- **Iseli Krauss, EdD**, Committee on Disability Issues in Psychology, APA
- **David Lloyd, JD**, National Center on Child Abuse and Neglect
- **Mandel Montes**, Latin American Youth Center, District of Columbia
- **Celeste Morgan**, Sexual Minority Youth Assistance League, District of Columbia
- **James Perry**, Violence Prevention Program, Washington Hospital Center
- **Steven Powell**, Director, District of Columbia Youth Task Force
- **John E. Richters, PhD**, National Institute of Mental Health
- **Denise Snyder**, Executive Director, DC Area Rape Crisis Center
- **Santiada Street**, District of Columbia Youth Task Force Health Initiatives
- **Enrique Valez**, Latin American Youth Center, District of Columbia
- **Amy Vitro**, Executive Director, Sexual Minority Youth Assistance League, District of Columbia
- **Daniel Webster, ScD**, Violence Prevention Program, Washington Hospital Center
- **Leon West**, Congress of National Black Churches

During the hearings, the Commission also met with children and youth from Washington, DC, who described their experiences of living in an atmosphere of violence and shared their ideas for solutions.

COLLEGIAL WORKINGS

The Commission sought and received expert help by establishing a 130-member Cadre of Experts on Violence, many of whom were drawn from APA’s membership. APA members also helped shape the Commission’s activities by participating in an open forum at the 1991 APA convention in San Francisco. At
the 1992 APA convention in Washington, DC, participants in a second open forum offered comments on several draft papers that will form part of the Commission’s report to APA. Throughout the Commission’s work, APA members were kept informed of the Commission’s progress through minutes of the Commission’s meetings and articles in APA publications; many members responded by sending papers and other valuable information supporting the Commission’s work.

The Commission received the input of other APA groups working on issues pertinent to violence and youth. Representatives of the APA Committee on Disability Issues in Psychology, for example, testified at the Commission’s hearings. Members of APA’s governance groups commented on the initial drafts of the Commission’s report. One of the Commissioners who had been a member of the APA Task Force on Television and Society was able to share the insights of that group to inform the Commission’s work. The Commission’s work also was informed by the ongoing activities of other APA initiatives on violence, including the APA Task Force on Violence Against Women and the five Working Groups established under the direction of the Coordinating Committee on Child Abuse and Neglect to implement APA’s Resolution on the Psychological Implications of Child Abuse and Neglect.

During the Commission’s tenure, expert panels organized by the U.S. Centers for Disease Control and Prevention, the National Research Council, and the Secretary of the U.S. Department of Health and Human Services issued major interdisciplinary reports addressing the problem of violence. Several Commission members participated in the work of these panels, a fact that allowed the Commission to benefit from the experience of all groups.

Commission members also sought advice and shared their work with members of the international scholarly community. In the summer of 1992, for example, four Commission members took part in a panel presentation at the International Society for Research on Aggression (ISRA) in Siena, Italy, and received comments and reactions from international experts.
All papers included in Volume II of the Commission’s report to APA, with the exception of the Commission’s policy recommendations, were submitted for peer review by subject matter experts. Policy recommendations were prepared with the assistance of APA’s Office of Public Policy.

The Commissioners extends special thanks to the following people for their assistance with development of the Commission’s report: Jean M. Baker, PhD; Kevin Berrill; Kenyon S. Chan, PhD; William Davidson, PhD; Lemyra DeBruyn, PhD; Paul Gendreau, PhD; L. Philip Guzman, PhD; Darnell Hawkins, PhD; James M. Jones, PhD; Iseli K. Krauss, EdD; Teresa LaFromboise, PhD; Donald Lollar, EdD; John Meier, PhD; John P. Murray, PhD; Jerry Newberry; Melissa Ring, PhD; Donald Routh, PhD; Carolyn Swift, PhD; Harry C. Triandis, PhD; Penelope Trickett, PhD; Reiko Homma True, PhD; and members of the APA Task Force on Violence Against Women and of the Committee on Women in Psychology. The Commissioners also wish to thank the following people who provided valuable assistance for Commission activities: Phyllis Belford, Kurt Jones, Simone C.E. Kniff, Ann Rutherford, and Pamela Uyehara. For the design and layout of this report, the Commissioners thank Ramona Weaver with W3 Graphics Group of Fairfax, VA.
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The Commissioners also want to acknowledge the following people who made up the Commission’s Cadre of Experts on Violence:

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<td>Christine Doylea, PhD</td>
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<td>Jean E. Dumas, PhD</td>
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<td>David F. Duncan, DrPH, CAS</td>
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<td>Ronald S. Ebert, PhD</td>
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<td>Joe Elam, PhD</td>
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<td>Del Elliott</td>
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<td>Charles Patrick Ewing, JD, PhD</td>
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<td>David W. Foy, PhD</td>
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On the basis of their profound conviction that psychology can contribute significantly to society’s quest for solutions related to violence and youth, Commission members decided to emphasize preventive and rehabilitative interventions in their deliberations and in the report rendering their findings and recommendations to the members of APA. They expressed a strong commitment to making their work relevant and meaningful to the communities and professionals who confront the practical implications of violence and its effects on the lives of young people.

To make the insights of psychology on the problem of youth and violence available both to the community of professional psychologists and to the audience of policymakers, advocates, law enforcement personnel, professionals in other disciplines who work in the fields of violence and youth, and community leaders, Commission members decided to issue their report in two volumes:

- A summary volume, to make available the key findings of the Commission in a format that addresses the Commission’s broader audience.

- A volume of scientific papers, which will contain 19 chapters addressed specifically to the scientific community. These chapters provide detailed supporting data and references for the assertions in the summary volume. They also address the theoretical, methodological, and practical issues affecting psychological research and clinical interventions in areas relevant to youth and violence.

During the Commission’s hearings, expert participants repeatedly urged APA to go beyond the mere production of a report in its response to the problems of violence and youth. These urgings reinforced the Commission members’ convictions that psychology must offer communities new and effective responses to
youth violence. For this reason, APA will actively seek to promote the recommendations presented in this report to policymakers. The Association also will continue to seek ways to educate psychologists, other professionals, and the general public about issues related to violence and youth, and to involve interested APA members in turning the Commission’s perspective on interventions into research-based model interventions. Also important will be APA’s ongoing efforts, based on the Commission’s work, to build bridges to professionals in other disciplines for creating multidisciplinary responses to violence involving youth.