Shared Framework for Reducing Youth Violence and Promoting Well Being

Key messages:

- We are united by a singular mission—to stem youth violence, to create conditions that nurture our young people, and to develop safe and thriving communities.
- Each of us has a different but complementary role to play. To have a real impact, we must strategically align and focus the work that practitioners, institutions, communities, and families contribute.
- Working together across sectors, organizations, and disciplines allows us to surmount barriers to understanding and collaboration and achieve safety and well-being in our homes and communities.
- Each sector must undertake the work; however, success comes from collective action.
- True success requires more than simply developing a collaborative. We must be clear about how our work fits with and contributes to the larger picture. Implementing comprehensive approaches in our communities requires collective action with a shared vision, common language, shared measures/indicators, and joint structures.
- Justice, fairness, and accountability are essential components to this work.
- The Shared Framework gives us that structure by which we can strategically leverage our resources and strengths to reduce youth violence and promote the well-being of children and youth.

Overview

The Shared Framework for Reducing Youth Violence and Promoting Well Being (Shared Framework) is made up of a vision statement, values, principles for action, and a logic model depicting the means to attain the goal (theory of change). A glossary of selected terms and a listing of resources are also included. Components of this Shared Framework draw upon previously developed frameworks and models, e.g., OJDP’s Comprehensive Strategy, the Public Health Approach to Violence Prevention, and the social ecological model. The Shared Framework incorporates the research and programmatic evidence base that the federal, state,

1 Another related and recently released framework is the Well-Being Framework for Vulnerable Youth and Young Adults created by the Youth Transition Funders Group, and described in this publication.
and local partners have built over three decades across multiple disciplines. This includes key elements of OJJDP’s signature programs—the National Forum on Youth Violence Prevention, Defending Childhood, and the Community-based Violence Prevention program—and other federal youth violence work of the Substance Abuse and Mental Health Services Administration (SAMHSA), Administration for Children and Families (ACF), and Centers for Disease Control and Prevention (CDC). In addition, it aligns with the vision and mission of OJJDP and other federal agencies working to address youth violence.

**Purpose**

The Shared Framework helps focus and strengthen collective action to reduce youth violence and ensure the health, safety, and well-being of our children, youth, families, and communities (Refer to Collective Impact in the glossary).

Attainment of these goals requires families, schools, and communities together to provide children and youth the guidance, opportunities, and supports to become competent, compassionate, and self-supporting adults. At the same time, we must hold children and youth appropriately and fairly accountable for their actions using a range of developmentally appropriate and graduated sanctions. Throughout all aspects of this work, we must emphasize justice, fairness, and accountability in all aspects of the work.

The many stakeholders\(^2\) engaged in this work bring different perspectives, experiences, and expertise to bear. Each has a unique role to play and a key contribution to make. Each has developed proficiencies and networks related to their particular role. Yet desired results come from a combination of specialized expertise and collective action forged in response to a mutual vision and common understanding of the goals and the means to achieve them.

The Shared Framework provides one structure through which we can shape that common vision, language, and strategy. OJJDP and CDC staff worked together to articulate its overarching vision and the key elements to reduce youth violence and bring about well-being. The intent of the Shared Framework is to equip each individual or entity with the information to better understand how their efforts align with and contribute to the overall effort. This, in turn, can position us to more effectively and strategically leverage our resources.

We expect stakeholders will find value in using the Shared Framework to examine their particular perspectives and align them with those of other stakeholders to propel work in concert with similarly engaged families, communities, and states. We anticipate that funders and policymakers will use the Shared Framework in the development of joint policy statements, common language in funding solicitations, shared program and funding priorities, integrated technical assistance, and means to identify with whom to coordinate and partner.

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\(^2\) By stakeholders, we mean all of those who are affected by or influence youth violence and well-being—the individuals (youth, parents, and extended families), communities, legislators, media, faith- and community-based agencies, private sector, philanthropy, and public agencies at the federal, state, and local levels.
Vision: Safe, healthy, and thriving children, youth, families, and communities

Values

1. We value all children and youth. With appropriate opportunities and supports, each has the potential to thrive and become a productive, contributing citizen.

2. Violence is neither acceptable nor inevitable.

3. All children and youth deserve equal access to health care, housing, education, justice, freedom from harm, and nurturing and supportive families and communities, regardless of race, class, gender, culture, religion, disability, and sexual orientation.

4. Professionals and families alike bring strengths, perspectives, and resources. The contributions of all, including the perspectives and engagement of youth, are needed to achieve child and youth well-being and prevent and intervene around violence.

5. Accountability is essential and shared. Children and youth must be held accountable for their actions as federal, state, and local government must be accountable for their work to support children, youth, and families and cultivate safe and healthy communities. Ultimately, we are all responsible for results and to work together for collective impact.

Principles for action

To prevent and eliminate violence and improve child well-being, we all need to employ evidence-based, comprehensive approaches that address the multiple factors that impact violence, including individual, peer, family, parent relationships, community influences, and societal factors. All stakeholders should invest in the development of these approaches to prevent violence to take advantage of the unique strengths and expertise each brings to the work. Importantly, the voices of children, youth, and families who are impacted must be front and center to any effort to prevent and eliminate violence and improve well-being.

We also must move beyond defining the solution as the absence of violence to also embrace asset-oriented outcomes (i.e., positive youth development and social-emotional health and well-being). Furthermore, approaches must account for individuals’ experiences in context and must be grounded in child and adolescent development principles; be trauma informed; focus on the reduction of risk of victimization, delinquency, or criminality (perpetration); and
acknowledge and redress the impact of historical trauma\textsuperscript{3} and the legacy of racial inequities on families and communities.

The following are key principles for addressing youth violence:

1. **Address the multiple influences in a child’s life.** No single factor explains why some youth perpetrate or become a victim of violence nor why violence is more prevalent in some places than others. Violence results from a complex interplay of a variety of factors and requires nuanced, developmentally based responses tailored to the specific situation of each child. Prevention, intervention, and responses must therefore be developed or put into practice with an understanding of the multiple influences and current situation (i.e., family status, system involvement). These include (but are not limited to):\textsuperscript{4}

   a. **At the individual level,** a young person’s developmental stage, biological and psychological characteristics (e.g. abusive head trauma, fetal alcohol disorders, genetic disorders, impulsive or aggressive tendencies, feelings of hopelessness, etc.), and experiences (e.g. history of trauma, involvement with foster care or the justice system, homelessness).

   b. The **relationships** in an individual’s life, including those with peers and adult/parent figures (e.g., safe, stable, nurturing relationships are protective factors; authoritarian childrearing attitudes, low parental involvement, poor family functioning, etc. are risk factors).

   c. **School-, community- and societal-level** factors, including the built environment (e.g. high concentration of poor residents; design factors, such as open and green spaces, lighting, etc.), cultural and social environment (e.g., diminished economic opportunities, high level of transiency, impact of acculturation and other issues related to immigration, low levels of community participation, socially disorganized neighborhoods), community-level trauma (e.g., historical trauma, chronic exposure to violence), other environmental factors (e.g., lead and other toxic substances and their relationship to neurological functioning and brain development), prevailing cultural and societal norms, and the interaction of youth and families with community institutions, including schools, police, courts, child welfare agencies.

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\textsuperscript{3} Historical trauma is described as multigenerational trauma that a specific cultural group has experienced. Anyone living at one time in families or neighborhoods marked by severe levels of trauma, structural racism, disinvestment and poverty, dislocation, war, etc., or who are still suffering can experience it. It is cumulative and collective and those who never experienced the initial traumatic stressor, such as children and descendants, can still exhibit signs and symptoms of trauma.

\textsuperscript{4} The Centers for Disease Control and Prevention website provides a list of risk and protective factors for child maltreatment, youth violence and suicide.
2. **Embrace positive youth development and well-being.** Effective approaches to violence prevention accounts both for risk and protective factors for violence and factors that promote positive youth development and well-being. They also account for the various domains (interpersonal, school, community, family, and society) in which youth reside. As illustrated below, a variety of supports are necessary to promote safe, stable, and nurturing relationships and environments and responsive systems for all children.

3. **Ensure prevention, intervention, and treatment strategies are trauma informed.** Trauma can result in a wide range of social, developmental, and biological consequences (e.g. attachment issues, ability to regulate mood, dissociation, behavioral control, impact on cognition, etc.). For that reason, it is important to provide trauma-informed care. Trauma-Informed Care has been described as a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological, and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment. Prevention and intervention activities recognize that exposure to trauma and violence has a large impact on the mental and physical health of an individual. Therefore, it is critical that we also consider how to prevent trauma, particularly violence.

4. **Use a comprehensive spectrum of evidence-based** strategies.

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5 Refer to the glossary for full definition of evidence-based.
a. Address violence through a continuum of evidence-based prevention and intervention strategies and services and ensure accountability and rehabilitation of youth through graduated sanctions and supports.

b. Implement a range of coordinated, comprehensive, multi-system, and evidence-based strategies and system reform approaches to influence policy and practice.

5. **Consider the differential impact on populations and how they should be factored into strategy development.** The complex and interwoven nature of race, class, immigration status, disability, gender, gender identity, and sexual orientation is evidenced through discrimination, disparities, social isolation, de facto housing segregation, and the unequal allocation of resources within communities. This requires comprehensive and candid examination of the historical, cultural, and socio-economic landscape; outreach and implementation of interventions that are culturally informed and relevant to the populations of interest; and community- and societal-level strategies to achieve the well-being and violence reduction strategies sought. Primary considerations include:

a. Rates of violence and differential population impacts.

b. Historical trauma.

c. Disparities, including racial, ethnic, disability, and gender-based disparities.

d. Cultural context.

e. Distribution of resources.

6. **Involve stakeholders from various sectors.**

a. Engage and support youth and families as full partners in the analysis of issues and the development and implementation of solutions.

b. Create cross-sector, multi-level collaboratives that engage the spectrum of community stakeholders and formal and informal community leaders (that is, those partners who have influence on or are affected by violence: federal, state, and local governments; faith- and community-based organizations; business; media; block associations; and natural leaders).

c. Collaboration should use the strategies of collective impact (joint decisionmaking and shared governance).

7. **Train all professionals who interact with youth on their role in preventing and reducing trauma and violence and promoting well-being.**
a. Incorporate into profession-specific training (e.g., police academies; schools of public health, law, social work, psychology, education; etc.) information on the principles of child and youth development; the impact of trauma and toxic stress to cognition, social, and emotional development and physical health; and the implications for practice.

b. Training should cover how to identify, screen, and assess trauma and violence and how to address violence using evidence-based and culturally appropriate means.

c. Provide sufficient resources and support to these professionals and hold them accountable for fair treatment of all children and youth.

8. **Make effective and appropriate use of data.** More specifically:

a. Promote the use of community assessments and strategic planning that use data to inform decisionmaking (e.g. the selection of an evidence-based program), for ongoing program improvement, and for measuring outcomes. Consider data across the involved sectors, for example, justice; child welfare; public health, including emergency room data; and education.

b. Model and support appropriate information sharing across agencies, including schools, police, justice, and health through guidance, technical assistance, training, and fiscal and technical support.

c. Generate knowledge to inform the evidence base.

d. Track and assess continually to ensure that children and youth have full, equitable access to opportunities and supports (programs, services, and resources).

e. Promote evaluation of ongoing strategies to ensure that programs are effective in reducing violence and promoting well-being.

9. **Support long-term investment to sustain initial changes, including public-private funding and development.** From the outset of planning, devote attention to building the structures that will embed, perpetuate, and sustain reforms. This includes establishing shared governance and decisionmaking across sectors and throughout the community, appropriate levels of staffing support, public and private partnerships, increased awareness of the scope of the problem and strategies to address them, policy and practice work, and fiscal reforms, such as focusing resources where appropriate on highest risk, highest demand to free up resources that can be allocated to prevention.

10. **Allocate efforts and resources based on potential impact and outcome.** Seek to rebalance energy, efforts, and funds toward those actions that can provide the greatest reduction in violence and improvement in child and youth well-being. Examine how services and resources are funded and access is provided and who is involved in making decisions. Use a
cost-benefit analysis to ensure best use of resources. For example, alcohol policies or zoning changes that eliminate single-serving drinks have been shown to have significant effects in reducing violence. Similarly, community policing strategies can be effective in preventing and controlling violence. These strategies can reduce more violence overall and sustain those reductions longer than individual behavior modification alone.

Logic model

Logic Model Key:

ACTIVITIES

Awareness Raising

- Each sector has its own unique activities
- Examples:
Promote unified framework for violence prevention

- Promote activities that increase public knowledge of violence, trauma, and their consequences
- Promote activities that increase understanding of the role of child and youth development

**Public and Professional Education**

- Each sector has its own unique activities
- Examples:
  - Create, convene, and support peer-to-peer networks across states and communities
  - Support the professional development of a workforce trained to identify, assess, prevent, intervene, and treat violence and its consequences
  - Educate the general public about their role and responsibility for a child's well-being and the prevention of violence and public safety

**Evidence-based Practice and Knowledge Development**

- Each sector has its own unique activities
- Examples:
  - Model and promote the adoption of evidence-based strategies that address risks and protective factors for violence and those factors that promote positive youth development and well-being
  - Promote adoption of evidence-based strategies for the identification and care for children and families exposed to violence and the promotion of family and community healing
  - Use and inform research and program evaluation to continuously improve practice

**Capacity and Infrastructure Development**

- Each sector has its own unique activities
- Examples:
  - Provide funding to state/local partnerships to promote policy and practice changes and adoption of evidence-based violence prevention and intervention strategies
  - Lead or participate in federal coordination efforts to ameliorate violence and reduce barriers to and promote more efficient use of federal resources at the local level
• Model and promote engagement of youth and families in development of solutions
• Model and provide incentives for coordinated, local, multi-sector leadership
• Support development of state and community plans for violence prevention

OUTCOMES

Short-term Outcomes
• Communities mobilized for collective action
• Coordinated, integrated approach
• Communities identify risk and protective factors
• Increased understanding of violence
• Communities prioritize promotion of child well-being and positive youth development
• Resources distributed across continuum

Intermediate Outcomes
• Violence is not considered acceptable
• Improved community cohesion and social capital
• Improved perception of public safety
• Increased opportunities for positive youth development
• Improved school climate and sense of safety in school
• Professional workforce trained

Long-term outcome
• Reduced youth violence, improved child and youth well-being (*1 million violent injuries by 2020*)
Definitions

**Child and youth well-being.** The Administration on Children, Youth, and Families has adapted a framework by Anthony Lou, Vu Stone and Austin that identifies four well-being domains for assessing children’s cognitive functioning, (b) physical health and development, (c) behavioral/emotional functioning, and (d) social functioning. Aspects of healthy functioning within each domain may vary according to the age or developmental status of the child or youth. The framework also takes into account contextual factors, both internal and external to children, that may influence well-being. These include environmental supports, such as family income and community organization, and personal characteristics, such as temperament, identity development, and genetic and neurobiological influences.

**Collective Impact.** The commitment of a group of actors from different sectors to a common agenda for solving a complex social problem. To create lasting solutions to social problems on a large scale, organizations—including those in government, civil society, and the business sector—must coordinate their efforts and work together around a clearly defined goal. A Collective Impact frame is best employed for complex and systemic problems rather than technical problems. Beyond simple collaboration, there are five conditions that, together, lead to meaningful results from Collective Impact:

1. **Common agenda.** All participants have a shared vision for change, including a common understanding of the problem and a joint approach to solving it through agreed upon actions.

2. **Shared measurement.** Collecting data and measuring results consistently across all participants ensures efforts remain aligned and participants hold each other accountable.

3. **Mutually reinforcing activities.** Participant activities must be differentiated while still being coordinated through a mutually reinforcing plan of action.

4. **Continuous communication.** Consistent and open communication is needed across the many players to build trust, assure mutual objectives, and appreciate common motivation.

5. **Backbone organization.** Creating and managing collective impact requires a separate organization(s) with staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organizations and agencies.

**Evidence-based.** Although the definition of evidence-based may vary by the sector in which it is being applied, in all cases it generally refers “to approaches to prevention or treatment that are validated by some form of documented scientific evidence.” It does not include those

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approaches or strategies based solely on tradition, convention, belief, or anecdotal evidence. (Adapted from SAMHSA.)

**Positive youth development.** Positive youth development is an intentional, prosocial approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths. (Interagency Workgroup on Youth Programs) Retrieved from: [http://www.youth.gov/youth-topics/positive-youth-development](http://www.youth.gov/youth-topics/positive-youth-development)

**Prevention.** Prevention is a systematic process that promotes safe and healthy environments and behaviors, reducing the likelihood or frequency of an incident, injury or condition occurring (based on the definition in the Prevention Institute’s [Glossary of Terms](http://www.preventioninstitute.org/glossary)). Prevention describes a range of approaches. For example, Public Health classifies prevention into two typologies. One focuses on the approaches and one focuses on the populations.

1. **Approaches**
   - **Primary prevention:** Approaches that aim to prevent violence before it occurs.
   - **Secondary prevention:** Approaches that focus on the more immediate responses to violence, such as prehospital care or emergency services or treatment for sexually transmitted infections following a rape.
   - **Tertiary prevention:** Approaches that focus on long-term care in the wake of violence, such as rehabilitation and reintegration, and attempt to lessen trauma or reduce long-term disability associated with violence.

2. **Population**
   - **Universal:** Focuses on all individuals in a population with the information and skills to prevent the problem. Universal prevention programs are delivered to large groups without any prior screening for risk status of the individual program recipients. The entire population is assumed to be at risk for violence.
   - **Selected:** Targets specific subgroups of the population that are believed to be at greater risk than others.
   - **Indicated:** Used for individuals who may or may not exhibit early signs of violence perpetration or victimization but exhibit the risk factors. From [www.cdc.gov/violenceprevention](http://www.cdc.gov/violenceprevention) and the World Report on Violence and Health (WHO).
**Protective factors.**

- Buffer young people from the risks of becoming violent.
- Conditions or attributes in individuals, families, communities, or the larger society that, when present, mitigate or eliminate risk in families and communities.

**Risk factors.**

- “(T)hose characteristics, variables, or hazards that, if present for a given individual, make it more likely that this individual, rather than someone selected from the general population, will perpetrate or be a victim of violence.” ([Reducing Risks for Mental Disorders: Frontiers for Preventive Intervention Research Institute of Medicine (US) Committee on Prevention of Mental Disorders; Mrazek PJ, Haggerty RJ, editors. Washington (DC): National Academies Press (US); 1994: 127.])

- Those factors that increase the probability that a person will suffer harm. ([Youth Violence: A Report of the Surgeon General; Office of the Surgeon General (US); National Center for Injury Prevention and Control (US); National Institute of Mental Health (US); Center for Mental Health Services (US). Rockville (MD): Office of the Surgeon General (US); 2001.])

- Those characteristics associated with violence, but they may or may not be direct causes.

**Safety.** The condition of being protected from or unlikely to cause danger, risk, or injury. For the purposes of this framework, our focus is not related to unintentional injury, but creating those places that reduces danger, risk, or violence.

**Social ecological model.** Violence prevention requires understanding the factors that influence it. A four-level social ecological model is used to better understand violence and the effect of potential prevention strategies. This model takes into consideration the complex interplay between individual, relationship, community, and societal factors.

Prevention strategies are necessary at all levels of the social-ecological model. A multi-level approach to violence prevention is more likely to lead to reductions in violence over time than an approach that targets only one level of the model.

**Thriving.** A condition beyond mere survival, embracing growth and positive development. The term “thriving” encourages the understanding that youth play a critical role in neighborhoods and communities; beyond keeping youth safe and educated, we must nurture, support, and provide opportunities for all children and youth that facilitate their positive growth, development, and well-being at all ages.
Trauma. Individual trauma results from an event, series of events, or set of circumstances that an individual experiences as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being. (Retrieved from http://www.samhsa.gov/traumajustice/traumadefinition/definition.aspx.)

Violence. "(T)he intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation." As used in this document, violence includes exposure to violence, which can be direct, where the victim or community of victims is the actual target of the intentional use of force or power, or it can be indirect, where the victim or community of victims is witness to the intentional use of force or power or has lost a loved one to violence. This includes youth violence, child maltreatment (abuse or neglect), suicide, sexual violence, intimate partner violence, and commercial child sexual exploitation and trafficking (as a form of child abuse). (Adapted from Krug E. G. et al., eds. World report on violence and health. Geneva, World Health Organization, 2002.)

Youth violence refers to the constellation of harmful behaviors that can start early and continue into young adulthood. It includes violence experienced, perpetrated, or witnessed by a child or youth. Youth violence covers various behaviors, some of which—such as bullying, slapping, or hitting—can cause emotional harm as well as physical harm and others, such as robbery and assault (with or without weapons), that can lead to serious injury or even death. (Adapted from Krug E. G. et al., eds. World report on violence and health. Geneva, World Health Organization, 2002.)

Youth and family partnerships/engagement. Family engagement is an approach that empowers and involves families, based on their strengths, to have an active role in decisions about the services, supports, disposition, and/or treatment of their child(ren). Ideally, families are able to engage as full partners with all relevant child-serving systems in matters that affect their children. Effective family engagement is characterized by joint decisionmaking and services are child-centered, family focused, community-based, multi-system, collaborative, culturally competent & offered in the least restrictive/intrusive setting as possible.

Similarly youth engagement is an approach that empowers and involves youth, based on their strengths, to have an active, collaborative role in decisions that affect them. Youth engagement is a corollary to and associated factor in fostering prosocial, positive youth development.
Selected Resources *(in development)*

**Model Programs Guide** *(Office of Juvenile Justice and Delinquency Prevention).* The Model Programs Guide contains information about evidence-based juvenile justice and youth prevention, intervention, and reentry programs. It is a resource for practitioners and communities about what works, what is promising, and what does not work in juvenile justice, delinquency prevention, and child protection and safety.

**CrimeSolutions.gov** *(Office of Justice Programs).* The Office of Justice Programs’ CrimeSolutions.gov uses rigorous research to inform practitioners and policy makers about what works in criminal justice, juvenile justice, and crime victim services.

**Youth.gov.** The Interagency Working Group on Youth Programs, which is composed of representatives from 18 federal agencies that support programs and services focusing on youth, created this site. It provides interactive tools and other resources to help youth-serving organizations and community partnerships plan, implement, and participate in effective programs for youth.

**PROMOTE PREVENT.** For 11 years, PromotePrevent (part of the Education Development Center) supported nearly 300 communities that were awarded the federally funded *Safe Schools/Healthy Students (SS/HS)* grant—an initiative that helps promote safe and healthy schools and communities. It also provided technical assistance to SAMHSA’s *Project LAUNCH* state and local grantees who seek to promote the wellness of young children—from birth to age 8. By focusing on systems that serve young children, the goal of Project LAUNCH is to help all children reach physical, social, emotional, behavior, and cognitive milestones.

**UNITY Roadmap.** This resource helps cities map out solutions to effectively and sustainably prevent violence. The *UNITY RoadMap:* (1) helps cities understand the current status of their efforts (starting point), (2) describes the core elements necessary to prevent violence before it occurs (milestones), and (3) provides information, resources, and examples to support cities in planning, implementation, and evaluation. As a framework, the *UNITY RoadMap* is most effective when tailored to the needs of a particular city.

**VetoViolence portal** *(CDC’s Division of Violence Prevention).* The Centers for Disease Control and Prevention developed this site to provide grantees and partners with access to training and tools that focus on the primary prevention of violence. The portal includes free training, program planning resources, and an on-line application for the creation of success stories.

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