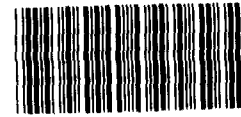


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REDUCING YOUTH VIOLENCE

Coordinated Federal Efforts and Early Intervention Strategies Could Help

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SUMMARY

Extent of the Problem

Violence committed by youth is a serious and growing problem in the United States. The youth arrest rate for murder, manslaughter, forcible rape, robbery, and aggravated assault increased 16 percent between 1989 and 1990. Youth violence is often turned against the young, is a more serious problem in the minority community, and increases in lethality with the use of firearms. The costs to society are high--over \$1.7 billion annually just to house incarcerated youth.

Risk Factors

While there is no single factor to predict which children are more likely to become violent later, many violent adolescents tend to have similar characteristics, including (1) coming from families that are abusive, neglectful, and otherwise dysfunctional, with other family members engaged in criminal behavior, (2) having a propensity to lie, steal, fight, be truant, and be aggressive; (3) using alcohol and drugs; and (4) living in low-income areas having high rates of serious crime.

Type of Approach Required

Preventing youth violence in the long term requires a multifaceted approach that involves (1) reducing multiple risks, (2) reaching children of different ages, (3) providing both early prevention and treatment services, and (4) devising strategies based on individual communities' problems. Comprehensive prevention should start early, virtually from birth for high-risk families. We identified two promising prevention strategies--home visiting and providing school-based services--although others may also be helpful. When effective, programs that have used home visiting have had many positive outcomes, including reducing later arrest rates for serious crimes. Home visiting can also reduce associated risks, such as child abuse. Schools serve as a daily contact point for almost all children. Therefore, providing comprehensive social and health services through the schools may reduce violence by helping at-risk children with their problems.

Federal Prevention Efforts

The Department of Justice has statutory responsibility to lead federal delinquency and youth violence prevention efforts, but most funding to prevent youth crime is controlled by other departments. Programs to prevent delinquency are funded by 17 agencies within 7 federal departments and an independent agency. These agencies identified 260 programs with approximately \$4.2 billion in spending to serve delinquent and at-risk youth. Most of this funding is for job training and vocational education, with little funding directly targeted to preventing youth violence.

Conclusions

1. Decreasing youth violence will require a multifaceted, coordinated set of strategies.
2. Early intervention is a critical first step.

Mr. Chairman and Members of the Committee:

I am pleased to be here today to discuss efforts to prevent the growing problem of youth violence. Just as there are no simple explanations for the causes of youth violence, there are no simple answers to reducing youth violence and its serious consequences.

My testimony today will cover three areas:

1. The scope of the problem and the characteristics of youth at risk of committing serious crime.
2. Two promising early prevention strategies that could reduce the risk of youth committing violent or delinquent acts.
3. Current federal funding to prevent youth delinquency and violence.

My comments are based on our report on home visiting as an early intervention strategy for at-risk families¹ and our ongoing work on preventing child abuse, providing school-based services, and integrating services for children. In addition, we interviewed cognizant federal officials and analyzed federal funding for programs serving at-risk and delinquent youth. We also briefly reviewed the literature on youth violence prevention and interviewed some experts in the field.

EXTENT OF THE PROBLEM

Youth violence is a serious and costly problem in the United States. The violence of the young is often turned on other young people, with sometimes tragic results.

Youth violence is an increasingly serious problem in this country. According to the Department of Justice, the arrest rate for youth under 18 for violent crime--murder, forcible rape, robbery, and aggravated assault--increased over 150 percent between 1965 and 1989. Between 1989 and 1990, the arrest rate increased 16 percent.

Young people are the most frequent victims of youth violence. Homicide is the second leading cause of death among young people aged 15-24 years, according to the Centers for Disease Control. Youths age 16-19 have the highest rates of victimization for rape, robbery, and assault and most are victims of their own age group.

¹Home Visiting: A Promising Early Intervention Strategy for At-Risk Families (GAO/HRD-90-83, July 1990). Home visiting is a strategy that delivers preventive health, social support, or educational services directly to families in their homes.

Youth violence is a particularly serious problem in minority communities. Homicide is the leading cause of death for blacks aged 15 to 24, about 6,000 deaths a year. Homicide rates among young Hispanic males and Native American males are 4 to 5 times higher than non-Hispanic white male rates.

Access to guns increases the lethality of violence. A 1990 analysis done by the Centers for Disease Control showed that, from 1984 through 1987, firearms-related homicides accounted for 80 percent of the deaths and 96 percent of the increase in the homicide rate for young black men aged 15 to 24.

Youth violence and delinquency is costly. The Department of Justice reported that holding youth in custody cost U.S. taxpayers \$1.7 billion in 1988, at an average annual per-resident cost of \$29,600--more expensive than paying tuition, room, and board to send a child to Harvard, Yale, or Princeton for a year.

Only a small percentage of youth are violent. The National Youth Study published earlier this year found that 7 percent of all youth accounted for 79 percent of all serious, violent offenses committed by youth.

CHARACTERISTICS OF CHILDREN AT RISK OF COMMITTING SERIOUS CRIME

Just as no single statistic gives a complete picture of youth violence, no single measure alone can predict which children are most likely to become violent adolescents. Research has shown, however, that children who later commit violent acts tend to have similar family, personal, and community characteristics.² Violent adolescents generally have multiple characteristics indicating their risk.

Family Risk Characteristics

Young people at risk of later violence are more likely to come from dysfunctional families. Such families are abusive and neglectful, with poor parenting practices, including overly harsh or overly lax and inconsistent discipline and expectations. Parents who use aggression to solve problems are more likely to produce violent adolescents. Delinquent youth are also more likely to come from families with other family members engaged in criminal behavior.

²For a comprehensive review of the literature on risks for later delinquency, see chapter 13 of U.S. Congress, Office of Technology Assessment, Adolescent Health--Volume II: Background and the Effectiveness of Selected Prevention and Treatment Services, OTA-H-466, Washington, D.C.: U.S. Government Printing Office, November 1991.

Personal Risk Characteristics

Adolescents who are likely to become violent often show early warning signs. As children or young adolescents, they are more likely to be aggressive, steal, lie, be truant, cause trouble in school, and fight. Research has shown a continuity between these childhood behaviors, identifiable in preschool and early grade school, and later criminal behavior. While this does not mean that every aggressive child will become a criminal, it does suggest that children who are aggressive and maladjusted at young ages may need help to prevent later violent behavior.

Learning problems or problems succeeding in school can also serve as an early warning sign. Children with Attention Deficit Hyperactivity Disorder,³ learning disabilities, low IQ scores, and poor school performance are also more likely to become delinquent.

As children grow older, associating with a delinquent peer group increases the risk of delinquency. Youthful offenders are more likely to use alcohol and illicit drugs. Alcohol and drug use may also lower inhibitions and thus encourage escalation of conflict into violence. Arrest rates show that males are much more likely to engage in violent behavior than females.

Community Risk Characteristics

Urban areas have a higher incidence of serious crime than suburban or rural areas. Prevalence rates for serious crime are also higher in low-income areas. Reviews of the relationship between the socioeconomic characteristics of a community and delinquent behavior indicate that adolescents from poor communities are more likely to exhibit antisocial behavior--especially more serious offenses. Youth from higher crime neighborhoods are more likely to become delinquent than youth from lower crime neighborhoods.

Neighborhoods with high rates of violence add to the risk for children who witness violence. Some researchers are becoming concerned that children who witness violence will experience serious stress and are more likely to engage in violent behavior later in life.

³A mental disorder lasting at least 6 months that is characterized by developmentally inappropriate degrees of inattention, impulsiveness, and hyperactivity. It is more common in males, with onset typically before age 4. Central nervous system abnormalities may be predisposing factors. Some impairment in ability to perform schoolwork and cooperate in group social activities is common.

REDUCING YOUTH VIOLENCE REQUIRES A COMPREHENSIVE, COORDINATED APPROACH

Just as no one risk factor inevitably leads to later violence, we believe there is no simple answer to decreasing youth violence and delinquency. Federal officials and experts concerned with this issue have stated that preventing youth violence in the long term requires a comprehensive, coordinated, and multifaceted approach. It should

- reduce multiple risks,
- reach children and youth of different ages,
- be sensitive to ethnic and cultural differences in communities' populations,
- provide both early prevention and different kinds of treatment, and
- deal with violence problems that may be different for different communities.

The history of initiatives to develop comprehensive and coordinated approaches to problems like youth violence suggests that such initiatives face numerous obstacles. The biggest obstacle at the local level can be the time and personnel commitment needed from local service providers that is necessary to build and sustain multi-agency cooperative efforts. In addition, the limited amount of federal support for localities in such areas as law enforcement and education may also create an obstacle.

Decreasing violence requires balancing early prevention efforts to reduce the risks of later violent acts with treatment for youth currently committing criminal or violent acts. It may also require communities to take action to root out violence. We have identified two promising early prevention strategies from our previous work on home visiting and our ongoing work on child abuse prevention and school-based service delivery--there may be others. We have not done enough work to evaluate effective treatment approaches or criminal sanctions, such as incarceration, to deter youth violence. Therefore, we are focusing our discussion today on prevention. However, we recognize the importance of treatment in an overall strategy.

Comprehensive Preventive Strategies Needed

To be effective, prevention strategies need to be comprehensive and to start early--virtually from or before birth for high-risk families. They need to address multiple risks for later violence. For example, a multiple-risk family may include a drug-using mother, caring for a child with school and social problems. Having

a comprehensive strategy starts with the view that there are multiple influences on a child or family, stemming from relationships both within and outside the family. The problems that a child or family face should not be treated in isolation. As a result, promising preventive strategies we have identified often used trained individuals to either arrange for or provide comprehensive services to deal with the range of problems at-risk children and their families face. Both of the strategies we identified attempt to reduce children's risks resulting from poorer health, education, and development.

Using Home Visiting to Deliver Early Intervention Services

Home visiting is a common service delivery strategy for preschool-aged children and families. It delivers preventive health, social support, or educational services directly to families in their homes. Home visitors can provide coaching, counseling, or teaching services. They can meet weekly with parents in their homes to teach them how to teach their children and help them improve their parenting skills. Home visitors can also provide case management services that help link program participants to other services.

Home-visiting efforts often focus on families with multiple risks for poor child health and development. For example, Hawaii's Healthy Start program interviews new mothers in the hospital after delivery to identify the families at greatest risk of abusing or neglecting their children. Many risk factors used by Healthy Start to screen for potential child abuse are also factors used to predict violence. The Healthy Start program identifies as higher risk those parents who abuse alcohol or drugs or who have been involved in other criminal activity. Once higher risk families have been identified, they are offered a voluntary home-based program designed to teach positive parenting and improve child health and development.

Evaluations have shown that early interventions using home visiting can

- have multiple positive outcomes,
- reduce later delinquency and violent behavior, and
- reduce other risks associated with later violence.

For example, the High/Scope Perry Preschool in Ypsilanti, Michigan, provided both preschool and educationally focused home visiting to low-income black children and their families. A rigorous

evaluation⁴ of this project showed that by age 19, 51 percent of the children randomly assigned to a control group had been arrested, compared to 31 percent of Perry Preschool children. Perry Preschool graduates were also less likely to engage in violence as measured by arrests and self-reports. The Perry Preschool group had lower numbers of arrests for serious crime and their self-reported offense rates for violent behaviors were generally half that of the control group.

But this tells only part of the story. As you can see from figure 1, Perry resulted in many positive outcomes--better school achievement, fewer youth on welfare, and more going on to higher education or employment. As a result of the savings from reduced crime and welfare and increased employment, evaluators estimate that the program returned \$3 to \$6 for every \$1 invested in it.

The Syracuse University Family Development Research Program provided day care and home visiting to very poor, predominantly black families. Longitudinal research showed that only 6 percent of the program children, compared to 22 percent of the control children, had been processed as adolescent probation cases. In addition, control children committed much more serious delinquencies, including burglary, robbery, and physical and sexual assault. The average juvenile justice cost per child was \$186 for the preschool home-visiting group and \$1,985 for the control group.

Early intervention programs can reduce other risks, including child abuse, the percentage of children being retained in grade or needing special education, comparative levels of truancy, and aggressive and disruptive behavior in school. For example, the Prenatal/Early Infancy Project in Elmira, New York, found fewer cases of abuse among mothers most at risk for abusing their children who had received nurse home-visiting services, compared to similar mothers who had not. The Houston Parent-Child Development Center longitudinal evaluation showed that 5 to 8 years after families received services, their children were rated by teachers as significantly less disruptive and hostile in school than similar children who did not receive services.

Providing Comprehensive Services in Schools

School is an important setting for a violence-prevention strategy for older children. Schools serve as a contact point for almost all children, at least until they reach the age when many drop out. Virtually every community, regardless of wealth or location, has a public school. Providing services in schools increases access for

⁴J. Berrueta-Clement and others, Changed Lives: The Effects of the Perry Preschool Program on Youths Through Age 19, Monographs of the High/Scope Educational Research Foundation, Number 8, High/Scope Press, Ypsilanti, MI, 1984.

students, who may lack transportation to reach other services. These services, if appropriate and targeted correctly, may interrupt a cycle of behavior that would lead to crime. Teachers see children on a daily basis and may be among the first to recognize that a particular child needs help.

Providing comprehensive services in schools can help at-risk children with some of their problems. Services provided can be specific to preventing violence, such as teaching students nonviolent methods of resolving conflicts. Or they can deal with problems more generally, by providing mental health counseling, recreation, and employment assistance. While the school-based service models have not been extensively evaluated, some experts believe that keeping youths connected to the school is important in decreasing delinquency.

One example of a school used as a center for health and social services is Ensley High School in Birmingham, Alabama. Ensley's Extra Help Services Clinic provides a variety of health and social services. Students who wish to use the clinic fill out a confidential health history form. Besides documenting a student's current physical condition, the form can be used to determine whether the student is at risk of delinquent or violent behavior. The health history asks students about their home environment and their ability to talk with parents, and their personal and family drug and alcohol use. It also includes questions about a student's self-concept, aspirations, and use of violence as a way to handle problems.

The clinic provides physical exams and health screenings, individual and group counseling sessions, in-class education, and community services. Some class lessons focus on alternatives to violence and teach students techniques for defusing anger and managing stress. Staff also present sessions on setting and achieving goals and building self-esteem.

FEDERAL EFFORTS TO PREVENT JUVENILE DELINQUENCY AND VIOLENCE INVOLVE MANY AGENCIES

The Department of Justice has the statutory responsibility to lead federal delinquency and youth violence prevention efforts. The Juvenile Justice and Delinquency Prevention Act of 1974 created the Office of Juvenile Justice and Delinquency Prevention in order to lead federal efforts to prevent delinquency. The act also created the Coordinating Council on Juvenile Justice and Delinquency Prevention. The Council, headed by the Attorney General, is designated to coordinate all federal juvenile justice and delinquency prevention programs. It includes as statutory members 7 departments, which include 17 agencies, and an independent agency.

The Council recently identified over 260 federal programs in the statutory member agencies that serve the needs of delinquent or at-risk youth. Our analysis of the information provided by Justice showed that these programs spent approximately \$4.2 billion, in 1989, the most recent year data were collected.⁵ Most of this money supports services to reduce general risks youth face. In particular, vocational education and job training accounts for \$2.9 billion, or about 70 percent of the funding.

Programs targeted to treating delinquents or to directly preventing criminal acts accounted for \$760 million, or 18 percent of total federal funding (see figure 3). Seventy-five percent of this funding is provided by the Departments of Education and Health and Human Services (HHS). Justice's programs cost about \$75 million. Eighty-two percent of the \$760 million went to preventing, treating, or supporting law enforcement efforts to combat alcohol and drug abuse. Four large programs, administered by different departments, account for 63 percent of the \$760 million:

- Drug-Free Schools and Communities Program (Education),
- Public Housing Drug Elimination Program (HUD),
- Community Partnership Demonstration Program (HHS), and
- Office of Juvenile Justice and Delinquency Prevention Formula Grant Program (Justice).

Very little of the 760 million federal dollars directly targets youth violence prevention. As the bottom pie in figure 3 shows, our analysis found that 4 percent or \$28 million specifically targets violence. About half of this funding is for HHS's Youth Gang Prevention Program. Both Justice and HHS recognize youth violence as a serious problem. The Office of Juvenile Justice and Delinquency Prevention has had youth violence and gangs as priorities for discretionary grant funding for several years. However, their discretionary funding is quite limited. Preventing violence or its consequences appears as discretionary funding priorities in several agencies within HHS, but again, total funding is limited.

Coordinating Federal Efforts

The Coordinating Council does not have a strategic plan to address the problem of youth violence. Given the seriousness of the problem, the limited federal funding, and the many agencies

⁵These programs were identified generally for 1989, with fiscal year 1989 funding. Total delinquency prevention funding might be greater, since the Council's list does not include some other programs to reduce general risks, such as Head Start.

involved, we believe the Council should consider developing a set of coordinated strategies to focus federal efforts at preventing youth violence. One approach the Council can consider would build on current HHS efforts to set out a public health approach for decreasing youth violence. HHS has established a framework for reducing some consequences of youth violence through its health objectives for the nation. It is also developing a public health approach to reducing youth violence and its health consequences, with an initiative by the Centers for Disease Control and other agencies. The Council can also build on the wealth of knowledge within and outside the federal government on the causes and correlates of violence, and on what strategies have worked or not worked in the past.

SUMMARY

In summary:

- Youth violence is a serious and growing problem in our country. While affecting all youth, it is having a particularly severe effect on the health of minorities.
- Decreasing violence requires a comprehensive and multifaceted approach.
- Reducing youth violence will require both early prevention and treatment.
- Current research suggests that some early interventions can prevent later violence.
- Two early intervention service strategies--home visiting and basing services in schools--are promising ways to provide comprehensive services to help families, young children, and youth. Services provided can be designed to specifically reduce risks for later violence.
- Justice has the statutory responsibility to lead delinquency prevention efforts, but at least six other departments have delinquency prevention and treatment funding. HHS and Justice provide most of the funding to prevent violence, and this funding is administered through multiple agencies.
- The Coordinating Council on Juvenile Justice and Delinquency Prevention does not have a strategic plan to address youth violence.

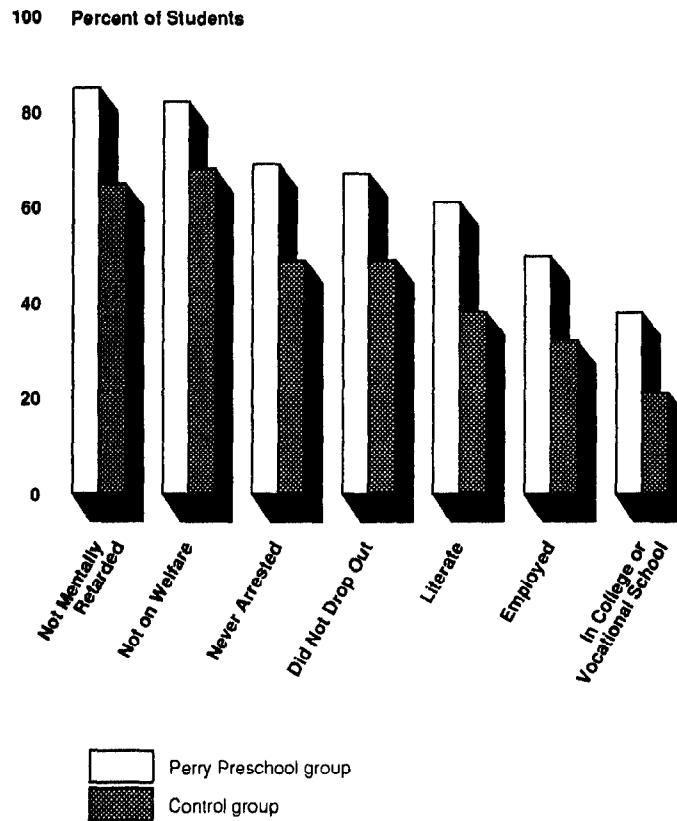
We have focused on early intervention today because we believe it has an important role to play in reducing future violence. However, youth violence represents a serious problem now. In addition to putting effort into early intervention, the federal

government, in partnership with state and local governments and foundations, needs to pursue other avenues to stop the current violence.

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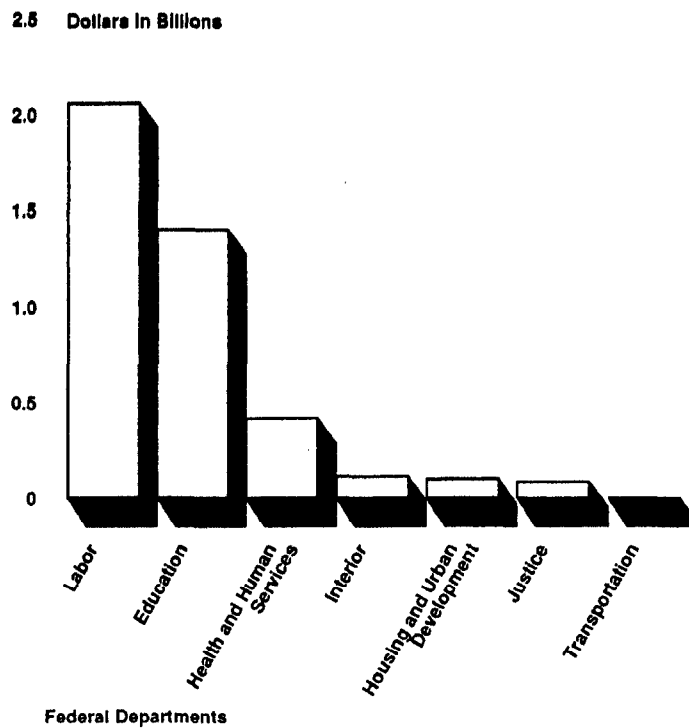
Mr. Chairman, this concludes my statement. I would be pleased to respond to any questions that you or other members of the Committee may have.

Figure 1: Perry Preschool Has Long Term Impact, Reduced Arrests



Results show comparative outcomes at age 19 for High/Scope Perry Preschool children compared to the randomly selected control group.

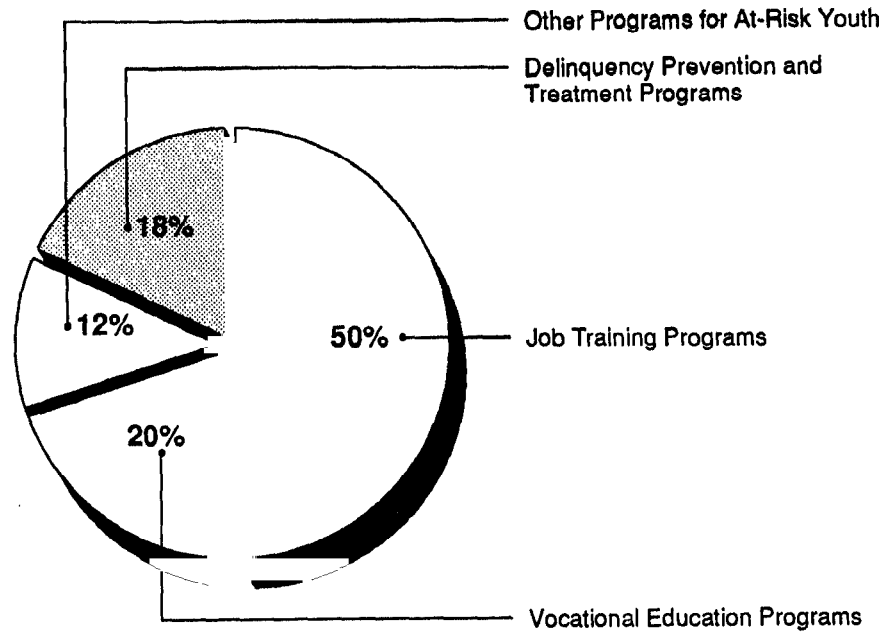
Figure 2: Seven Federal Departments Fund Programs to Serve Delinquent and Potentially Delinquent Youth



Total Funding = \$4.2 Billion (mostly Fiscal Year 1989)

Source: Federal Agency Delinquency Development Statements (in Draft)

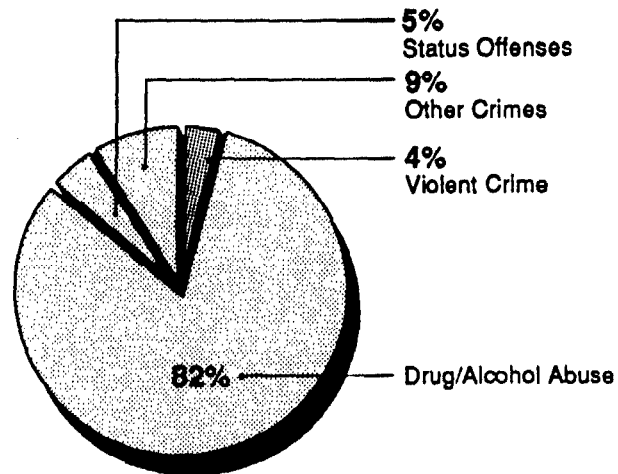
Figure 3: Few Programs Target Delinquent or Violent Youth



Total Funding = \$4.2 Billion (mostly FY 89)

Source: Federal Agency Delinquency Development Statements (in Draft)

Very Little Delinquency Funding Specifically Targets Violence



Total Funding = \$760 Million (mostly FY 89)

Source: Federal Agency Delinquency Development Statements (in Draft)

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