

THE UNITY URBAN AGENDA FOR PREVENTING VIOLENCE BEFORE IT OCCURS

BRINGING A MULTI-SECTOR PREVENTION APPROACH TO SCALE IN US CITIES

The UNITY Urban Agenda was endorsed by representatives from the following cities at a UNITY Strategy Convening in Washington DC on April 19, 2010: Boston, MA; Chicago, IL; Cleveland, OH; Detroit, MI; Louisville, KY; Minneapolis, MN; New Orleans, LA; Newark, NJ; Oakland, CA; San Diego, CA; Seattle, WA; St. Louis, MO; and Tucson, AZ. Through training, consultation, and information about the problem and solutions, UNITY*, supports US



cities in advancing more effective, sustainable efforts to prevent violence before it occurs so that urban youth can thrive in safe environments with supportive relationships and opportunities for success. The UNITY City Network is a growing consortium of US cities committed to advancing an ever stronger prevention approach to community violence. This document reflects their priorities for achieving success.

For more information, <http://preventioninstitute.org/initiatives/unity.html>.

Introduction

We know how to prevent violence. There is a strong and growing evidence base, grounded in research and practitioner and community wisdom, of how to prevent violence. We know how to reduce shootings and killings within months, and we know what needs to be in place to reduce the likelihood of violence in the long-term. Yet, US cities are grappling with violence, and as a nation we haven't made the necessary investments and commitment to substantially prevent violence *in the first place*.

The complexity of violence beckons for a multi-sector approach – e.g. education; health and human services, including public health, substance abuse and mental health, and children and families; criminal justice; early childhood development; and labor – that is reflected in approaches at the national, state, and local levels. Indeed, in a national assessment of large cities and youth violence prevention, cities with more coordination and communication across multiple sectors have lower violence rates.¹ An investment in a multi-sector prevention approach can significantly reduce violence that affects young people in US urban centers. We need to abide by the fact that violence is preventable and that we need leadership, strategy, multi-sector collaboration, and significant investment, all in the name of saying, **The violence stops now.**

Violence is Preventable

- Minneapolis has documented a 40% drop in juvenile crime in focus neighborhoods in 2 years since implementing its 4 point, public health based Violence Prevention Blueprint for Action.
- San Diego documented a 17% decrease in gang related violence in 2009 compared to 2008 and a drop in gang related homicides from 21 to 9. The key was combining aggressive police efforts with prevention and intervention efforts such as extending Friday hours at three recreation centers, employing 3,000 youth through the Hire A Youth Summer program, and twice monthly community collaborative curfew sweeps in specific areas.
- Oakland's City-County Neighborhood Initiative engages residents from Sobrante Park in community-strengthening efforts such as neighbor-to-neighbor bartering and youth economic development programs. Evaluation data from 2007 shows a more than 40% reduction in Sobrante Park's violent crime since the initiative began in 2004, even while overall rates of violent crime in Oakland increased.
- The CeaseFire Chicago model has demonstrated 41-73% drops in shootings and killings and 100% drops in retaliation murders.
- Schools can reduce violence by 15% in as little as 6 months through universal school-based violence prevention efforts.
- The High/Scope Perry Preschool Program, a high-quality pre-school program for low income African American three- and four-year-olds, demonstrated that by age 40, participants had significantly fewer arrests for violent crime, drug felonies, and violent misdemeanors and served significantly fewer months in prison than non-participants. A cost-benefit analysis shows a return of \$16.14 per dollar invested. Of the public return, 88% (\$171,473 in 2000 dollars) came from crime savings.

(See Appendix A for citations)

* **UNITY [Urban Networks to Increase Thriving Youth]** is a cooperative agreement (Award No. 5 US4 CE924970-04 to Prevention Institute) funded by the US Centers for Disease Control and Prevention (CDC), and is part of CDC's national youth violence prevention initiative, *Striving to Reduce Youth Violence Everywhere (STRYVE)*. UNITY is also funded in part by a grant from The California Wellness Foundation (TCWF). Created in 1992 as an independent, private foundation, TCWF's mission is to improve the health of the people of California by making grants for health promotion, wellness, education, and disease prevention programs. The information presented here does not necessarily reflect the official position or policies of UNITY's funders.

Violence exacts a terrible burden on young people, families, neighborhoods, and cities. Young people around the country are severely impacted by violence and those who live in urban areas are disproportionately affected. For example, according to the 2007 Youth Risk Behavior Surveillance System, among students in urban schools, the median percentage of students who bring weapons to school is 16.3% across cities; the median percentage of students threatened or injured by weapons on school property is 9.1%; the median percentage of students who have been in a physical fight is 33.6%; and the median percentage of students who do not feel safe enough to go school is 9.1%.² Further, homicide is the second leading cause of death among youth between the ages of 10 and 24³ and for each such homicide there are approximately 1,000 nonfatal violent assaults.⁴ Among 10-24 year olds, it is the leading cause of death for African Americans, the second leading cause of death for Hispanics, and the third leading cause of death for American Indians, Alaska Natives, and Asian/Pacific Islanders.⁵ The consequences of violence for victims and those exposed are severe, including serious physical injuries, post traumatic stress disorder, depression, anxiety, substance abuse, and other longer term health problems associated with the bio-psycho-social effects of such exposure.⁶ Further, violence and the resulting trauma is linked long-term to the onset of chronic diseases,⁷ the most costly portion of unsustainable health care costs for individuals, businesses, and government.⁸ *(See Appendix B for linkages between violence and chronic diseases.)*

We know in Newark and in cities all across America that there are families that don't let their children play because there's no safe places to play, no green spaces to play. They want to keep their kids in the house for the basic human need of security.

Mayor Cory Booker
April 1, 2010 Press Conference

Violence affects where we live, where businesses open and thrive, and whether or not young people feel safe enough to go to school. It shapes the nature of community experience. Further, violence is extremely costly – in the form of criminal justice and medical costs and disinvestment in urban centers. Violence inhibits economic recovery and growth in cities around the country.⁹ Urban violence affects communities by increasing the cost of health care, reducing productivity, decreasing property values, disrupting social services¹⁰, and can deter tourism, business relocation, and other investments.

An investment in preventing violence will pay off. For years the evidence base has been growing and the number of people working to prevent violence has been multiplying. But too much has been in starts and stops and woefully under-resourced. It's time to support cities in putting effective strategies into place at a scale at which they can make a big impact, *and* to build the skills of people on the ground and in service institutions that can help inform and sustain an effective prevention approach in urban areas. Such an investment won't only reduce violence, but also yield other important outcomes. For example, research shows that reducing violence is the single most effective way to stimulate economic development in affected communities.^{11,12} The economic benefits of reducing urban violence include saving unnecessary criminal justice and medical costs, reducing costs of treating injury and trauma among first responders—individuals who bear daily witness to violent outcomes; the return of businesses to neighborhoods, and the provision of direct jobs provided by the intervention itself. Further, multi-sector collaboration promotes efficiencies within local, state, and federal agencies, reducing duplication of efforts, leveraging existing resources, and allowing for the alignment of resources.

Leaders are calling for action

- Mayors, police chiefs, school superintendents and public health directors have stated that violence is a serious issue and responses are inadequate.
- The US Conference of Mayors declared youth violence to be a public health crisis. They called for cities to work with a broad range of stakeholders to develop a sustained multi-faceted approach focused on *prevention* and for the federal government to support investments in youth development throughout US cities.
- Enforcement, suppression, and intervention efforts alone do not address the underlying reasons for violence and therefore cannot prevent violence before it occurs. Police chiefs and other enforcement leaders are increasingly saying, **we cannot arrest our way out of this problem.**

The UNITY Urban Agenda complements and informs CDC's national youth violence prevention initiative, Striving To Reduce Youth Violence Everywhere (STRYVE), which encourages all communities to implement youth violence prevention action that is comprehensive and multi-sector, guided by a public health approach, and based upon the best available evidence.¹³ Furthermore, the UNITY Urban Agenda recommendations build on existing investments, such as the American Reinvestment and Recovery Act, US Department of Justice funding, and health and wellness investments in health reform, among others. These recommendations can increase the effectiveness of those investments. In some cases implementing them with an eye to reducing violence and in other cases realigning existing dollars to effective prevention will all help to improve safety and health in urban communities. This is critical not only for urban health and safety but also for economic recovery and productivity.

A recipe for success. The following investments together support the conditions for economic recovery within impoverished neighborhoods and US cities most impacted by violence; create positive environments for learning; and foster skills and development for young people in civic engagement and responsibility. Together, they would create a youth-oriented community system of support in urban settings. They are:

There needs to be an investment at the national level that shows a commitment to and investment in violence prevention. The issue needs to be elevated and receive a response similar to H1N1 or the First Lady's attention to obesity.
- UNITY City Network Member

1. Invest in cities to develop, implement, coordinate and evaluate effective and sustainable approaches to preventing community and gang violence, with attention to city and neighborhood level strategies designed to have the greatest impact, grounded in research and informed by community.
2. Support local planning and implementation through training and capacity building; a national communications campaign; and data, research, and evaluation.
3. Enhance state and national multi-sector infrastructure in support of local, urban efforts; specifically: create a high-level focal point for the prevention of violence in federal and state governments; create a mechanism for multi-sector collaboration in federal and state governments; and enhance public health's capacity and infrastructure at the federal, state, and local levels to address the ongoing public health crisis of violence.

A Call to Action. Historically, violence rates increase in an economic downturn, resulting in greater unnecessary after-the-fact expenditures, further draining local and state budgets around the country. Investing strategically in prevention can slow down and/or reverse this otherwise predictable trend. Violence is "development in reverse" and it's time to go into forward gear. This is a critical time to invest in multi-sector urban efforts to prevent violence, complementing existing efforts in intervention and suppression/enforcement.

We really need to do this now. With the state of the US economy, violence will get worse. With our high unemployment rates, many unemployed parents are at home with their kids. When jobs come back, young people will need a supervised place to go, and we've had to cut everything.
- UNITY City Network Member

UNITY Urban Agenda Principles

◆ Local ◆ Prevention ◆ Strategy ◆ Multi-sector ◆ Impact ◆ Culture ◆ Sustainability ◆

- ◆ **LOCAL** Solutions cannot be top-down. While it is critical that local efforts have support, it is vital that solutions are locally driven. Cities need to develop their own plans, based on their own needs, and community members, including youth, in highly impacted neighborhoods need to be an integral part of the solution. Community members, including youth, must be engaged in every facet including setting priorities and shaping solutions.

Cities need flexibility to be able to respond to our own needs. We need to be fluid and dynamic and utilize our understanding of our communities.
-UNITY City Network Member

◆ **PREVENTION** Intervention and suppression/enforcement are necessary but not sufficient. Cities need a full continuum spanning a prevention-intervention-suppression/enforcement continuum. Since prevention is too often woefully under resourced and often trivialized or misunderstood, the *UNITY Urban Agenda* emphasizes the prevention end of the continuum in support of effectiveness and sustainability. Prevention includes universal prevention before violence has occurred as well as reducing the impact of risk factors of violence and reducing the reoccurrence of violence.

Prevention means addressing the factors that contribute to violence in the first place, such as the following contributors to gang violence:

- lack of social opportunities,
- the degree of social disorganization present in a community,
- poverty,
- institutional racism,
- deficiencies in social policies, and
- a lack of or misdirected social controls.

◆ **STRATEGY** There is no single program or set of stand alone programs that will prevent violence. Cities need to have a strategy in place that clarifies priorities (programs, practices, and policies), roles, and how to have an impact as well as aligns existing efforts toward common goals.

◆ **MULTI-SECTOR** There is no single sector that can solve the problem of violence. Coming together and owning the solutions across multiple sectors -- education; health and human services, including public health, substance abuse and mental health, and children and families; criminal justice; early childhood development; and labor – is key. Multi-sector approaches should be reflected at the national, state, and local levels.

We need coordination to address the underlying issues. This is a sustainable and cost-effective approach.

-UNITY City Network Member

◆ **IMPACT** Young people around the country are severely impacted by violence and those who live in urban areas are disproportionately affected. Further, cities are bearing a disproportionate burden of cost because of violence. Therefore, resources should be directed to urban areas in order to prevent violence and cities should prioritize efforts in neighborhoods most impacted by violence and among youth and their families who are at the greatest risk of violence.

We need to focus on populations with the highest rates. This is an equity issue.
-UNITY City Network Member

◆ **CULTURE** Urban initiatives to prevent violence must meet young people, their families, and their communities where they are and take into account their culture and values. All strategies should be culturally relevant, appropriate, and competent in order to be useful for the young people and neighborhoods in the greatest need.

◆ **SUSTAINABILITY** Preventing violence requires a long-term commitment. While many strategies – community building, policy change, staff training— are all opportunities for achieving impact that outlasts a particular funding stream, it’s also critical to understand effective prevention as a long-term effort that requires sustained commitment, including resource commitment. We can expect that investments in prevention will result in lower rates of violence; success should not be a signal to disinvest from urban efforts to prevent violence, as there is a need for sustained multi-sector prevention efforts, just as enforcement/suppression is continuously supported.

Sustainability is really key. When we are successful, there is a risk that we will lose our resources, but we really need continued support so we can maintain the success.

-UNITY City Network Member

OVERVIEW: Investments to Significantly Reduce Violence in US Cities[†]

1. **Invest in cities to develop, implement, coordinate and evaluate effective and sustainable approaches to preventing community and gang violence, with attention to city and neighborhood level strategies designed to have the greatest impact, grounded in research and informed by community.** In a national assessment of cities and youth violence prevention, cities with the greatest coordinated approach also had the lowest rates of youth violence.¹⁴ To maximize success, local planning and implementation should be characterized by:
 - a. Strategic plan
 - b. Multi-sector, multi-jurisdictional collaboration
 - c. Community engagement
 - d. High-level, local leadership
 - e. Local data and evaluation
 - f. Programming, practices and policies. The following essential components of the plan are grounded in the evidence-base of prevention and are designed as a set of strategies that can work together to significantly reduce violence and shift norms:
 - i. Street outreach and interruption strategies in highly impacted neighborhoods.
 - ii. Universal, school-based violence prevention (including bullying prevention) in all schools.
 - iii. Treat mental health problems and substance abuse and enhance youth protective factors to promote mental health and prevent substance abuse.
 - iv. Reduce young children's exposure to violence in homes and communities in neighborhoods highly impacted by violence and reduce family violence.
 - v. Community building in highly impacted neighborhoods.
 - vi. Additional strategies prioritized locally: positive early care and education; positive social and emotional development; parenting skills; quality after-school and out of school programming; youth leadership; conflict resolution; social connections in neighborhoods; economic development, including youth employment; mentoring; family support services; and successful reentry.
2. **Support local planning and implementation.** Organizing assistance and support at the national level can help standardize high-quality services and leverage the use of resources. For example, a comprehensive training program can be developed for people around the country and a national communications strategy can reinforce the message that violence *is* preventable. Specific support for local planning and implementation includes:
 - A. Training and capacity building for practitioners, service providers, program and agency directors and elected officials to prevent violence.
 - B. National communications campaign to help build and sustain prevention efforts.
 - C. National data, research and evaluation.
3. **Enhance state and national multi-sector infrastructure in support of local, urban efforts.** While local, urban efforts are being bolstered to prevent violence, it's critical that national and state infrastructures be strengthened or developed in the following ways to better support and sustain local efforts needed to prevent violence before it occurs:
 - A. Create a high-level focal point for the prevention of violence in federal and state governments.
 - B. Establish a mechanism for multi-sector collaboration in federal and state governments.
 - C. Enhance public health's capacity and infrastructure at the federal, state, and local levels to address the ongoing public health crisis of violence.

[†] *The Urban Agenda is visually represented in the Logic Model in Appendix D*

Investments to Significantly Reduce Violence in US Cities

1. Invest in cities to develop, implement, coordinate and evaluate effective and sustainable approaches to preventing community and gang violence, with attention to city and neighborhood level strategies designed to have the greatest impact, grounded in research and informed by community.

In a national assessment of large cities, youth violence was reported to be a serious issue for cities, yet responses to the problem were not perceived as highly effective or adequate. Most cities cited a lack of a comprehensive strategy and few reported using primary prevention to stop violence before it occurs. Significantly, cities with the greatest coordinated approach also had the lowest rates of youth violence.¹⁵ (See Appendix C for an overview of findings.) In too many places, fragmented, uncoordinated efforts mean that precious resources may not be maximized or address the most pressing needs. Because addressing the causes of violence span many sectors and solutions require not only those sectors but also the communities most impacted, cities need strategic plans and coordinated efforts for greater success. Too many cities are negatively affected by reputations of high violence, resulting in reduced tourism and the inability to recruit business, industry, and jobs. As cities become more effective in reducing violence, they will need to allocate fewer resources toward addressing the long-term consequences of violence (e.g. enforcement/suppression, criminal justice) and foster conditions that enhance economic growth.

The power of prevention comes from the power of collaboration.
-UNITY City Network Member

Local planning and implementation should be supported to enable cities to bring their prevention efforts to scale. To maximize success in reducing violence, local planning and implementation should be characterized by the following elements:[‡]

- a. **Strategic plan:** Participating cities will develop, update and implement a multi-sector, citywide strategic plan to prevent violence that emphasizes neighborhood-based approaches in neighborhoods most impacted by violence. Each plan should be based on local needs and priorities and include attention to aligning existing resources toward a common goal.
- b. **Multi-sector, multi-jurisdictional collaboration:** With representation from justice, health (e.g. public health, substance abuse and mental health), education and others (e.g. workforce development, social services, parks and recreation, early childhood development, etc.), an multi-sector collaborative should be engaged in the planning and implementation of a strategic plan for the city and these efforts should be staffed. No one person, group, organization, department or agency

We know violence is preventable. We reached out following a tragedy. Now we have multi-jurisdictional coordination, and it is working.
-UNITY City Network Member

Urban Leadership-Urban Commitment: Boston
The Violence Intervention & Prevention (VIP) Initiative started in four neighborhood and has expanded to five. The Initiative includes four goals: Community organizing, Health, promoting out of school time for middle school students, and the Built Environment. Boston has been successful in accessing criminal justice streams of stimulus dollars for a public health approach to preventing violence. Through new funding, the City has increased training and capacity building for the VIP community coalitions and the VIP neighborhood initiatives in order to strengthen the violence prevention efforts.

[‡] The UNITY RoadMap, developed in partnership with cities, delineates key elements to support effective, sustainable efforts to prevent violence and informs the elements laid out here. (see Appendix E for a list of the UNITY City Network and Appendix F for an overview of the UNITY RoadMap)

has the responsibility – or ability – for preventing violence. In fact, violence prevention requires multiple private, public, and community players coming together in a strategic and coordinated way. An interdisciplinary collaboration can be organized as a coalition, committee, network or other form of public/private partnership, which serves as the central coordinating body. Further, dedicated staffing, situated at the city government level, can coordinate activities and communication between multiple sectors and the community, staff a coalition, implement activities, and help ensure accountability.

Urban Leadership-Urban Commitment: San Diego

The City of San Diego Commission on Gang Prevention & Intervention includes representatives from the mayor's office, former gang members, law enforcement, local foundations, advocates, public health, schools, and criminal justice. In response to requests for more information about what works, the Commission's website has a section devoted to resources and tips on preventing violence. The Commission supports the Workforce Partnership's *Hire a Youth Initiative*; and supports the San Diego Police Department's collaborative curfew sweeps. During a "collaborative curfew sweep," local service providers and community volunteers from local churches are available on site to connect with families and offer diversion services if appropriate.

- c. **Community engagement:** Community members, particularly youth and adults from neighborhoods highly impacted by violence, should be engaged in planning and implementation of a strategic plan and collaborative efforts.

Community needs to be an integral part.
-UNITY City Network Member

Community-based organizations, community residents, including youth, grassroots activists, the faith community and local businesses all have a vital role to play in efforts to prevent violence. Their engagement, input, and leadership are critical in defining the problem and prioritizing and implementing strategies. It also helps ensure that planning, programming, and policies will meet their needs. Individuals and communities most impacted by violence can help transcend turf and other obstacles by advocating for and demanding attention be paid to preventing violence.¹⁶ Ensuring community engagement can help build the capacity of individuals, organizations, and communities to forge solutions for their community.¹⁷ Also, as city leaders move in and out of office, community investment and ownership can help to build and maintain political will with new leadership, transcending election cycles and institutionalize solutions.

- d. **Local, high-level leadership:** High-level leadership (such as from mayors and other elected officials, agency and department heads in general and police chiefs, public health directors, and superintendents in particular) is valuable. Leaders can 1) catalyze and lead policy change, 2) ensure that financial and staffing resources are directed to preventing violence, helping to ensure efficacy and long-term sustainability, and 3) engage broader support through eliciting multiple partnerships from the public and private sectors. Leaders can also

Urban Leadership-Urban Commitment: St. Louis

Mayor Slay has championed the prevention of violence by advocating education as a way out of poverty, supporting the improvement of public schools, and rallying around youth employment initiatives. The city has adopted the Ready by 21 approach to improve resilience for youth in their community. Focusing on coordination of existing resources has led to new multi-sector partnerships for the City including new or strengthened relationships with the Department of Health, the school system, law enforcement, Washington University School of Medicine, local philanthropists and other city agencies. The Court has opened a school for over 200 youth called Innovative Concept Academy. The school is supported through collaboration with members of the Mayor's Commission.

send a strong public message by declaring that violence is both unacceptable and preventable. Finally, high level leadership can successfully move forward a priority and engage and inspire others in that forward motion

- e. **Local data and evaluation:** All too often city leaders are not aware of how well their strategies to prevent violence are working because no systematic effort has been made to evaluate them. Local data collection and evaluation can: determine if the strategy is working as intended, determine if the strategy is meeting stated goals and objectives, measure the cost of efforts in relation to benefits, monitor progress and make needed improvements, inform the community about successes and challenges, and fulfill funding requirements.

Ongoing evaluation of the overall approach and of individual activities will provide the information needed to make adjustments as the strategies are implemented. The overarching goal of strategy evaluation is to determine the effectiveness of community collaborations in implementing strategies. Specifically, strategy evaluation focuses on how well the different sectors are working separately and together with others, and whether or not intended objectives are being met. Indicators to measure progress most often include changes in risk and resilience factors, community involvement and youth engagement and, most importantly, decreases in violence.¹⁸

- f. **Programming, practices and policies:** The following components of the plan are grounded in the evidence-base of prevention and are designed to work together to reduce violence and shift norms. Further, they reflect the expertise of multiple

This makes economic sense. We didn't use all new monies. This model engages multiple agencies; they all contribute to it and it requires multidisciplinary collaboration.
-UNITY City Network Member

sectors, including health and public health, education, mental health and substance abuse, and criminal justice and law enforcement, reinforcing the need for a coordinated, multi-sector approach. The priority strategies are:

- i. **Street outreach and interruption strategies in highly impacted neighborhoods:**

These initiatives reduce shootings and killings by detecting and interrupting conflict through the use of outreach workers. This intervention creates conditions in highly impacted neighborhoods that enable long-term prevention strategies to be put in place and foster economic recovery and sustainability. An investment in such efforts will not only reduce the immediate risk of death and injury but also contribute to local jobs while building community capacity to change norms about violence. Examples include: Chicago CeaseFire.

Urban Leadership-Urban Commitment: Seattle

The Office for Education is working with several other City of Seattle departments on the Seattle Youth Violence Prevention Initiative, a community-based, multi-agency strategy to address youth violence in Seattle. The City will invest approximately \$8 million during 2009 – 2010 to focus on youth, ages 12 – 17, who are at the highest risk of perpetuating or being victimized by violence. The Initiative's efforts will be coordinated through three neighborhood networks in Central, Southeast, and Southwest Seattle where indicators of future violent behaviors, such as discipline rates in schools, are the highest. Specifically, the Initiative will: Assist youth with repeat offenses to re-enter society from state or county detention programs; Provide alternatives for youth who are detained or arrested for crimes, but released because they don't meet the admission criteria for county detention; Help middle-school truants and students at risk of suspension stay in school and succeed; and Prevent victims of violence and associates from continuing the cycle of violence through retaliation. The goals of the Initiative are to achieve a 50% reduction in certain court referrals of juveniles and a 50% reduction in suspensions and expulsions from selected middle schools due to violence related incidents.

- ii. **Universal, school-based violence prevention (including bullying prevention) in all schools in highly impacted, urban neighborhoods:** Universal, school-based violence prevention has a proven track record in reducing violence – a meta analysis showed 15% reductions can be gained in as little as 6 months.¹⁹ Interventions can reduce violent and aggressive behavior, such as bullying, by cultivating interpersonal, social problem-solving, and conflict resolution skills in all young people, and fostering a positive school climate.²⁰ Examples include: The Olweus Bullying Prevention Program, The Incredible Years, and Second Step.
- iii. **Treat mental health problems and substance abuse and enhance youth protective factors to promote mental health and prevent substance abuse in neighborhoods highly impacted by violence:** As many as one-third of youth living in urban neighborhoods have PTSD, according to the country's top child trauma experts – nearly twice the rate reported for troops returning from war zones in Iraq.²¹ A 2001 report by the U.S. Surgeon General on youth violence argued that the prevalence of mental illness among violent youth is significantly higher than the prevalence of mental illness among non-violent youth.²² Untreated, mental health conditions can lead to lost productivity, unsuccessful relationships, significant distress and dysfunction and future violence.²³ At least 40%, and as many as 91%, of the approximately 1 million young people referred to the juvenile justice system have mental health conditions.²⁴ The most effective mental health services, on average, reduce the rate of subsequent offending by 46 percent.²⁵ There is also emerging research about the “protective factors, psychological strengths and a sense of resilience” among even the poorest youth that can be leveraged by the adults, parents and providers around them — even immediately — to prevent many mental and emotional issues before they arise. Cities can focus on supporting some of the external (vs. personal) elements a youth needs in order to have resilience when facing ongoing stress, traumatic incidents and violent situations. Nationwide, alcohol is the drug most closely associated with violent incidents; some researchers estimate that it is implicated in 50 - 66 percent of all homicides,²⁶ 20 - 36 percent of suicides,²⁷ and more than half of all cases of domestic violence.²⁸ Further, substance abusing caregivers are often unable to properly care for their children and support their healthy development. In many cases, stressors such as poverty, oppression, deteriorating

Urban Leadership-Urban Commitment: Louisville

The City has Youth Print - a comprehensive plan to prevent violence developed by local leaders and guiding local efforts. The City Department of Youth Development has coordinated a unique data sharing agreement with the Jefferson County school system. Local community based organizations are now able to access individual and aggregate data such as achievement, attendance, suspensions, which in turn allows organizations to determine the impact of implemented programs on educational indicators. Over 400 participants attended quarterly training series, “An Afternoon of Youth Development” in the last year. The trainings are offered for anyone in the community interested in learning more about youth development. In partnership with the Muhammad Ali Center, and “Advanced Youth Development Training” is also available for those who work with youth. The City is partnering with the University of Louisville to develop youth service curriculum that complements a monthly youth service worker training. GIS mapping of local areas is being used to inform project planning, raise awareness and make the case for an investment in prevention. The Health Department has also begun to overlay social determinants of health such as housing stock and education attainment to further illustrate the profound effect on community safety and wellness. The next goal is to use GIS mapping to show impacts of policy change.

communities and social networks, and untreated mental illness interact to exacerbate substance abuse. Substance abuse prevention must therefore address the underlying factors that influence people's relationship with drugs and alcohol, along with individual youth and caregiver needs. Examples include: Functional Family Therapy (FFT); Multidimensional Treatment Foster Care (MTFC); Multisystemic Cognitive Behavioral Therapy (CBT); community-based mental health services; and youth/young adults having connections with non-judgmental, interested adults in their lives (mentors, coaches, teachers, grandparents and other non-parental family); access to physical releases for stress – exercising, working out, playing basketball, playing with your kids, dancing at the club; connections to friends, siblings and peers who have a positive outlook; and a strong community safety net and support system.

- iv. **Reduce young children's exposure to violence in homes and communities in neighborhoods highly impacted by violence and reduce family violence:** Early trauma can harm the part of the brain responsible for impulse control, problem-solving, and empathy—elements that often play a role in violence. Neglect and a lack of positive nurturing can also harm brain development, resulting in underdevelopment of key neural pathways that affect the child's capacity to bond with and relate to other people.²⁹ Children who grow up with violence are at risk for pathological development. According to Dr. Bruce Perry, an expert on child and brain development, "Violence creates a pervasive sense of threat- an incubator of terror- for the developing child. The results are predictable."³⁰ Experiencing violence, stress, and other trauma at a young age results not only in developmental delays, but also forces a 're-wiring' of the brain. Survival skills are preferentially developed at the expense of learning and social skills.³¹ Survival skills include hypervigilance and disassociation, factors that often lead to increased aggression and violence.³² In addition, early aggressive behavior which is a learned through observation, imitation, and direct experience is the single best predictor of later aggression.³³ Examples include: The Nurse Family Partnership; The Infant-Family Resource Program; Safe Start/Safe from the Start, including multidisciplinary crisis response teams; and Triple P parenting program.

- v. **Community building in neighborhoods highly impacted by violence:** Community building engages multiple dimensions of the community to build the capacity of an entire system and all of its participants to operate as a community.³⁴ Through this process, the skills of community members are developed in a way that empowers, which enhances their ability to address current and future problems and enhances sustainability in outcomes. Elements of community building include empowering community residents in decision making and taking action, developing residential leadership, and initiating projects that involve people from the community. It can help counter a sense loss of community and the resultant social disorganization. Further, community building can

Urban Leadership-Urban Commitment: Oakland

The City's Measure Y: The Violence Prevention and Public Safety Act draws on funds from a parcel tax plus a parking surcharge on parking in commercial lots. Measure Y provides approximately \$19.9 million for public safety and violence prevention activities. Approximately a quarter of these funds support prevention programs and activities in the city, including youth outreach counselors, after-school and in-school programs for at-risk youth, domestic violence and child abuse counselors, and ex-offender and parolee employment training and wage incentives. The Alameda County Violence Prevention Initiative Work Plan, based on the Violence Prevention Blueprint, was recently unveiled. It delineates a timeline and action steps in alignment with the Mayor's "Model City" project and a public health approach. Alameda County's Re-entry Network is a cross discipline collaborative strengthening policy and organizational practices in support of the formerly incarcerated and their communities.

foster cross-cultural understanding as ties throughout the community are strengthened.

- vi. **Additional prevention strategies prioritized at the local level:** In addition to those strategies listed above, cities also need flexibility to select strategies that can meet their own specific needs. The following strategies, which can be prioritized at the local level, complement existing intervention and enforcement-suppression strategies and are important components in many successful urban efforts to prevent violence: quality early care and education; positive social and emotional development; parenting skills; quality after-school and out of school programming; youth leadership; conflict resolution; social connections in neighborhoods; economic development, including youth employment; mentoring; family support services; and successful reentry. *(Descriptions available in Appendix G).*

Urban Leadership-Urban Commitment: Tucson Mayor Bob Walkup is laying out a legacy plan—The Mayor’s Global Alliance for Community Wellness—which explicitly acknowledges the importance of focusing on long-term efforts that will reap benefits for the city long after the Mayor’s term. The priorities in his legacy initiative are safety, violence prevention, substance abuse prevention, physical health, and emotional health. As a UNITY City Network member, Tucson has developed a comprehensive violence prevention approach. Their Nonviolence Legacy Project offers a Training of Trainers in preventing violence. To compliment this effort, the Leadership Training Institute offers community engagement training through the Youth Empowerment Network.

2. Support local planning and implementation In order to maximize and support success at the local level, broader coordinated efforts should simultaneously be put in place. Organizing these at the national level can help standardize a high-quality of services and leverage the use of resources. For example, a comprehensive training program can be developed for people around the country and a national communications strategy can reinforce the notion that violence *is* preventable. Key components of support for local planning and implementation include:

- a. **Training and capacity building:** Practitioners, service providers, program and agency directors and elected officials need skills to prevent violence. These skills can be developed through multiple avenues including consultation and technical assistance, training, conferences, mentoring, internships, coaching, and reading or other self-paced learning opportunities. Cross-sector training can help build a common language and foster understanding about different roles. A key component of training is to help all sectors understand how their mandates and activities can contribute to preventing violence. Training should focus on both skill development and leadership development such as the Partnerships for Preventing Violence (PPV) model, an innovative six-part training series on the public health approach to preventing youth violence. Using a unique hybrid methodology that combined distance learning with local, face-to-face facilitation by trained experts, PPV trained over 13,000 people, generated youth violence prevention activities across the country, and created a national cadre of youth violence prevention leaders.³⁵ Training and capacity building, such as through consultation and technical assistance should be provided to all cities developing and implementing strategic prevention plans. Multi-disciplinary consultant teams could be assigned from federal agencies to assist locals in implementing and evaluating models for multi-sector coordination and scaling-up evidence based programs to fidelity.

Urban Leadership-Urban Commitment: Newark Mayor Booker has been vocal in his intentions to reduce violence in Newark. As part of his commitment to the issue he visits the home of every firearm victim and has begun the process of developing a comprehensive preventing violence plan. Currently the mayor’s office is working to pass a local resolution that will create a mandate for the plan.

b. Communications: A national campaign can help build and sustain prevention efforts. Informed by effective framing, successful communication via multiple channels such as the media, public officials, and others in the public sphere can convey positive messages about youth, build an understanding of effective violence prevention, make the case for prevention, and foster buy-in into strategies and priorities. A national

Urban Leadership-Urban Commitment: New Orleans

The New Orleans Department of Health has focused on coordinating existing efforts that address the roots of violence including jobs, recreation, afterschool and preschool. The Health Department is completing a community assessment in sample neighborhoods. The comprehensive assessment includes thirty five factors around community wellbeing and a sample size of 6,000 households. Line staff uses the Search Institute Developmental Assets Tool to screen young people who come into clinic or are seen of other reasons. Based on results of the screen, young people are connected with local resources.

communications strategy with consistent messages, talking points, op eds, etc., can support cities as they are striving to implement local strategies by reinforcing messages they are already using or providing resources that they can use locally. Further, a UNITY commissioned report, *Moving From Them to Us: Challenges in Reframing Violence Among Youth*, recommended that strategies foster cross-sector action on violence prevention; that news reporting on violence be transformed; and that effective ways to talk about race and government in the context of violence be developed.³⁶ These recommendations can be incorporated into a national communications strategy.

c. National data, research and evaluation: Establishing a national infrastructure to support effective research, surveillance of key risk and protective factors, and multi/cross-site evaluation would help inform what is most effective, how to best bring efforts to scale, which investments will have the greatest impact, etc, and continue to grow a national evidence-informed base to guide ongoing work. Further, national baseline measures could be established and these could help inform the development of national standards. The cost-benefit analysis of preventing violence can also be enhanced.

3. Enhance state and national multi-sector infrastructure in support of local, urban efforts. While local, urban efforts are being bolstered to prevent violence, it's critical that national and state infrastructures be developed to better support and sustain local efforts to prevent violence before it occurs. Key components of state and national multi-sector infrastructure include:

A. Create a high-level focal point for the prevention of violence in federal and state governments. Given that responsibility for preventing violence spans multiple agencies, having a high-level focal point could foster accountability and support better coordination. Examples of activities include: effective policy coordination, ensuring effective coordination at the national level across the multiple federal agencies that have a role in preventing violence; the ability to charge federal/state agencies with greater collaboration and coordination in support of local goals and efforts; establishing national goals for preventing

Urban Leadership-Urban Commitment: Minneapolis

Mayor Rybak regularly speaks publicly about the role of prevention in reducing crime. His leadership has kept the issue in focus for the community and local institutions. The Minneapolis Blueprint for Action recently earned an award from the National League of Cities. A Public Health Advisory Council helps determine priorities for the city in alignment with the Blueprint. Minneapolis has found that, "Public Health Coordination creates a broader umbrella that more agencies can get under" than most law enforcement models. Minneapolis has been able to quickly demonstrate results from their plan; using benchmarking, Minneapolis has experienced a sense of progress.

violence; institute a violence prevention screen/lens (akin to a health impact analysis) into agency decision making, grants, policies, etc.; and ensure a completely balanced continuum in a concerted effort to reduce violence that includes not only enforcement/suppression and intervention but also, equally, prevention.

B. Establish a mechanism for multi-sector collaboration in federal and state governments.

While the breadth of state and the federal government's involvement to address violence spans across multiple agencies and efforts, it is without the benefit of a level of intentional coordination that includes working with established and fledgling efforts at state and local levels. Similarly, this is true in many states. Establishing a mechanism for multi-sector collaboration could provide the vehicle to align federal funding initiatives, establish joint funding streams or blended/braided funding, coordinate data systems, share evaluation strategies, foster multidisciplinary training, and establish common reporting protocols for grantees.

Urban Leadership-Urban Commitment: Cleveland

The City is committed to education and jobs for young people. Their goals include: young people educated and in school, employable and connected to intervention and prevention. Trained youth outreach workers support City initiatives by connecting their peers to resources and being role models in the community. Mayor Jackson consistently speaks about a prevention approach to violence as "making sense" and makes the economic case for violence prevention. The mayor has led the way by organizing the police department and the public school system to come together to align resources. The City has also implemented "Operation Focus." This comprehensive approach to violent crime and open air drug markets is a version of the successful "Ceasefire" programs implemented in other cities, primarily Boston and Chicago. Community leaders, law enforcement and social service providers' team up to send a message to group member involved individuals identified by the school district, juvenile court, law enforcement and residents. The message is, "violence and open air drug markets will stop or there will be group based accountability and sanctions."

C. Enhance public health's capacity and infrastructure at the federal, state, and local levels to address the ongoing public health crisis of violence.

It is critical that a multi-sector approach to prevention include criminal justice, education, behavioral health, early childhood development, workforce investment/labor, and public health. As the discipline charged with protecting the public's health and safety and the discipline versed in prevention, it is critical that public health play an important role. Further, public health has a track record and proven methodology for changing behaviors that contribute to poor health outcomes, based on the science. Yet, in a national assessment of large cities, law enforcement and criminal justice were reported to be the most prevalent strategy used in cities and public health departments are not generally included in city strategies.³⁷ Further, there are no established funding streams within public health to support engagement in the issue. Nevertheless, because violence jeopardizes the health and safety of the public, preventing violence should be a key concern and priority of public health. Indeed, a survey of local health departments by the National Association of City and County Health Officials (NACCHO) revealed violence prevention as an emerging issue for health departments while also simultaneously highlighting that only one-quarter of those surveyed had the infrastructure to support efforts to prevent violence.³⁸ States and local public health departments need support in building infrastructure, capacity and systems to develop adequate data and surveillance systems; to support development of coordinated prevention planning, program implementation, and evaluation efforts in the most needed locales, such as through consultation teams; and in working with and across multiple sectors.

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Glossary of Terms

Community engagement: Meaningful and sustained involvement in every facet of community life of multiple players in the community including but not limited to: business, faith, community-based organizations, grassroots organizations, the media, and adults and youth who live in impacted neighborhoods.

Gang violence: An act of violence perpetrated by one or more members of a gang on behalf of the gang for any of a number of reasons that include turf, identification, previous insults, or an act of perceived lack of respect. Gang violence may be inflicted within, close to, or outside of the gang. Gang violence changes the look and feel of the community and fosters fear.

Multi-sector: The involvement of multiple public, private, and community partners. Public can include but is not limited to health, public health, mental health, social services, law enforcement, criminal justice, education, and labor. Private can include business, labor, and service organizations. Community can include community members, the faith community, community-based organizations, and grassroots organizations.

Multi-disciplinary: The representation of multiple fields of expertise brought by different sectors, such as health, education, social services, and justice.

Multi-jurisdictional: The involvement of entities that represent different areas of jurisdiction, such as neighborhood, city, county, regional, state, and national or jurisdictional areas under the responsibility of different sectors. For example, school districts, police beats, city boundaries, incorporated and unincorporated areas, etc.

Prevention: A systematic process that promotes healthy and safe environments and behaviors, thereby reducing the likelihood of an injury or illness occurring. Prevention includes universal prevention before violence has occurred as well as reducing the impact of risk factors of violence and reducing the reoccurrence of violence.

Primary prevention: Taking action before violence occurs.

Urban violence: Violence affecting urban areas and communities, including bullying, perceptions of safety, homicides, gang violence, and other forms of interpersonal violence.

Violence: The 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 or emotional harm, maldevelopment or deprivation. (World Health Organization)

Violence prevention: A comprehensive and multifaceted effort to address the complex and multiple risk factors associated with violence, including, but not limited to, poverty, unemployment, discrimination, substance abuse, educational failure, fragmented families, domestic abuse, internalized shame, and felt powerlessness. Efforts build on resilience in individuals, families and communities. Violence prevention efforts contribute to empowerment, educational and economic progress, and improved life management skills while fostering healthy communities in which people can grow in dignity and safety.

Youth violence: violence affecting young people age 10-24 – as perpetrators, victims, and witnesses— and their communities, including bullying, perceptions of safety, homicides, gang violence, and other forms of interpersonal violence.

Appendix A: Background Data

Young people, families, and communities in cities across the country are seriously impacted by violence

- Among students in urban schools, the median percentage of students who bring weapons to school is 16.3%; the median percentage of students threatened or injured by weapons is 9.1%; and the median percentage of students who do not feel safe enough to go school is 9.1%.³⁹ Children drop-out of school because of fear of violence.
- Nearly 700,000 young people ages 10 to 24 were treated in emergency departments for injuries sustained from assaults in 2008.⁴⁰
- Homicide is the second leading cause of death among youth between the ages of 10 and 24⁴¹ and for each such homicide; there are approximately 1,000 nonfatal violent assaults.⁴²
- The consequences of violence for victims and those exposed are severe, including serious physical injuries, post traumatic stress syndrome, depression, anxiety, substance abuse, and other longer term health problems associated with the bio-psycho-social effects of such exposure.⁴³
- 1 in 3 African American males and 1 in 6 Latino males will enter the criminal justice system if we don't take action.⁴⁴
- Children's IQ scores drop and serious pathological concentration disorders occur in children who witness violence.
- Many good teachers understandably avoid violent neighborhoods, and children drop-out of school because of fear of violence. The longer the killings go on, the longer families stay indoors; the longer they avoid school, work, and each other; and the longer businesses and investments stay away.

Violence is costly to individuals, families, communities, businesses, and government, and preventing violence can contribute to economic recovery and growth

- Medical and lost productivity costs associated with violence range from more than \$70 billion⁴⁵ to \$158 billion a year.⁴⁶ Criminal justice costs account for more. For example, criminal justice costs related to gang violence in Los Angeles County alone total \$1.15 billion annually.⁴⁷
- Violence increases the risk of chronic diseases⁴⁸ which account for a majority of pre-mature US deaths, lost productivity and the majority and fastest growing percentage of healthcare spending⁴⁹
- Violence inhibits economic recovery and growth in cities around the country.⁵⁰ Youth violence affects communities by increasing the cost of health care, reducing productivity, decreasing property values, disrupting social services,⁵¹ and can deter tourism, business relocation, and other investments.
- Existing violence is costing taxpayers an estimate \$100 billion/year in hospital, healthcare, and criminal justice costs, lower employment and inhibition of investments in the neighborhoods.⁵²

Violence is preventable

- Cities with more coordination, communication, and attention to preventing violence have achieved lower violence rates.^{53 54 55}
- The CeaseFire Chicago model has been replicated 16 times and has been validated by a 3 year U.S. Department of Justice study conducted by four universities, showing 41-73% drops in shootings and killings, and 100% drops in retaliation murders⁵⁶. The first year of impact regularly shows 25 - 45% drops in shootings and killings, and the return of businesses have been seen in these neighborhoods, as well as reported by others.⁵⁷
- Schools can reduce violence by 15% in as little as 6 months through universal school-based violence prevention efforts.⁵⁸

- The City of Minneapolis has documented a 40% drop in juvenile crime in focus neighborhoods in the 2 years since implementing its 4 point, public health based Violence Prevention Blueprint for Action.⁵⁹
- San Diego documented a 17% decrease in gang related violence in 2009 compared to 2008 and a drop in gang related homicides from 21 to 9. The key was combining aggressive police efforts with prevention and intervention efforts such as extending Friday hours at three recreation centers, employing 3,000 youth through the Hire A Youth Summer program, and twice monthly community collaborative curfew sweeps in specific areas.⁶⁰
- Oakland's City-County Neighborhood Initiative engages residents from Sobrante Park in community-strengthening efforts such as neighbor-to-neighbor bartering and youth economic development programs. Evaluation data from 2007 shows a more than 40% reduction in Sobrante Park's violent crime since the initiative began in 2004, even while overall rates of violent crime in Oakland increased.⁶¹
- The High/Scope Perry Preschool Program, which provided a high-quality pre-school program for low income African American three- and four-year- olds demonstrated that by age 40, participants had significantly fewer arrests for violent crime, drug felonies, and violent misdemeanors and served significantly fewer months in prison than non-participants. A cost-benefit analysis shows a return of \$16.14 per dollar invested. Of the public return, 88% (\$171,473 in 2000 dollars) came from crime savings; 4% from education savings, 7% from increased taxes due to higher earnings, and 1% from welfare savings. Male program participants saved the public 41% less in crime costs per person—a total of \$732,894 less over their lifetimes. Perry Preschool also showed a 20% increase in the number of students graduating from regular high schools.⁶²
- Violence is a learned behavior that can be unlearned or not learned at all; it is preventable.^{63 64 65}

Leaders are calling for action

- Mayors, police chiefs, school superintendents and public health directors have stated that violence is a serious issue and responses are inadequate⁶⁶
- The US Conference of Mayors declared youth violence to be a public health crisis. They called for cities to work with a broad range of stakeholders to develop a sustained multi-faceted approach focused on *prevention* and for the federal government to support investments in youth development throughout US cities.⁶⁷
- Enforcement, suppression, and intervention efforts alone do not address the underlying reasons violence occurs and therefore cannot prevent violence before it occurs. Police chiefs and other enforcement leaders are increasingly saying, *we can not arrest our way out of this problem.*

Appendix B: Links Between Violence and Other Health Issues

We know in Newark and in cities all across America that there are families that don't let their children play because there's no safe places to play, no green spaces to play. They want to keep their kids in the house for the basic human need of security.

-Mayor Cory Booker[§]

Violence and healthy eating/active living-related chronic diseases

There is a strong linkage between violence and healthy eating and active living.^{68,69,70,71,72,73,74,75,76,77} Based on interviews with community representatives (advocates and practitioners working in healthy eating and active living), a scan of peer-reviewed literature, and a series of strategy sessions with national strategic experts in both violence prevention and healthy eating and active living, Prevention Institute identified at least five linkages between violence and healthy eating and active living.⁷⁸

A) Violence and fear of violence affect individual behaviors related to healthy eating and active living

1. Violence and fear of violence cause people to be less physically active and spend less time outdoors.
2. Violence and fear of violence alter people's purchasing patterns, limiting access to healthy food.
3. Experiencing and witnessing violence decrease motivation and capability to eat healthfully and be active.

B) Violence and fear of violence diminish the community environment, reducing support for healthy eating and active living

4. Violence reduces social interactions that would otherwise contribute to community cohesion.
5. Violence acts as a barrier to investments in community resources and opportunities that support healthy eating and active living.

Violence and broader health outcomes: Adverse Childhood Experiences⁷⁹

Childhood abuse, neglect, and exposure to other traumatic stressors, termed *adverse childhood experiences* (ACE), are common. In a study, almost two-thirds of participants reported at least one ACE, and more than one in five reported three or more ACE. The short- and long-term outcomes of these childhood exposures include multiple health and social problems. Adverse childhood experiences contribute to stress during childhood and put individuals at higher risk for the following health problems:

- alcoholism and alcohol abuse
- chronic obstructive pulmonary disease (COPD)
- depression
- fetal death
- health-related quality of life
- illicit drug use
- ischemic heart disease (IHD)
- liver disease
- risk for intimate partner violence
- multiple sexual partners
- sexually transmitted diseases (STDs)
- smoking
- suicide attempts
- unintended pregnancies

In addition, adverse childhood experiences also strongly correlate with health-related behaviors and outcomes during childhood and adolescence including early initiation of smoking, sexual activity, and illicit drug use, adolescent pregnancies, and suicide attempts. Finally, as the number of ACE increases the number of co-occurring or "co-morbid" conditions increases.⁸⁰

[§] From an April 1, 2010 press conference by The First Lady, Senator Bill Frist, Mayor Cory Booker, and Dr. Jim Gavin announcing the co-chairs and board of the Partnership for Healthy America. The Foundation will serve as an independent, non-partisan entity to mobilize multiple disciplines and partners around the objectives of the "Let's Move" Campaign, a national initiative to engage both public and private sectors to help children become more active and eat healthier within a generation, so that children born today will reach adulthood at a healthy weight.

Appendix C: An Assessment of Youth Violence Prevention Activities in USA Cities: An Overview, June 2008

Research has shown that violence is a serious issue for cities. Despite the evidence little data have been collected reporting on cities' overall strategies, resources, and activities to address this problem. In an effort to inform urban efforts to reduce violence, UNITY conducted an assessment to establish baseline measurements of the magnitude of youth violence, the level of concern within the city and collaborative efforts to address and monitor the issue. The assessment was conducted by Southern California Injury Prevention Research Center (SCIPRC) at UCLA School of Public Health. The study included standardized interviews with Mayors, Police Chiefs, Health Department Directors and School Superintendents, or their designees in a representative sample of the largest cities, populations of 400,000 or more, across the U.S.

Major Findings

- Most cities cited a lack of a comprehensive strategy.
- Public Health Departments are not generally included in city strategies.
- Law enforcement and criminal justice are the most prevalent strategy used in the cities.
- Gang violence was identified as the major type of youth violence.
- Cities, for the most part, lack clearly developed outcomes, evaluations, or evaluation plans to measure and monitor their efforts.
- Cities with the greatest coordinated approach also had the lowest rates of youth violence.

Recommendations

For cities:

- Adopt a comprehensive approach to youth violence that includes an equitable distribution of prevention, intervention and suppression/enforcement.
- Establish greater collaboration between city entities and across jurisdictional borders to county and state entities.
- Develop and implement a city-wide plan with measurable objectives and an evaluation component.

For the nation:

- Create a national agenda to address youth violence in the largest cities developed and adopted by several national partners.
- Provide training for State and Local Public Health Departments about their role in violence prevention and also provide incentives and opportunities to participate in city-wide efforts.
- Provide cities with the opportunity to network and mentor each other in their efforts to reduce and prevent violence through UNITY.

For a complete version of the report, please link to:

<http://preventioninstitute.org/component/jlibrary/article/id-137/288.html>

Appendix D: UNITY Urban Agenda Logic Model

Recommendations	Elements of the UNITY Urban Agenda	Initial Outcomes	Intermediate Outcomes	Long-term Outcomes
<p>1. Invest in cities to develop, implement, coordinate and evaluate effective and sustainable approaches</p>		<p>Community inclusion in efforts; Mayors taking leadership stand on violence; Cities actively strategizing violence solutions; Coalitions forming / being reinvigorated; Broad-based groups engaged</p>	<p>Decrease in risk factors; Increase in resilience factors; Effective coalitions; Comprehensive prevention strategy; Prevention policies, practices and programs in place; Hope</p>	<p>Decreased school violence, gang violence, street violence, violence among youth, homicides, bullying, witnessing of violence and trauma; Improved mental health and educational outcomes</p>
<p>2. Support local planning & implementation</p>	<p>Data, research & evaluation (to inform local efforts)</p> <p>Training & technical assistance (to build skills & capacity in local efforts)</p> <p>Communications campaign (to build support for prevention & local efforts)</p>	<p>Increased capacity to prevent violence; Press coverage; Awareness of problem and solutions</p>	<p>Enhanced research basis to inform practice; more support for prevention; improved practice in cities; evaluation</p>	<p>Strong support for prevention; enhanced understanding of putting scalable efforts into action in cities</p>
<p>3. Enhance state and national multi-sector infrastructure in support of local, urban efforts</p>	<p>High-level focal point for prevention of violence in federal and state governments</p> <p>Multi-sector collaboration in federal and state governments</p> <p>Public health infrastructure development</p>	<p>High level focus point established; mechanism for federal multi-sector collaboration to support local efforts</p>	<p>Joint RFA's; blended funding streams; coordinated data efforts; prevention understood across multiple sectors</p>	<p>Prevention efforts institutionalized in support of effective, sustainable efforts; Public health infrastructure to support long-term success</p>

Appendix E: The *UNITY City Network*

Since its inception in 2006, the UNITY initiative has built support for effective, sustainable efforts to prevent violence before it occurs, so that urban youth can thrive in safe environments with supportive relationships and opportunities for success. UNITY promotes collaboration across the public and private sectors to maximize resources, ensure sustainability, and encourage effectiveness. To accomplish these outcomes, UNITY works intensively with a select group of the nation's largest cities through the UNITY City Network, as well as providing capacity building support more broadly for practitioners and decision makers across the country through trainings and consultation, advocacy, and tools/materials development.

UNITY City Network (as of April 2010)

The Network is multi-sector in nature with representatives from law enforcement, criminal justice, health and education among others.

Participating Cities (Mayors have signed MOUs agreeing to advance a prevention approach to violence, form multisector teams, and implement elements of the *UNITY RoadMap*)

- Boston, MA
- Cleveland, OH
- Louisville, KY
- Minneapolis, MN
- Oakland, CA
- San Diego, CA
- Seattle, WA
- St. Louis, MO
- Tucson, AZ

Affiliates (UNITY is working most closely with the health departments in these cities)

- Detroit, MI
- New Orleans, LA

Under consideration (These cities have MOU's undergoing a review process)

- Chicago, IL
- Newark, NJ
- Philadelphia, PA

Appendix F: The *UNITY RoadMap*, A framework for outcomes

The *UNITY RoadMap* is a framework for mapping out solutions to effectively and sustainably prevent violence. It was developed after the UNITY City Assessment --conducted with mayors, police chiefs, public health directors, and school superintendents-- revealed that although youth violence is a serious concern, cities generally characterize their responses as inadequate.⁸¹ The *RoadMap* builds on similar tools that have been effective for other challenging issues – similar in their complexity. In fact, many of the categories were drawn from the AIDS Program Efforts Index (API) developed by The POLICY project, USAID, and UNAIDS to measure the effort put into national HIV/AIDS programs throughout the world. Various components of the *UNITY RoadMap* have undergone a literature review and/or been informed by interviews with violence prevention practitioners and city representatives. The *UNITY RoadMap* has been reviewed by city representatives and refined accordingly.

The UNITY RoadMap highlights key components of an urban approach to effectively and sustainably prevent violence before it occurs. These elements are reflected in the UNITY Urban Agenda and in the work of members of the UNITY City Network. Organized by Partnerships, Prevention, and Strategy, there are nine *RoadMap* elements, each selected for its importance in affecting and sustaining efforts to prevent violence *before* it occurs.

WHO? Partnerships

- **HIGH-LEVEL LEADERSHIP:** The mayor and other local leaders insist that the violence stops, provide necessary supports and resources, and hold people accountable.
- **COLLABORATION & STAFFING:** There is a formal structure for multidisciplinary collaboration to coordinate priorities and actions across multiple jurisdictions and there is dedicated staffing in place to support collaboration and implement priorities.
- **COMMUNITY ENGAGEMENT:** Members of the community—youth and adults, communitybased organizations, the faith community, the business sector, and survivors—are actively engaged in setting priorities and ongoing activities.

WHAT? Prevention

- **PROGRAMS, ORGANIZATIONAL PRACTICES, & POLICIES:** There are effective and far-reaching efforts in place to prevent violence, particularly in highly-impacted neighborhoods.
- **TRAINING & CAPACITY BUILDING:** Participants, practitioners, and policy makers have the skills and capacities necessary to work across multiple disciplines and in partnership with community to implement effective prevention programs, policies, and practices.
- **COMMUNICATION:** The case has been made for preventing violence before it occurs and people are aware of what's being done to prevent it.

HOW? Strategy

- **STRATEGIC PLAN:** There is a plan in place that prioritizes prevention, is well-known, and informs priorities and actions for multiple departments, agencies, jurisdictions, and community groups.
- **DATA & EVALUATION:** Efforts are informed by data and continuously improved through ongoing evaluation.
- **FUNDING:** Adequate resources support collaboration and staffing; community engagement; the implementation of programs, policies, and practices; skills development and capacity building; communications; strategic planning; and data and evaluation.

For more information: <http://preventioninstitute.org/component/jlibrary/article/id-30/288.html>

Appendix G: Additional prevention strategies prioritized at the local level

The strategies below can be prioritized at the local level to complement the strategies described in more detail in the Urban Agenda: street outreach and interruption strategies in highly impacted neighborhoods; universal, school-based violence prevention (including bullying prevention) in all schools; treat mental health problems and substance abuse and enhance youth protective factors to promote mental health and prevent substance abuse; reduce young children's exposure to violence in homes and communities in neighborhoods highly impacted by violence and reduce family violence; and community building in highly impacted neighborhoods. These strategies, which are grounded in the evidence-based for prevention, can be implemented as part of a strategic, coordinated, multi-sector approach in cities.

a. *UPFRONT: Strategies everyone needs to be safe and thrive*

1. **Quality Early Care and Education:** Foster age-appropriate social, emotional, and cognitive skill development within the context of strong attachments and relationships.
2. **Positive Social and Emotional Development:** Support a process of growing self-awareness and self-regulation, often measured by an ability to pay attention, make transitions from one activity to another, control impulses, and cooperate with others.
3. **Parenting Skills:** Train parents and other caregivers on developmental milestones and culturally appropriate, effective parenting practices to support a nurturing, safe, structured environment.
4. **Quality After-School and Out-of-school Programming:** Provide safe and enriching activities with structure and supervision during non-school hours, including weekends.
5. **Youth Leadership:** Support and engage young people in decision making and give them age-appropriate authority.
6. **Conflict Resolution:** Enhance the skills of young people to resolve conflicts without violence and create proactive dispute resolution structures and support at the neighborhood level.
7. **Social Connections in Neighborhoods:** Strengthen ties (characterized by trust, concern for one another, willingness to take collective action for the community good, and increased social sanctions against violent behaviors) among neighbors and community members.
8. **Economic Development, including youth employment:** Improve economic conditions and viable noncriminal economic opportunities with training and support for communities, families, and youth most at risk for violence and foster youth employment skills and employment opportunities.

b. *IN THE THICK: Strategies to reduce the impact of risk factors*

1. **Mentoring:** Provide positive, supportive, non-judgmental role models who can form a strong and enduring bond with young people who are at risk.
2. **Family Support Services:** Provide integrated family services (e.g., therapy, case management, home visiting, income support, employment services and support) to families in need so that they are able to achieve self-sufficiency and foster nurturing and trusting relationships within the family.

c. *AFTERMATH: Strategies to prevent the reoccurrence of violence*

1. **Successful Reentry:** Support a successful transition from incarceration/detention to the community and reduce recidivism with services during incarceration (e.g., GED attainment, job training, substance abuse treatment, mental health services) and extend to post-release (e.g., housing assistance, job placement and support, education support, case management, income support, restorative justice, family support, substance abuse and mental health services, tattoo removal).

References and Notes

- ¹ Weiss, B. An Assessment of Youth Violence Prevention Activities in USA Cities. Southern California Injury Prevention Research Center, UCLA School of Public Health. June 2008.
- ² Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance System. Available at: <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>. Accessed on April 8, 2010.
- ³ Web-based Injury Statistics Query and Reporting System (WISQARS). National Center for Injury Prevention and Control Web site. Available at: <http://www.cdc.gov/ncipc/wisqars>. Accessed August 1, 2006.
- ⁴ Bureau of Justice Statistics, Criminal Victimization in the United States, 2003: Statistical Tables. Available at: <http://www.ojp.usdoj.gov/bjs/pub/pdf/cvus03.pdf>. Accessed August 1, 2006.
- ⁵ Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System (WISQARS). Available at: www.cdc.gov/ncipc/wisqars. February 2006.
- ⁶ Lynch, M. Consequences of children's exposure to community violence. *Clin Child Fam Psych Rev* 2003;6(4):265-74.
- ⁷ Felitte VJ. The Relationship of Adverse Childhood Experiences to Adult Health: Turning gold into lead (English translation). *Belastungen in der Kindheit und Gesundheit im Erwachsenenalter*.
- ⁸ The California Endowment, Prevention Institute, Trust for America's Health, *Prevention For A Healthier California: Investments In Disease Prevention Yield Significant Savings, Stronger Communities*. October 2008. Available at: <http://preventioninstitute.org/component/jlibrary/article/id-75/127.html>. Accessed on April 9, 2010.
- ⁹ Prevention Institute. Synthesis Notes-UNITY Convening, August 2007.
- ¹⁰ Mercy J, Butchart A, Farrington D, Cerda M. Youth violence. In: Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, editors. *World report on violence and health*. Geneva (Switzerland): World Health Organization; 2002. p. 25-56
- ¹¹ Bollinger, C.R. & Ihlanfeldt, K.R. May, 2003. *The Intra urban Spatial Distribution of Employment: Which Government Interventions Make a Difference?* *Journal of Urban Economics*, 53, 396-412.
- ¹² Leher, E. 2000. *Crime Fighting and Urban Renewal*, *The Public Interest*, Fall 2000, 91-103
- ¹³ Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. Striving to Reduce Youth Violence Everywhere. www.cdc.gov/violenceprevention/STRYVE/index.html. Accessed April 12, 2010.
- ¹⁴ Weiss, B. An Assessment of Youth Violence Prevention Activities in USA Cities. Southern California Injury Prevention Research Center, UCLA School of Public Health. June 2008.
- ¹⁵ Weiss, B. An Assessment of Youth Violence Prevention Activities in USA Cities. Southern California Injury Prevention Research Center, UCLA School of Public Health. June 2008.
- ¹⁶ Cohen, L., Gould, J. *The Tension of Turf: Making it Work For the Coalition*. Available at: <http://preventioninstitute.org/component/jlibrary/article/id-103/288.html>. Accessed on: April 8, 2010
- ¹⁷ Bowen, L.K., Gwasda, V., and Brown, M.M. (2004). Engaging Community Residents to Prevent Violence. *Journal of Interpersonal Violence*, 19, 356.
- ¹⁸ "A Guidebook to Strategy Evaluation." UNITY, June 2008. Available at http://www.preventioninstitute.org/documents/Evaluation_Guidebook_July08.pdf. Accessed on April 8, 2010
- ¹⁹ Hahn R. Effectiveness of Universal School-Based Programs to Prevent Violent and Aggressive Behavior. *Am J Prev Med* 2007;33(2S):S114-S129
- ²⁰ Payne, A. A Multilevel Analysis of the Relationships among Communal School Organization, Student Bonding, and Delinquency Vol. 45, No. 4, 429-455 2008.
- ²¹ Tucker, Jill. Children who survive urban warfare suffer from PTSD, too. *San Francisco Chronicle*. August 26, 2007. Accessed online November 25, 2008 at <http://www.sfgate.com/cgi-bin/article.cgi?f=/c/a/2007/08/26/MN7PRKTI3.DTL&hw=ptsd+tucker&sn=001&sc=1000>.
- ²² U.S. Department of Health & Human Services. *Mental Health: Culture, Race, and Ethnicity*. A Supplement to *Mental Health: A Report of the Surgeon General*. 2001.
- ²³ U.S. Department of Health and Human Services. *Mental Health: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health, 1999.
- ²⁴ Osterlind, S., James J, Koller R. and Morris, Edwin. *Incidence and Practical Issues of Mental Health for School-Aged Youth in Juvenile Justice Detention*. *Journal Of Correctional Health Care* 2007; 13; 268.
- ²⁵ U.S. Department of Health and Human Services. *Youth Violence: A Report of the Surgeon General*. 2001. Available at <http://www.surgeongeneral.gov/library/youthviolence/chapter5/sec5.html>. Accessed on November 26, 2008
- ²⁶ Murdoch D, Phil RO, Ross D. *Alcohol and Crimes of Violence*. *International Journal of the Addictions*. 1990;25:1065-1081.
- ²⁷ Murdoch D, Phil RO, Ross D. *Alcohol and Crimes of Violence*. *International Journal of the Addictions*. 1990;25:1065-1081.
- ²⁸ Collins JJ, Messerschmidt PM. Epidemiology of alcohol-related violence. *Alcohol Health and Research World*. 1993;17:93-99.
- ²⁹ Perry BD. Neurodevelopment and the neurophysiology of trauma I: Conceptual considerations for clinical work with maltreated children. *APSAC Advisor*. Spring 1993;6:1-18.

- ³⁰ Perry B. *The Vortex of Violence: How Children Adapt and Survive in a Developing World*. Houston, Tex: Child Trauma Academy; 2000. Interdisciplinary Education Series, No. 1.
- ³¹ Gunnar MR. Quality of early care and the buffering of stress physiology: its potential role in protecting the developing human brain. *IMPrint: Newsletter of the Infant Mental Health Promotion Project*. 1998;21:4-7.
- ³² Kotulak R. *Inside the Brain: Revolutionary Discoveries of How the Mind Works*. Kansas City, Mo: Andrews McMeel Publishing; 1996.
- ³³ Loeber R, Hay DF. Developmental approaches to aggression and conduct problems. In: Rutter M, Hay DF, eds. *Development through Life: A Handbook for Clinicians*. Boston, Mass: Blackwell Scientific; 1994:288-516.
- ³⁴ Walter C. Community Building Practice: A Conceptual Framework. In *Community Organizing and Community Building for Health*, 2nd Edition. Ed. Minkler, M. Rutgers, The State University of New Jersey, 2005. pp. 66-78.
- ³⁵ Partnerships for Preventing Violence: A Locally-Led Satellite Training Model
Marci Feldman Hertz, MS, Edward De Vos, EdD, Larry Cohen, MSW, Rachel Davis, MSW,
Deborah Prothrow-Stith, MD (Am J Prev Med 2008;34(3S):S21–S30) © 2008 American Journal of Preventive Medicine
- ³⁶ Dorfman L, Wallack. *Moving From Them to Us: Challenges in Reframing Violence Among Youth*. Berkeley Media Studies Group. August 2008.
- ³⁷ Weiss, B. [An Assessment of Youth Violence Prevention Activities in USA Cities](#). Southern California Injury Prevention Research Center, UCLA School of Public Health. June 2008.
- ³⁸ Clark C, Cox E, Fisher S, Leep C, Phillips C. *Local Health Department Injury and Violence Prevention Infrastructure and Activities*. National Association of County and City Health Officials, May 2008.
- ³⁹ Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance System. Available at: <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>. Accessed on April 8, 2010.
- ⁴⁰ Centers for Disease Control and Prevention (a). Web-based Injury Statistics Query and Reporting System(WISQARS) [Online]. (2009). National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (producer). [2008 April 10] Available from URL: www.cdc.gov/ncipc/wisqars/default.htm.
- ⁴¹ Web-based Injury Statistics Query and Reporting System (WISQARS). National Center for Injury Prevention and Control Web site. Available at: <http://www.cdc.gov/ncipc/wisqars>. Accessed August 1, 2006.
- ⁴² Bureau of Justice Statistics, Criminal Victimization in the United States, 2003: Statistical Tables. Available at: <http://www.ojp.usdoj.gov/bjs/pub/pdf/cvus03.pdf>. Accessed August 1, 2006.
- ⁴³ Lynch M. Consequences of children's exposure to community violence. *Clin Child Fam Psych Rev* 2003;6(4):265-74.
- ⁴⁴ Children's Defense Fund. Cradle to Prison Pipeline Campaign. [Summary Fact Sheet](#). September 4, 2008. http://www.childrensdefense.org/site/DocServer/PPP_fact_sheet_4.15.08.pdf?docID=6201
- ⁴⁵ Corso PS, Mercy JA, Simon TR, Finkelstein EA, & Miller TR. Medical Costs and Productivity Losses Due to Interpersonal Violence and Self- Directed Violence. *American Journal of Preventive Medicine*, 2007; 32(6): 474-482.
- ⁴⁶ Children's Safety Network Economics & Data Analysis Resource Center. State costs of violence perpetrated by youth. Available from: URL: www.edarc.org/pubs/tables/youth-viol.htm.
- ⁴⁷ Golden, Megan and Jena Siegel. [Cost Benefit Analysis](#). Vera Institute of Justice. p. 2. Available http://www.advancementprojectca.org/doc/p3_cost.pdf. Accessed on April 7, 2010.
- ⁴⁸ Felitti, Vincent J. "Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study". [American Journal of Preventive Medicine](#). Volume 14, Issue 4, Pages 245-258 (May 1998).
- ⁴⁹ Thorpe KE, Florence CS, Joski P. Which Medical Conditions Account For The Rise In Health Care Spending? *Health Affairs*. 2004;Web exclusive:w4.437- 445.Available at: <http://content.healthaffairs.org/cgi/content/abstract/hlthaff.w4.437v1>.
- ⁵⁰ Prevention Institute. Synthesis Notes-UNITY Convening, August 2007.
- ⁵¹ Mercy J, Butchart A, Farrington D, Cerda M. Youth violence. In: Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, editors. *World report on violence and health*. Geneva (Switzerland): World Health Organization; 2002. p. 25-56.
- ⁵² Cook P, Ledwig J. [Gun Violence The Real Costs](#) April 20, 1999
- ⁵³ National Crime Prevention Council. [Six Safe Cities: On the Crest of the Crime Prevention Wave](#). USA. 1999.
- ⁵⁴ Prothrow-Stith, D, and Howard R. Spivak. [Murder Is No Accident](#). San Francisco: Jossey-Bass, 2004.
- ⁵⁵ Weiss, B. [An Assessment of Youth Violence Prevention Activities in USA Cities](#). Southern California Injury Prevention Research Center, UCLA School of Public Health. June 2008.
- ⁵⁶ Skogan, Hartnett, Bump, and Dubois, Executive Summary: Evaluation of CeaseFire-Chicago, May 2008. Conducted with the support of Grant Number 2005-MU-MU-003, National Institute of Justice, Office of Justice Programs. Available at http://www.northwestern.edu/ipr/publications/ceasefire_papers/executivesummary.pdf
- ⁵⁷ Leher, E.. [Crime Fighting and Urban Renewal](#), *The Public Interest*, Fall 2000, 91-103. 2000.
- ⁵⁸ Hahn R. Effectiveness of Universal School-Based Programs to Prevent Violent and Aggressive Behavior. *Am J Prev Med* 2007;33(2S):S114–S129
- ⁵⁹ "2008 Fourth Precinct Juvenile Crime Suspect & Arrest Statistics." Minneapolis Police Department. 2008.
- ⁶⁰ Personal correspondence. March 2010

-
- ⁶¹ Alameda County Public Health Department. http://www.acphd.org/healthequity/ccni/docs/evaluation/AEA_nov07_ppt.pdf accessed January 10, 2010
- ⁶² Lawrence J. Schweinhart, Jeanne Montie, Zongping Xiang, William S. Barnett, Clive R. Belfield, and Milagros Nores. *Lifetime effects: The High/Scope Perry Preschool study through age 40*. Ypsilanti: High/Scope Press, 2005.
- ⁶³ U.S Department of Health and Human Services. (2001). Youth Violence: A Report of the Surgeon General. Rockville, MD
- ⁶⁴ Centers for Disease Control and Prevention: National Center for Injury Prevention and Control. Understanding Youth Violence: Fact Sheet. 2008. Available at: <http://www.cdc.gov/ncipc/pub-res/YVFactSheet.pdf>
- ⁶⁵ Butchart A, Phinney A, Check P, Villaveces A. Preventing violence: a guide to implementing the recommendations of the World report on violence and health. Department of Injuries and Violence Prevention, World Health Organization, Geneva, 2004.
- ⁶⁶ Weiss, B. An Assessment of Youth Violence Prevention Activities in USA Cities. Urban Networks to Increase Thriving Youth (UNITY) through Violence Prevention. June 2008.
- ⁶⁷ U.S. Conference of Mayors. Youth Violence as a Public Health Crisis. 76th Annual Meeting Adopted Resolutions http://www.usmayors.org/resolutions/76th_conference/chhs_11.asp
- ⁶⁸ Loukaitou-Sideris A. Is it safe to walk?: Neighborhood safety and security considerations and their effects on walking. *Journal of Planning Literature*. 2006;20(3):219-32.
- ⁶⁹ Weir LA, Etelson D, Brand DA. Parents' perceptions of neighborhood safety and children's physical activity. *Preventive Medicine*. 2006;43(3):212-7.
- ⁷⁰ Molnar BE, Gortmaker SL, Bull FC, et al. Unsafe to play? Neighborhood disorder and lack of safety predict reduced physical activity among urban children and adolescents. *American Journal of Health Promotion*. 2004;18(5):378-386.
- ⁷¹ Harrison RA, Gemmell, I, Heller RF. The population effect of crime and neighbourhood on physical activity. *Journal of Epidemiology and Community Health*. 2007;61:34-39.
- ⁷² Sallis JF, King AC, et al. Perceived environmental predictors of physical activity over 6 months in adults: Activity counseling trial. *Health Psychology*. 2008;27(2):214.
- ⁷³ Eyler AA, Matson-Koffman D, et al. Quantitative study of correlates of physical activity in women from diverse racial/ethnic groups: The women's cardiovascular health network project summary and conclusions. *American Journal of Preventative Medicine*. 2003;25(3S1):93-103.
- ⁷⁴ Bennett GG, McNeil LH, et al. Safe to walk? Neighborhood safety and physical activity among public housing residents. *PLoS Medicine*. 2007;4(10):e306.
- ⁷⁵ Yancey AK, Kumanyika SK. Bridging the gap: Understanding the structure of social inequities in childhood obesity. *American Journal of Preventive Medicine*. 2007;33(4S1): S172-S174.
- ⁷⁶ Neckerman KM, Bader M, et al. Measuring food access in urban areas. National Poverty Center Working Paper 2009. Available at: www.npc.umich.edu/news/events/food-access/index.php. Accessed on 7/30/09.
- ⁷⁷ Rohrer JE, Arif AA, et al. Unsafe neighborhoods, social group activity, and self-rated health. *Journal of Public Health Management and Practice*. 2004;10(2) 124-129.
- ⁷⁸ Prevention Institute. (2010, April). *Addressing the Intersection: Preventing Violence and Promoting Healthy Eating and Active Living*. Retrieved from: <http://www.preventioninstitute.org>
- ⁷⁹ Division of Adult and Community Health, National Center for Chronic Disease Prevention and Health Promotion. Available at <http://www.cdc.gov/NCCDPHP/ACE/publications.htm>. Accessed on April 8, 2010
- ⁸⁰ Division of Adult and Community Health, National Center for Chronic Disease Prevention and Health Promotion. Available at <http://www.cdc.gov/NCCDPHP/ACE/publications.htm>. Accessed on April 8, 2010
- ⁸¹ Weiss, B. An Assessment of Youth Violence Prevention Activities in USA Cities. Southern California Injury Prevention Research Center, UCLA School of Public Health. June 2008.