Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence is a publication of the Centers for Disease Control and Prevention and Prevention Institute.

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Violence takes many forms, including intimate partner violence, sexual violence, child maltreatment, bullying, suicidal behavior, and elder abuse and neglect. These forms of violence are interconnected and often share the same root causes. They can also all take place under one roof, or in a given community or neighborhood and can happen at the same time or at different stages of life. Understanding the overlapping causes of violence and the things that can protect people and communities is important, and can help us better address violence in all its forms.

The purpose of this brief is to share research on the connections between different forms of violence and describe how these connections affect communities. It is our hope that this information, combined with your own practical experience, will help practitioners like you to think strategically and creatively about how you can:

1. **Prevent** all types of violence from occurring **in the first place**.

2. **Coordinate and integrate responses** to violence in a way that recognizes these connections and considers the individual in the context of their home environment, neighborhood, and larger community.

**Vulnerability and Resilience: Risk Factors and Protective Factors**

Violent behavior is complex. Many things increase or decrease the likelihood of violence. The communities people live in can protect them from violence or can increase their risk of violence. Things that make it more likely that people will experience violence are called **risk factors**. Examples of risk factors are: rigid social beliefs about what is “masculine” and “feminine,” lack of job opportunities, and family conflict. Things that make it less likely that people will experience violence or that increase their resilience when they are faced with risk factors are called **protective factors**. Examples of protective factors are: connection to a caring adult or access to mental health services. Risk and protective factors can affect an entire community, and can occur in interactions with family and friends and within organizations and systems like schools, faith institutions, and workplaces. Individual experiences or traits can also be risk and protective factors, such as witnessing violence or having skills to solve problems non-violently. The table on pages 8 and 9 shows that some of the things that make it less likely for one type of violence to happen may also protect us from other types of violence.
People's brains develop in response to their environments. When children grow up in safe, stable, and nurturing relationships and environments, they learn empathy, impulse control, anger management and problem-solving—all skills that protect against violence. When children grow up in environments where they don't feel safe, their brain cells form different connections with each other to better recognize and respond to threats. Children in these environments may misinterpret neutral facial expressions as anger, for example, and more situations may trigger a fight-or-flight response. Children living in a persistently threatening environment are more likely to respond violently (fight) or run away (flight) than children who grow up in safe, stable, and nurturing environments. Fight-or-flight responses are survival skills that people are born with and often override other skills that enable non-violent conflict resolution, such as impulse control, empathy, anger management, and problem-solving skills.

Childhood abuse, neglect, and exposure to other traumatic stressors, termed adverse childhood experiences (ACEs), are common. In the Adverse Childhood Experiences Study, over 17,000 adults from a Health Maintenance Organization (HMO) were asked about their experiences in childhood and subsequent behavioral and health outcomes. Almost two-thirds of participants reported at least one ACE, and more than one in five reported three or more ACEs. The short- and long-term outcomes of these childhood exposures include multiple health and social problems. ACEs contribute to stress during childhood and put individuals at higher risk for health problems such as alcoholism and alcohol abuse, depression, illicit drug use, intimate partner violence, and suicide attempts. The impact of ACEs is also cumulative, meaning the more ACEs a child is exposed to, the higher likelihood they will experience some of these health and social problems later in life. The life expectancy of people with six or more ACEs is 20 years shorter than those without any ACEs.

There are opportunities at every stage of life to remedy the negative effects of trauma and help people heal. Whether designed for children, youth, or adults, actions and activities that promote the protective factors listed in the table on pages 8 and 9 may prevent trauma for those exposed to violence and also reduce the likelihood of violence in the first place.
Community Context and the Co-Occurrence of Multiple Forms of Violence

Community risk and protective factors are critical because they make it more or less likely that entire communities will suffer from violence. The level of safety someone feels varies so much from community to community and even from block to block because safety is not evenly distributed. Often, a community experiences an overwhelming number of risk factors without an equal balance of protective factors. This means that families and children living in some communities where there are many risk factors (e.g., high poverty, unemployment, and crime) are more likely than families and children living in other communities to experience multiple forms of violence.18,19,20

For example:

- Neighborhoods where there is low cohesion, or where residents don't support and trust each other, are more likely to have residents that also experience child maltreatment,21,22 intimate partner violence,19 and youth violence.20
- People who are socially isolated and who don't have social support from family, friends, or neighbors are more likely to perpetrate child maltreatment,23 intimate partner violence,24 suicide,25,26 and elder abuse.27
- Lack of economic opportunities and unemployment are associated with perpetration of child maltreatment,23 intimate partner violence,28,19 self-directed violence,29,30 sexual violence,31 and youth violence.32
- Norms in society or in communities that support aggression or coercion are associated with physical assaults of children,33,34 intimate partner violence,19 sexual violence,35 youth violence,36 and elder maltreatment.27
- Witnessing community violence puts people at higher risk of being bullied37 and perpetrating sexual violence.38

However, this also means that community protective factors may make it less likely that an entire community will experience violence. Things that increase peoples’ and communities’ resilience to violence include:

- Coordination of resources and services among community agencies.39,40,41,27
- Access to mental health and substance abuse services.42,41
- Support and connectedness, including connectedness to one's community,42,19,38,43,41,27,44 family,42,45,46,47,41 pro-social peers,45,48 and school.45,49,50,46,37,41
Other Shared Risk and Protective Factors

In addition to the things in communities that put people at risk for and/or protect them from violence, there are other things in people’s relationships and past experiences that increase their risk or protect against violence. These other risk and protective factors are important because they often occur at the same time as larger community risk and protective factors and can further increase people’s risk or resilience related to violence. For example, parents may have a harder time preventing their children from using substances (drugs, alcohol) or weapons when there are high levels of community violence in their neighborhood, putting youth already exposed to violence in their community at even higher risk for experiencing other forms of violence.51 There are a number of these risk factors that occur as a result of people’s experiences, skills, behaviors, and relationships that put them at higher risk of acting violently. For example:

- Conflict within the family is linked to almost all forms of violence perpetration including child maltreatment (children in homes with high conflict are at higher risk for being victims),42 teen dating violence,52 intimate partner violence,53 sexual violence,31 youth violence,46 and bullying.37
- Youth who associate with delinquent peers or friends are at higher risk of harming others through bullying,37 youth violence,46 teen dating violence,45 and later in life sexual violence,31 and intimate partner violence.54
- Experiencing one form of violence places individuals at a higher risk of experiencing other forms of violence (See “Violence Can Lead to More Violence” on page 4).
- Lacking skills to cope with problems non-violently42,27,55,37,46,56,57,53,52 and problems with substance abuse42,27,58,46,31,53,52 also place individuals at higher risk for acting violently.

Relationships and past experiences and skills can also help protect people from violence even if they are exposed to violence in their community.59 For example, we know that people who live in communities that are violent can be “protected” from the effects of this violence (are less likely to perpetrate violence or engage in other destructive behaviors like substance use) if they have non-violent, supportive relationships with family, friends, and other groups, like schools or faith-organizations.59,51,60 For example:

- Youth who feel connected and committed to school are at a lower risk of harming others through dating violence,5 youth violence,46 and bullying,37 and are at lower risk for suicide.41
- Strong family support42,41,47,46,45 and non-violent problem solving skills45,41,37,46,56,57,31,53,52 have been shown to be protective against almost all forms of violence.
Violence Can Lead to More Violence

Most people who are victims of violence do not act violently. However, people who experience or are exposed to one form of violence are at a higher risk for both being a victim of other forms of violence and for inflicting harm on others:

- Survivors of one form of violence are more likely to be victims of other forms of violence.
  - Girls who are sexually abused are more likely to suffer physical violence and sexual re-victimization, engage in self-harming behavior, and be a victim of intimate partner violence later in life.\(^{61}\)
  - Youth who have been physically abused by a dating partner are also more likely to have suffered abuse as a child, been a victim of sexual assault, and witnessed violence in their family.\(^{62}\)
  - Youth who report attempting suicide are approximately five times more likely to have also been in a physical fight in the last year.\(^{63}\)
  - Women and girls involved in gangs often experience physical, emotional, and sexual abuse by other gang members, and are more likely to have been physically or sexually abused as children.\(^{64,65}\)
  - Children who have been bullied are at greater odds for becoming involved in physical violence (e.g. weapon carrying, physical fighting).\(^{58}\)

- Survivors of violence are at higher risk for behaving violently.
  - Children who experience physical abuse or neglect early in their lives are at greater risk for committing violence against peers (particularly for boys),\(^{66}\) bullying,\(^{67}\) teen dating violence,\(^{67}\) and committing child abuse,\(^{68}\) elder abuse,\(^{68}\) intimate partner violence,\(^{68}\) and sexual violence\(^{35}\) later in life.
  - Youth who bully others are more likely to have witnessed parental violence (intimate partner violence) than those who do not bully others.\(^{69,70}\)

- People who behave violently are more likely to commit other forms of violence.
  - Adults who are violent toward their partners are at higher risk of also abusing their children.\(^{72}\)
  - Youth who bully are more likely to carry weapons and be physically violent.\(^{58}\) They are also more likely to sexually harass peers over time\(^{73}\) and commit violence against partners as teens\(^{74}\) and as adults\(^{75}\) than those who did not bully.

Despite these connections, we know people who experience violence in their communities or relationships can be protected from experiencing other forms of violence through protective factors such as the ones listed in the table on pages 8 and 9.\(^{59}\)
“We have to figure out how we break down these barriers and work in a more collaborative way not just within the health system but across the social services system and the criminal justice system”

–Georges Benjamin, MD, Executive Director, American Public Health Association

Understanding shared risk and protective factors of violence can help us plan how to prevent multiple forms of violence at once. Violence prevention and intervention efforts that focus on only one form of violence can be broadened to address multiple, connected forms of violence and increase public health impact. For example, organizations working on child maltreatment, youth violence, and suicide prevention could work together on strategies that increase families’ connectedness to the community. Since community connectedness is a shared protective factor across these types of violence (and other types of violence as well), pooling resources to take action on this shared protective factor could have a broad violence prevention impact in the community. Also, knowing that experiencing one form of violence can increase families’ and individuals’ risk for other forms of violence can help practitioners develop services and strategies that would have the most impact for their clients. For example, practitioners working with survivors of intimate partner violence may recognize that children in families experiencing conflict and violence are at higher risk of being victims of bullying, or becoming bullies themselves and coordinate with schools to ensure that all members of the family are receiving the help and support they need to prevent future violence.

“Professionally we have silos, and we operate in these silos we’ve got to break down. Across the country, people working to prevent child abuse are right across the hall from people working on violence against women, and they don’t work together. As we go into communities to bring everybody to the table, don’t let people say, ‘I work on child abuse, but this is about gang violence.’ Don’t let people say, ‘I work on violence against women, and this is about child abuse.’ This thing, all this violence, is connected.”

–Deborah Prothrow-Stith, MD, Adjunct Professor, Harvard School of Public Health

Practitioners can address the unique aspects of a form of violence, while still supporting joint action wherever possible. Understanding how different forms of violence are linked to one another is an important first step in coordinating strategies, activities, and resources to effectively prevent multiple forms of violence. This understanding might increase support for braided and blended funding streams and additional infrastructure for increased collaboration, which would advance the field as a whole.

Together we can make a difference in preventing all forms of violence in our lives, families, relationships, and communities. Effective prevention efforts address common risk and protective factors, reduce overall violence, and improve outcomes. As the relationships among multiple forms of violence become clearer, it’s increasingly important for practitioners and researchers to consider these linkages in their work.
To Learn More

- Lifetime Spiral of Gender Violence, www.apiidv.org
- Public Health Contributions to Preventing Violence, www.preventioninstitute.org/unitylinks

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Shared Risk and Protective Factors Across Multiple Forms of Violence.

NOTE: Research on risk and protective factors for violence is continuing to evolve. In this table, “X’s” indicate the existence of at least one study published in a peer reviewed journal demonstrating an association between the risk or protective factor and that type of violence. Also, some of the “community” risk and protective factors were measured through surveys of individuals (e.g. surveys asking people about neighborhood support and cohesion) versus measures at the actual community level (e.g. city alcohol licensing lists to measure alcohol outlet density), so may be considered proxies for community level risk and protective factors.

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Type of Violence Peretration</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Child maltreatment</td>
</tr>
<tr>
<td>Cultural norms that support aggression toward others</td>
<td>x^13,76,77</td>
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<tr>
<td>Media Violence</td>
<td></td>
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<tr>
<td>Societal income inequity</td>
<td>x^108</td>
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<tr>
<td>Weak health, educational, economic, and social policies/laws</td>
<td>x^19</td>
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<tr>
<td>Harmful norms around masculinity and femininity</td>
<td>x^22</td>
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<tr>
<td>Neighborhood poverty</td>
<td>x^22</td>
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<tr>
<td>High alcohol outlet density</td>
<td>x^22</td>
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<tr>
<td>Community violence</td>
<td>x^22</td>
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<tr>
<td>Diminished economic opportunities/high unemployment rates</td>
<td>x^22</td>
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<tr>
<td>Poor neighborhood support and cohesion</td>
<td>x^22</td>
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<tr>
<td>Social isolation/Lack of social support</td>
<td>x^22</td>
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<tr>
<td>Poor parent-child relationships</td>
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<tr>
<td>Family conflict</td>
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<tr>
<td>Economic stress</td>
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<tr>
<td>Associating with delinquent peers</td>
<td>x^25</td>
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<tr>
<td>Gang Involvement</td>
<td>x^44</td>
</tr>
<tr>
<td>Type of Violence Peretration</td>
<td>Child maltreatment</td>
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<tr>
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<tr>
<td>Individual</td>
<td></td>
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<tr>
<td>Low educational achievement</td>
<td>x^42</td>
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<tr>
<td>Lack of non-violent social problem-solving skills</td>
<td>x^42</td>
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<tr>
<td>Poor behavioral control/ Impulsiveness</td>
<td>x^42</td>
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<tr>
<td>History of violent victimization</td>
<td>x^42</td>
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<tr>
<td>Witnessing violence</td>
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<tr>
<td>Psychological/mental health problems</td>
<td>x^42</td>
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<tr>
<td>Substance use</td>
<td>x^42</td>
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<tr>
<td>Protective Factors</td>
<td></td>
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<tr>
<td>Community</td>
<td></td>
</tr>
<tr>
<td>Coordination of resources and services among community agencies</td>
<td>x^19</td>
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<tr>
<td>Access to mental health and substance abuse services</td>
<td></td>
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<tr>
<td>Community support/connected-ness</td>
<td>x^42</td>
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<tr>
<td>Relationship</td>
<td></td>
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<tr>
<td>Family support/connected-ness</td>
<td>x^42</td>
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<tr>
<td>Connection to a caring adult</td>
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<td>Association with prosocial peers</td>
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<tr>
<td>Connection/commitment to school</td>
<td>x^45,105</td>
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<td>Individual</td>
<td></td>
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<tr>
<td>Skills in solving problems non-violently</td>
<td>x^106</td>
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71. Reference Removed
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For more information please contact:

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