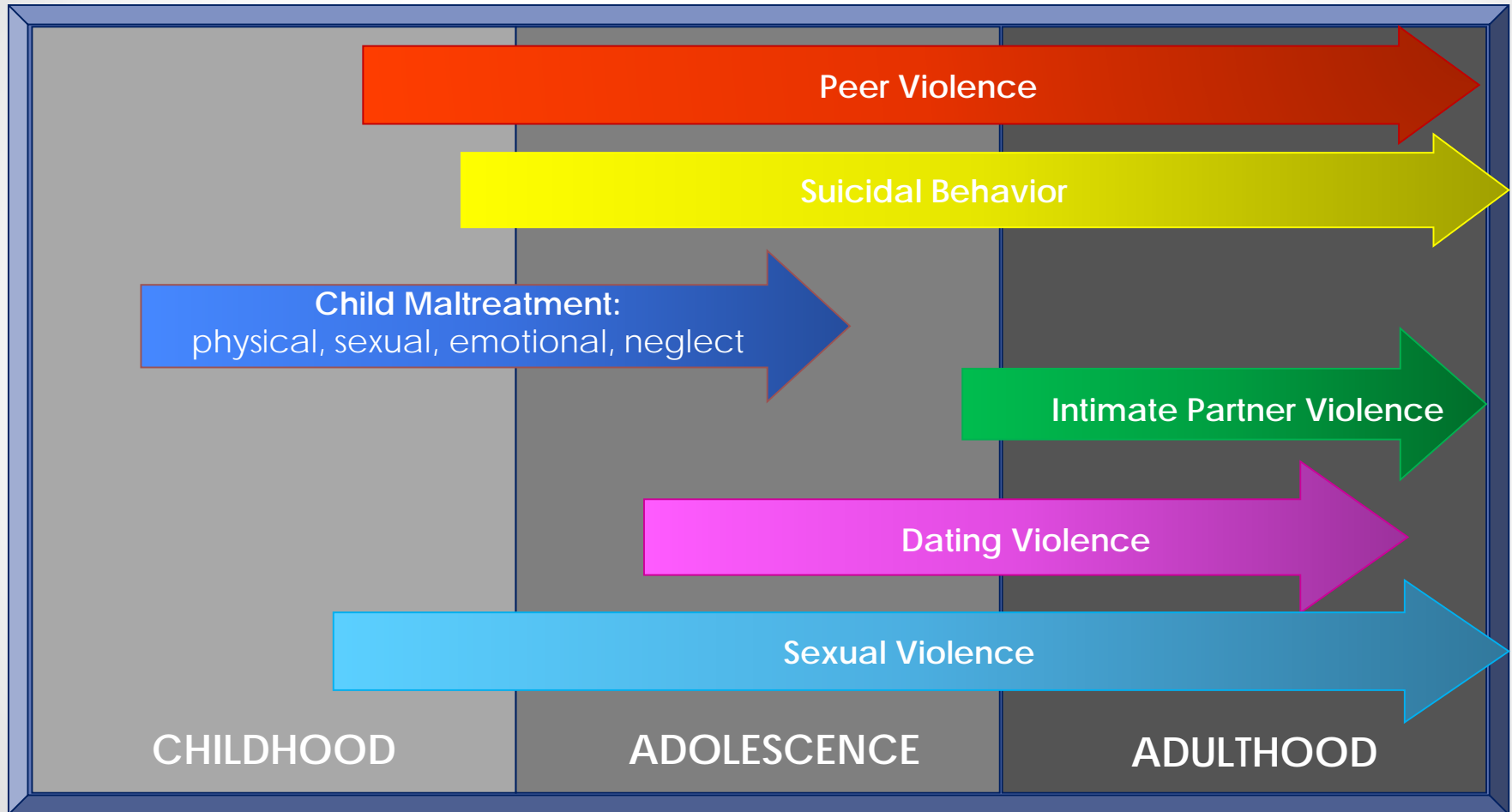


# Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence and Our Strategic Vision

Joanne Klevens, MD, PhD  
Epidemiologist, Division of Violence Prevention  
Centers for Disease Control and Prevention

*The findings and conclusions in this presentation do not necessarily represent the official position of the Centers for Disease Control and Prevention*

# Different Forms of Violence



# 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
  - be a victim of intimate partner violence later in life
- **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
  - witnessed violence in their family
- **Women and girls involved in gangs:**
  - often experience physical, emotional and sexual abuse by other gang members
  - are more likely to have been physically or sexually abused as children



\*Likelihood refers to the probability of re-victimization as compared to non-victims. It never means always.

Source: Wilkins, N., Tsao, B., Hertz, M., Davis, R., Klevens, J. (2014). **Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence.** Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention Oakland, CA: Prevention Institute.

# Although most survivors of violence do not behave violently, they 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) including bullying
  - teen dating violence
  - child abuse, partner violence, and sexual violence later in life
- Youth who have witnessed parental violence are more likely to:
  - bully others













# 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.
- ❑ Youth who bully are more likely to:
  - carry weapons and be physically violent.
  - sexually harass peers
  - commit violence against partners as teens
  - commit violence against partners as adults



# Survivors of violence & other adverse childhood experiences (ACEs) are at risk for other negative Health Behaviors & Outcomes

Abuse	Neglect	Family Challenges	
 Physical	 Physical	 Mental Illness	 Incarcerated Relative
 Emotional	 Emotional	 Mother treated violently	 Substance Abuse
 Sexual		 Divorce	

## Categories of ACEs

Graphic Credit: Robert Wood Johnson Foundation



# ACEs linked to 50+ risky health behaviors and health problems

---

## Adverse Childhood Experiences and the Risk of Premature Mortality

David W. Brown, DSc, MScPH, MSc, Robert F. Anda, MD, MSc, Henning Tiemeier, PhD, Vincent I. Felitti, MD, Valerie J. Edwards, PhD, Janet B. Croft, PhD, Wayne H. Giles

Research Article

### Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults

#### Insights Into Causal Pathways for Ischemic Heart Disease : Adverse Childhood Experiences Study

Maxia Dong, Wayne H. Giles, Vincent J. Felitti, Shanta R. Dube, Janice E. Williams, Daniel P. Chapman and Robert F. A

Williamson, MS, PhD,  
i, MPH

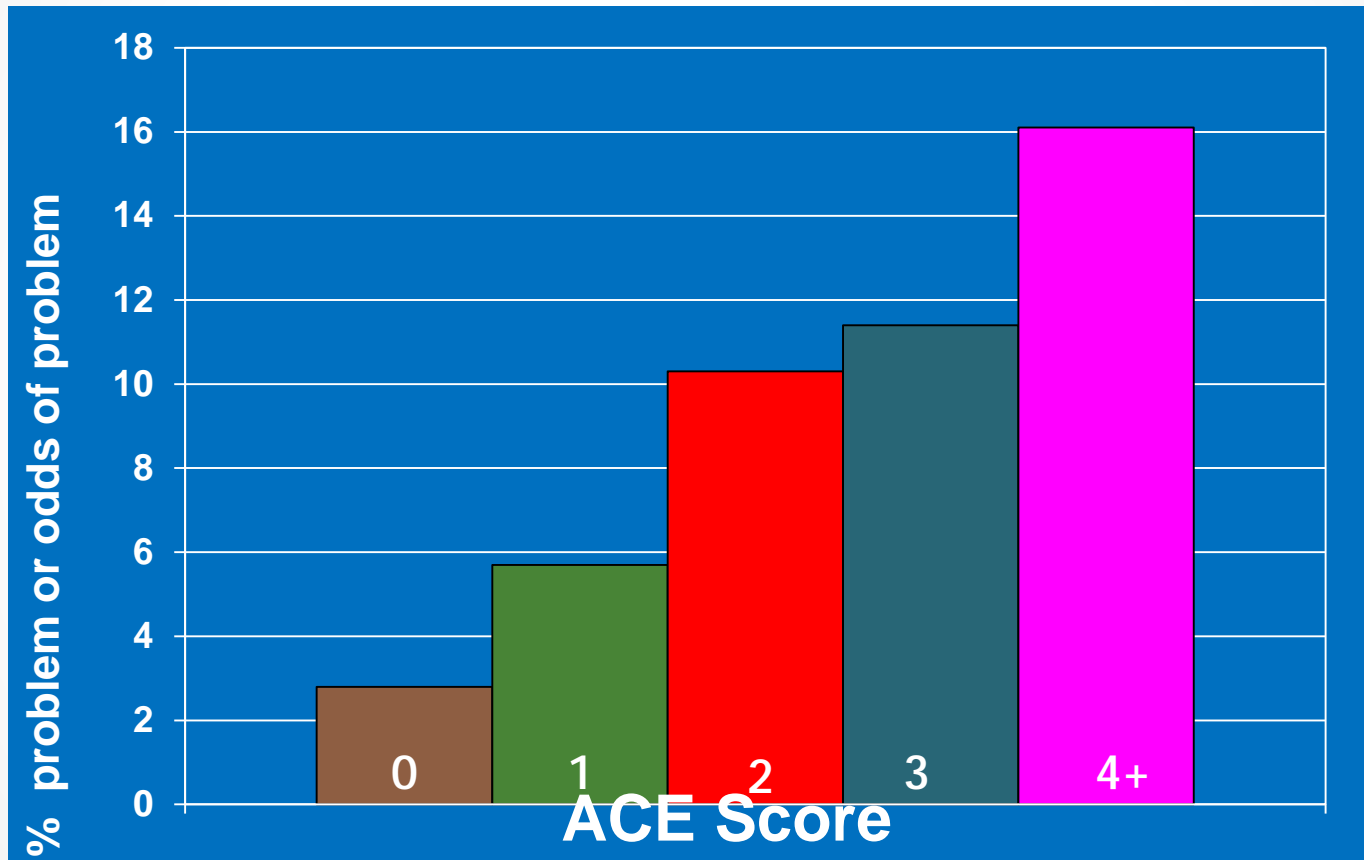
#### Adverse Childhood Experiences and Self-reported Liver Disease

#### Adverse Childhood Experiences and Smoking Persistence in Adults with Smoking-Related Symptoms and Illness

#### The Stability of Self-Reported Adverse Experiences in Childhood: A Longitudinal Study on Obesity

# Adverse Childhood Experiences (ACEs)

As ACEs "score" goes up, so does...





# Adverse Childhood Experiences (ACEs)

As ACEs “score” goes up, so does risk for...

- Risky Behaviors
  - Physical inactivity, smoking, drug/alcohol abuse, early sexual activity & risky sex
- Chronic Disease
  - Asthma, Obesity, Diabetes, Liver Disease, Heart Disease, COPD
- Other Health Outcomes
  - Teen Pregnancy, STDs, Miscarriage, Depression, Suicide Attempts, Early Death
- Life outcomes:
  - Not graduating from high school graduation, unemployment, job problems, and low income



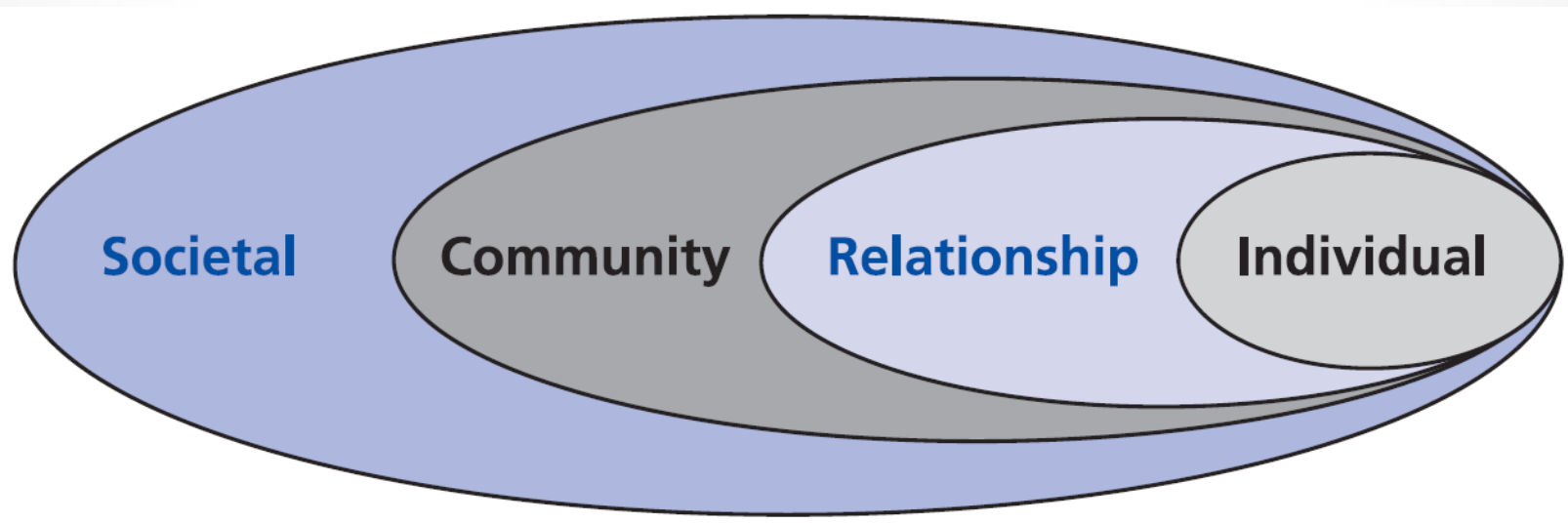
**ACEs lead to these outcomes, in part,  
because of how brains are built**

<https://www.youtube.com/watch?v=LmVWOe1ky8s>

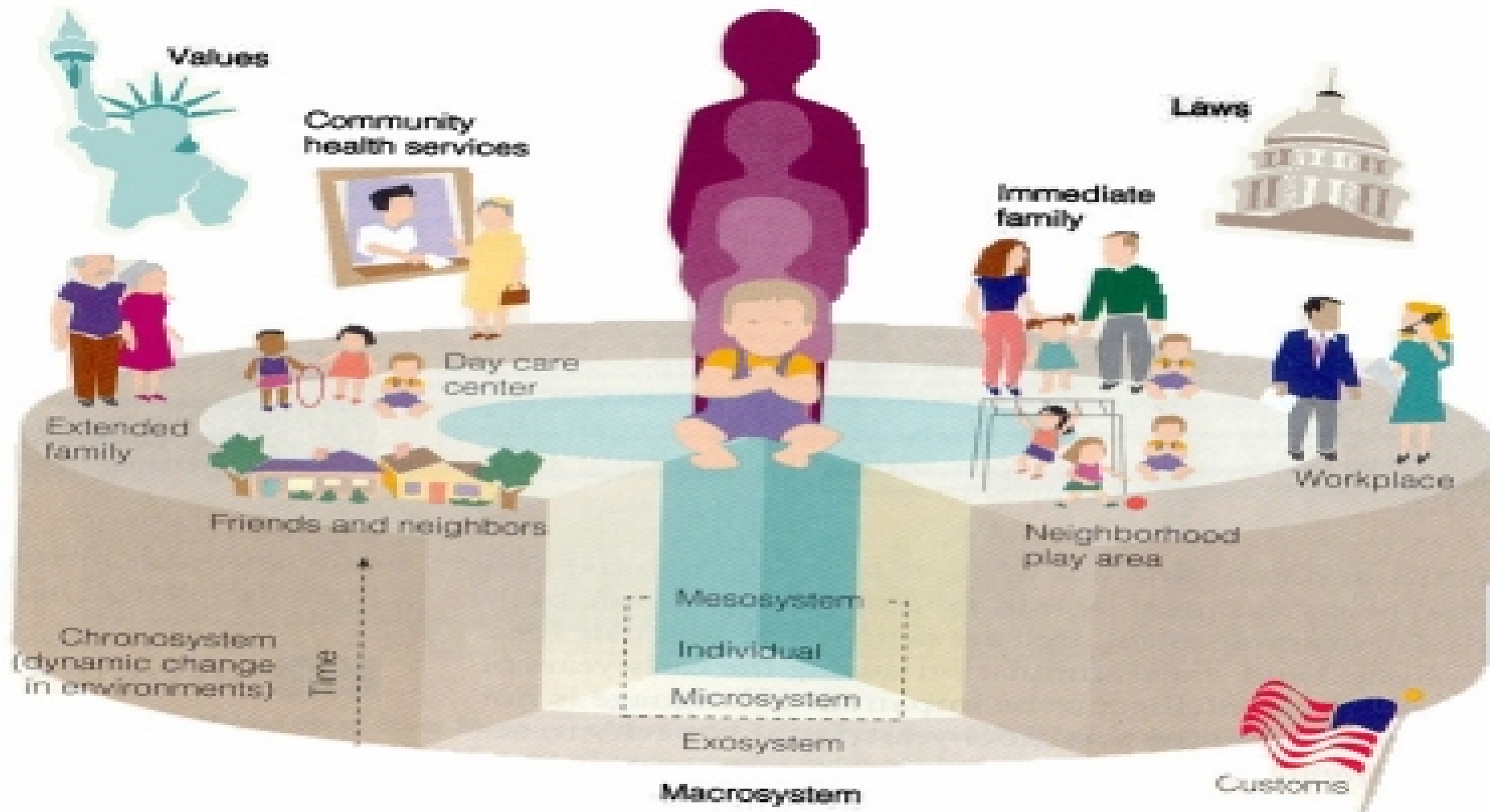
# So, let's focus on changing shared risk and protective factors

- ❑ Prevent multiple forms of violence, risky behaviors, and chronic disease simultaneously
- ❑ Develop new partnerships
- ❑ Leverage resources/funding streams
- ❑ Consider a larger pool of strategies

# Socioecological model



# Social ecology & life course




# Our definition of shared risk and protective factors

- ❑ Research on risk and protective factors for violence is continuously evolving
- ❑ In the tables on the following slides:
  - Risk and protective factors are collapsed into general categories, but may have been measured differently across different violence areas/different studies\*
  - “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.


\*For more information on how each factor was measured, please refer to the “Connecting the Dots: An Overview of the Links between Multiple Forms of Violence” brief where references for each study can be found.

## Societal Risk Factors

	CM	TDV/ IPV	SV	YV/ Bullying	Suicide
Income inequality	X	X		X	
Weak health, educational, economic, and social policies/laws	X	X	X		X
Harmful gender norms	X	X	X	X	
Norms supporting aggression	X	X	X	X	
Media violence			X	X	X



## Neighborhood Risk Factors




	CM	TDV/ IPV	SV	YV/ Bullying	Suicide
Neighborhood poverty	X	X	X	X	X
Community Violence	X	X	X	X	
Lack of economic opportunities	X	X	X	X	X
Low Neighborhood Support/ Cohesion	X	X		X	X
High alcohol outlet density	X	X		X	X

# Neighborhood Protective Factors




	CM	IPV/ TDV	SV	YV/ Bullying	Suicide
Coordination of services among community agencies	X	X			X
Access to mental health and substance abuse services	X				X
Community support and connectedness	X	X	X	X	X

## Relationship Level Risk Factors

	CM	IPV/ TDV	SV	YV/ Bullying	Suicide
Social isolation	X	X		X	X
Poor parent-child relationships	X	X	X	X	X
Family conflict	X	X	X	X	
Economic stress	X	X		X	X
Association w/ delinquent peers		X	X	X	
Gang involvement		X	X	X	

## Relationship/Individual Level Protective Factors

	CM	IPV/ TDV	SV	YV/ Bullying	Suicide
Family support/ connectedness	X	X		X	X
Connection to a caring adult	X	X		X	X
Association w/ prosocial peers		X		X	
Connection/ commitment to school		X	X	X	X
Skills solving problems non- violently	X	X		X	X



## Individual Level Risk Factors

	CM	IPV/TDV	SV	YV/Bully- ing	Suicide
Less education	X	X		X	X
Lack of non-violent problem solving skills	X	X	X	X	X
Poor impulse control	X	X	X	X	X
Violent victimization	X	X	X	X	X
Witnessing violence	X	X	X	X	X
Mental Health Problems	X	X		X	X
Substance use	X	X	X	X	X

# Examples of Potential Strategies for Addressing Multiple Forms of Violence

## ❑ Community/Societal level

- Norms change strategies
- Strategies that enhance community support & connectedness
- Economic supports/family-friendly policies



## ❑ Relationship level

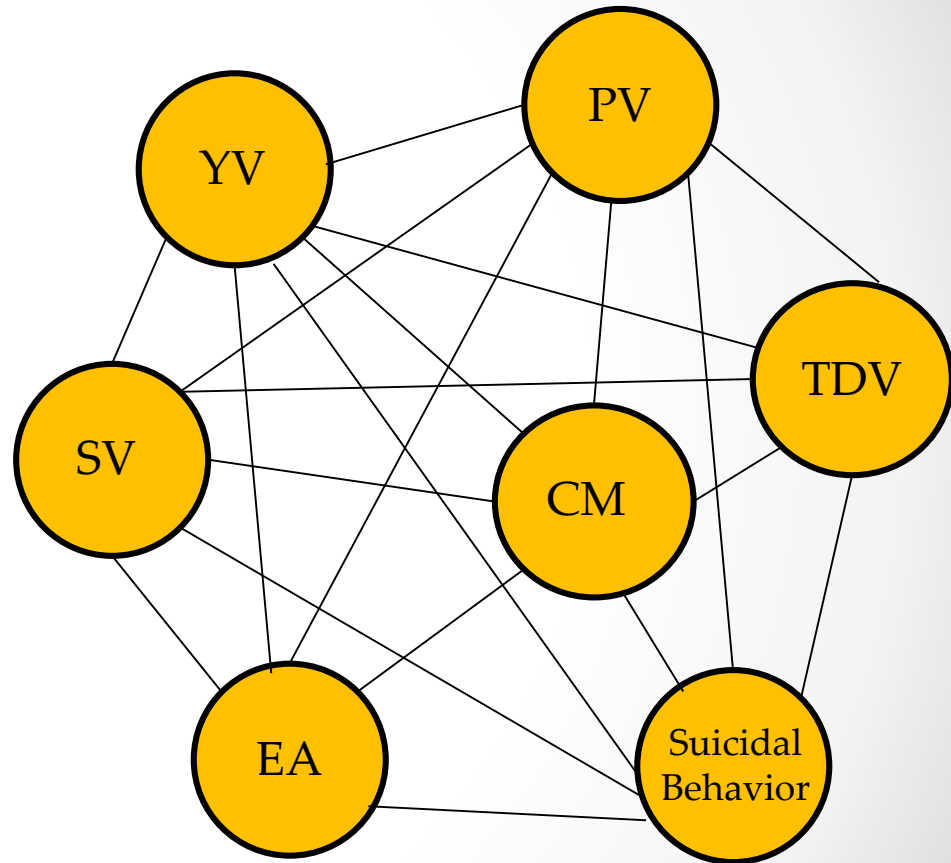
- Strategies that support families with stress
- Strategies that connect youth with supportive adults, pro-social peers, and their schools

## ❑ Individual level

- Strategies that build life skills (planning, problem-solving, impulse control) and social skills (empathy, communication)

# What it means for our work

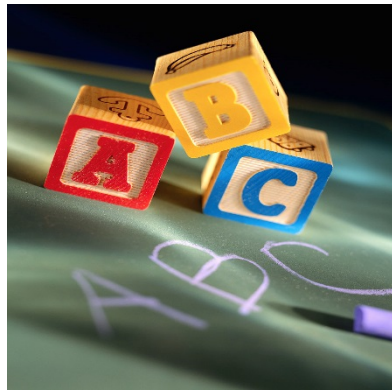
- Vision: move in this direction in a more deliberate way over next 5 years
  - Attending to the “dots” and the “lines”
- Goal: maximize impact of our prevention efforts





# Strategic Focus Areas

- Childhood and adolescence
  - “Building block” years
  - Key starting point for prevention efforts
  - Promote stable, nurturing relationships and environments for all children



# Strategic Focus Areas

- **Populations and communities at highest risk**
  - Often experience multiple forms of violence
  - Helps decision-makers prioritize and practitioners deliver prevention support in a way that better matches the needs and challenges of populations served



# Strategic Focus Areas

- Shared risk and protective factors that are most likely to influence multiple forms of violence
  - Individual
  - Peer influences
  - Parent/family factors
  - Community and societal factors, especially social determinants
  - Enhance social connectedness across all levels of the social ecology

# Strategic Focus Areas

- **Facilitate identification, implementation, and scale-up of approaches that have cross-cutting impact**
  - Approaches that address inequalities, social and cultural norms and other community/societal level risk factors
  - Early childhood education
  - Parent and family approaches
  - Social and emotional learning approaches
  - Bystander approaches
  - Therapeutic interventions

# Strengthen Public Health Surveillance and Research

- Strengthen data systems at local, state, and federal level
  - Identify and fill critical gaps
  - Effectively use data to monitor, track, and evaluate impact
  - Assess whether prevention goals are being met
- Generate new knowledge
  - Explore, evaluate, translate and apply what we know works





For more information:  
[www.cdc.gov/violence](http://www.cdc.gov/violence)



[jklevens@cdc.gov](mailto:jklevens@cdc.gov)