

Adolescent Health Task Force

February 6, 2009

Meeting Summary

Attendees

Task Force and Steering Committee: Barb Bowsher, Donna Breitenstein, Steve Cline, Paula Collins, Carol Ford, Laura Gerald, Representative Susan Fisher, Michelle Hughes, Dan Krowchuk, Peter Leone, Jim Martin, Steve North, Connie Parker, Sen Willima Purcell, Joel Rosch, Michael Sanderson, Ilene Spiezer, Carol Tyson, Tom Vitaglione

Interested Persons and Staff: Kimberly Alexander-Bratcher, Angella Bellota, Sarah Langer, Margueritte Peebles, Ruth Petersen, Scott Preschobel, Krista Ragan, Sharon Rhyne, Valerie Collins Russell, Bob Temme, Tara Strigo, Berkeley Yorkery, Eric Zogry

YOUTH VIOLENCE: DATA

*Tamera Coyne-Beasley, MD, MPH, FAAP, Immediate Past Regional President
National Board Member, Society for Adolescent Medicine
Associate Professor, Pediatrics, Schools of Medicine and Public Health
University of North Carolina at Chapel Hill*

Youth violence is “the intentional use of physical force or power, threatened or actual, exerted by or against children, adolescents, or young adults, ages 10–29, which results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation.”¹ There are many types of youth violence, including but not limited to, homicide, gang violence, dating violence, school violence, bullying, sexual assault, and other assaultive behaviors.

Youth violence impacts both individuals and society. Individual victims of youth violence may experience physical and/or psychological harm. Social costs of youth violence include imprisonment, isolation, loss of income, and social capital and are borne not just by the victim, but also by the perpetrator, the family, the community, and society at large. It is estimated that juvenile violence accounts for 24% of all violent crimes. Additionally, these events account for 46.6% of the total victim costs, leading to an estimated total annual cost of \$6.6 billion (due to lost earnings, opportunity cost of time, employment and worker’s productivity, psychological costs, etc.).

In 2006, there were 131 violent deaths among youth ages 10-20.² Violent deaths are more frequent among youth at the upper end of this age group and among males. Homicides, the most frequent cause of violent death, typically occur at a home or apartment and occur most frequently during arguments, abuse, and conflicts. Between 1999 and 2007, there were 258 homicides (an average of 29 annually) of youth ages 10-17 in North Carolina. Of these deaths, 83% were caused by firearms (71% handguns), 77% of victims were male, and 67% of victims were African-American. Firearms are the most common cause of violent deaths. However, it is difficult to understand the full circumstances of youth firearm deaths as often information such as ownership, legality, and storage patterns are not collected.

¹ World Report on Violence and Health WHO 2002

² Excludes suicides.

While the death rate is concerning, the hospitalization rate for youth violence is even greater (29.1 per 1,000 vs. 6.5 per 1,000). In 2007 there more than 7,000 youth who received treatment for assault.

Many acts of youth violence occur at school; there were 7.8 acts of youth violence per 1,000 students during the 2006-07 school year. Schools collect data on 17 reportable offenses such as possession of controlled substance in violation of law (including alcohol), assault, robbery, possession of a firearm, and sexual offenses. Survey data show that 1-in-5 high school students report having carried a weapon with 1-in-15 reporting having carried a weapon on school property. One-in-three high school students and more than 50% of middle school students report having been in a physical fight in the last year.

There are many things that North Carolina could do to improve the data around youth violence and thus better understand the causes and circumstances of youth violence. These include developing a standard surveillance system for non-fatal injuries, better adherence and use of e-codes, and further research on firearms use. In addition, the implementation of evidence-based, culturally sensitive programs to prevent homicide and non-fatal violence could reduce youth violence.

AGE OF DELINQUENCY

*Eric Zogry, JD, North Carolina Juvenile Defender
Office of Indigent Services, North Carolina Court System*

Since 1919, North Carolina has regarded all individuals age 16 or older as adults in the justice system. Therefore, youth ages 16 and 17 who commit an offense go through the adult criminal justice system rather than the juvenile system. North Carolina is one of only two states that treats all 16 and 17 year olds as adults regardless of the offense (the other is New York).

In *Roper v. Simmons*, the US Supreme Court ruled in 2005 that youth under the age of 18 could not receive the death penalty because, due to their developmental stage, youth are less culpable. The Supreme Court's decision was based largely on the arguments of the medical and scientific communities which argued that there are biological reasons that youth are more likely to make poor decisions and more likely to be reformed than adults.

In 2007 the NC Sentencing and Advising Commission recommended raising the age of delinquency (i.e. the age that determines juvenile vs. adult court) to 18. The CDC advises against placing youth under the age of 18 in adult prisons. Last year the North Carolina General Assembly asked the Governors Crime Commission to study what would be required to raise the age of delinquency to 18. The results of this study will be reported in the 2009 legislative session. The two main concerns are the costs and the logistics of raising the age.

GANG VIOLENCE

*Bob Temme, MBA, Center Manager, Center for the Prevention of School Violence
Department of Juvenile Justice and Delinquency Prevention*

More than 24,500 gangs have been identified in the US with more than 770,000 members. Most gang members are adults over the age of 18, and youth who join gangs typically remain members for less than one year. Youth report joining gangs for social reasons and protection. Gangs are found both in cities and suburbs, although in smaller cities, rural areas, and suburbs gang activity fluctuates more than in large cities. In areas where gang activity has become a problem in the past 10 years, most gang members are white. Although gangs are perceived

as being the main drug distribution organizations, most drug distribution organizations are managed by adult criminal organizations.

There is no one definition of a gang, gang member, or gang violence across states or even across agencies within a state. The NC Department of Juvenile Justice and Delinquency Prevention (DJJDP) defines a gang as a group of three or more persons, with a distinct name, known by an identifying sign or symbol, with some degree of organization and permanence that is involved in delinquent behavior or commits criminal acts.

As part of Senate Bill 1358, DJJDP surveyed school resource officers in 2008 about gang presence in schools and found that 24% of schools reported gang presence: 64% of high schools, 59% of alternative schools, and 49% of middle schools. The full report of the School Violence / Gang Activity Study is available online at <http://www.ncdjdp.org/news/2009/january/JLEOC.pdf>. The report to the Joint Legislative Education Oversight Committee made four recommendations:

- An additional category should be added to the existing seventeen reportable offenses specifically mandating that gang violence or gang crimes be reported;
- Students who are suspended from school should continue to be provided services and the North Carolina General Assembly should consider funding additional services for suspended youth through both the Juvenile Crime Prevention Councils (JCPC) and Department of Public Instruction (DPI) existing structures;
- Funding should be made available for the development of educational prevention and intervention programs that are specifically designed to educate both parents and school personnel about how to identify a student that may be involved in or associated with a gang; and
- Additional financial support should be provided to Local Education Agencies and to communities through the JCPC's and DPI to ensure that the resources necessary to implement school violence and gang prevention programs are available.

There are a number of evidence-based programs to reduce violence and gang activity, however, these programs are not being used in North Carolina schools. Evidence-based curriculum around reducing violence are not used mostly due to a lack of knowledge, time, and money. The Gang Resistance Education And Training (GREAT) program is the most widely used evidence-based program in North Carolina, though it is not used by many schools. Schools need funding to provide high quality, proven programs to reduce violence and gang activity.

A truly comprehensive model of combating gang violence includes community mobilization, social intervention, provision of opportunities, suppression, and organizational change.

Discussion:

- How is the comprehensive gang model being implemented? All types of organizations including churches, schools, and law enforcement are working together. All 5 strategies are being worked on but geography and funding dictate which strategies are being implemented in communities.
- It is important that groups working on reducing youth risk behaviors work together and not in silos because many programs that reduce one risky behavior also influence others. Collaboration among fields is important.
- There was discussion of the Task Force recommending that schools must choose between a subset of evidence-based programs that impact multiple risk behaviors. Pennsylvania and Washington have done something like this. Providing support for implementation is essential.

SCHOOL VIOLENCE (SCHOOL VIOLENCE, SAFE AND DRUG FREE SCHOOLS, FUNDING AND WHAT PROGRAMS ARE USED, BULLYING)

*Marguerite Peebles, MS, School Safety and Climate Section
 North Carolina Department of Public Instructions*

According to North Carolina General Statute 115C-105.47, schools must have safe school plans that include a clear statement of the standard of behavior; of the responsibility of the superintendent; of the principal’s expectation for maintaining a safe, secure, and orderly school environment; and of the roles of other administrators, teachers, and other school personnel. The plans must have measurable objectives for improving school safety and measures of the effectiveness of efforts to assist students at risk of academic failure. Safe School Plans outline the mechanisms for assessing the needs of disruptive and disorderly students as well as procedures for identifying and serving the needs of students who are at risk of academic failure.

Data from the North Carolina Annual Report on School Crime and Violence indicate that there are 7.77 violent acts per 1,000 students, a decrease from 2005-06 when that number was 7.90 acts per 1,000 students. Most schools are fairly safe, with 40% of schools reporting no acts of crime or violence and 72% of schools reported five or fewer acts last year. There are 17 reportable offenses in the Annual Report on School Crime and Violence including:

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| Possession of a controlled substance in violation of law | Sexual assault not involving rape or sexual offense |
| Possession of a weapon excluding firearms and powerful explosives | Assault involving use of a weapon |
| Possession of alcoholic beverage | Sexual offense |
| Assault on school personnel not resulting in serious injury | Robbery without a dangerous weapon |
| Bomb threat | Burning of school building |
| Possession of a firearm or powerful explosives | Robbery with a dangerous weapon |
| Assault resulting in serious injury | Kidnapping |
| | Rape |
| | Death by other than natural causes |
| | Taking indecent liberties with a minor |

The Department of Public Instruction (DPI) has a number of initiatives underway to improve school safety including safe and drug free schools coordinators, 21st Century Community Learning Center Program – Title IV Safe and Drug Free Schools Part B, and school-based media ready training. Additionally, DPI has formed partnerships with many groups, such as the Governor’s Crime Commission, DJJDP, Smart Start, and others to address issues of school crime and violence.

There are many things that the DPI can do to reduce school violence including continuing the work identified in the School Violence/Gang Activity Study such as getting all parties to agree on a uniform definition of gang activity and providing technical assistance to schools and communities.

Discussion: The discussion of providing a subset of evidence-based programs that influence multiple risk behaviors continued. Additionally there was interest in providing additional funding to schools most at-risk. There was discussion of how schools would be identified as being most at-risk.

ADOLESCENT DATING VIOLENCE PREVENTION: THE SAFE DATES PROGRAM

Vangie A. Foshee, PhD, Professor Health Behavior and Health Education

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Adolescent dating violence is prevalent with 9-12% of adolescents reporting physical abuse by a date, 29% reporting psychological abuse, and 15-77% reporting forced sexual activity. The Safe Dates Program. The consequences of dating violence may include an increase in other risky behaviors such as drug or alcohol use, depression, and an increase in suicide ideation and/or attempts.

The Safe Dates Program is a curriculum designed to reduce dating violence. The program consists of a play, a 10 session curriculum, and a poster contest. The program is theoretically and empirically based, targets both males and females, and is aimed at reducing both victimization and perpetration. A randomized trial, using schools in Johnston County, NC, found significant program effects on psychological, physical, and sexual abuse perpetration and moderate physical dating abuse victimization. These effects were the same regardless of gender or minority status. There was a marginal program effect on sexual abuse victimization and no effect on psychological or severe physical abuse victimization. Additionally, there were positive program effects on dating violence norms, gender role norms, and beliefs in the need for help. Program effects were evidenced as much as 4 years post-intervention.

Safe Dates is the only dating violence program designated as a Model Program by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the only dating violence program listed in SAMHSA's National Registry of Evidence-Based Programs and Practices. Safe Dates is recognized by many other groups as one of the only evidence-based programs to reduce dating violence.

DISCUSSION OF POTENTIAL ADOLESCENT HEALTH TASK FORCE RECOMMENDATIONS

1. Data Collection issues: defining gangs, adding gang violence as reportable offense in the school violence report, developing a standard surveillance system for non-fatal injuries, better adherence and use of e-codes, and further research on firearms use.
2. Raising the Age of Juvenile Delinquency to 18.
3. Study of how to promote interagency collaboration/communication at the local level to identify problems and needed resources.
4. Students who get suspended from traditional schools should be placed in an alternative learning environment.
5. Supporting the anti-bullying bill.

Identified implementing evidence-based programs/practices/policies as a cross-cutting issue.