

What Works to Prevent Youth Violence: A Summary of the Evidence

February 2021



Scottish Government
Riaghaltas na h-Alba
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What Works to Prevent Youth Violence: A Summary of the Evidence

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In collaboration with
Justice Analytical Services

2021

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The author would like to express their thanks to Dr Susan Batchelor, Dr Alistair Fraser, Dr Caitlin Gormley, Dr Keir Irwin-Rogers, and Anastasiia Kovalenko for their helpful suggestions made during the peer-review of this report. Thanks also goes to Fran Warren, Dr Rebekah Miller and Scottish Government policy officials for their invaluable input and contributions throughout, also to analysts within Justice Analytical Statistics for conducting the bespoke analysis of data pertaining to violence involving young people within a Scottish context.

Effectiveness classifications key¹	
Effective	Evidence that the intervention is associated with a positive impact on preventing violence, based on a moderate or strong evidence base.
Promising	Findings were positive but not to the extent that they constituted evidence that an intervention was 'effective'
Mixed	Studies with contrasting results/body of evidence comprised of 'mixed' evidence.
Negative effect/ inconclusive	Evidence that the intervention is associated with worse violence outcomes (e.g. worse than at the start of the intervention, or worse than for a control group).
Inconclusive	Insufficient evidence to make a judgement on impact.

¹ See the full list of effectiveness classifications in [Annex C](#)

Executive Summary

Research aims and overview

Youth violence, which occurs between individuals aged 10 to 29, can take many forms and has health, social, and economic consequences for individuals, families and communities (World Health Organisation, 2015). When considering figures relating to young people's involvement in violence in Scotland alongside concerns that the indirect social and economic consequences of the COVID-19 pandemic may lead to an increase in youth violence (Irwin-Rogers, Muthoo, & Billingham, 2020), it is clear that there is a pressing need to better understand which strategies can be implemented to address violence in youth. This report was undertaken to draw together high-quality international evidence about what works to prevent youth violence and is intended to inform policymakers and practitioners about the extant evidence base and effectiveness associated with different approaches and interventions.

Key Findings

- There is evidence to suggest that school and education-based approaches are **effective** in reducing youth violence. These include both bullying prevention programmes (e.g. *Olweus Bullying Prevention Program*, *KiVa*) and social and emotional learning programmes (e.g. *PATHS*).
- Interventions that have been identified as **promising** include: school-based programmes which seek to prevent violence in dating and intimate partner relationships, parenting and family-focused approaches, mentoring programmes, and community-based coalitions.
- There is **mixed** evidence about the effectiveness of out-of-school activities and early childhood home visitation programmes.
- Deterrence and fear-based approaches have been identified as having **no effect** on youth violence outcomes and, at worse, are **potentially harmful** to young people.
- Due to a limited body of evidence, it is not yet possible to draw reliable conclusions on the effectiveness of programmes that specifically aim to prevent gang involvement and subsequent gang violence. As a result, the evidence is **inconclusive**.

Moderating factors: Key Findings

Across this report, the importance of accounting for the **moderating factors**, potential **facilitators**, and potential **barriers** for prevention interventions for youth violence have been highlighted where evidence is available. Accounting for these factors can encourage effective implementation of these evidence-based interventions.

According to the [Early Intervention Foundation](#) the “key principles of effective programmes” for preventing youth violence include:

- Strategies that seek to create positive changes in the lives of youth and/or their families, as well as reduce risk factors and prevent negative outcomes
- The involvement of trained facilitators who are experienced in working with children and families
- Working with young people in their natural setting (e.g. school or home)
- Ensuring that programmes are delivered as originally designed, specified and intended (i.e. high implementation fidelity)
- Regular and/or frequent contacts (e.g. regular weekly contact delivered over the school term or year)
- Encouraging positive interactions between young people, families and teachers/schools (i.e. addressing violence at individual and relationship levels)
- Regular and/or frequent contacts (e.g. regular weekly contact delivered over a school term, the school year or longer)
- Delivery through interactive sessions that provide the opportunity for skills-based demonstrations and practice

In addition, it has been emphasised within the literature that programmes should be theory-driven (Nation et al., 2003; Kovalenko et al., 2020). That is to say that interventions should be based on an explicit theoretical model that describes and justifies *how* and *why* an intervention may lead to a change in violence-related outcomes.

Conclusions

The impact of the COVID-19 crisis has the potential to contribute to a rise in youth violence. Moreover, the direct and indirect consequences of violence are broad, extending beyond victims and perpetrators to families and communities. As such, the evidence presented within this report can contribute to decision-making in work to prevent youth violence. School and education-based approaches have been shown to be effective, and the factors that influence their effectiveness have been highlighted. It has been noted, however, that there is limited evidence regarding *who* is more likely to change

(e.g. in relation to age, gender, and sociodemographic status) and *when* programmes should be implemented. Moreover, it remains to be seen whether interventions of this nature influence youth violence outcomes when delivered out-with education settings or within non-school-aged samples (e.g. those aged 19-29).

Overall, much of the available high-quality evidence on the effectiveness of interventions to prevent youth violence has come from high income countries (such as the USA). As such, it is important to account for cultural context when considering the application of interventions within a Scottish context ([Annex B](#) of the report outlines implementation fidelity and associated issues).

Some interventions have been identified as out of scope for this report (see [Annex E](#) for a full out of scope list). While these interventions have not been included within this report, this does not necessarily indicate that they do not work. Rather, they have been excluded due to limited available evidence (e.g. high-quality evaluations) or they are beyond the primary prevention focus of this report (e.g. topic out of scope).

Directions for future research

Based on the evidence presented within this report, the following areas for future research have been identified.

- i. **Further evaluations of interventions – both in Scotland and elsewhere – are necessary to understand ‘what works’.** For example, for the interventions classified as ‘inconclusive’ additional evidence via high-quality longitudinal evaluations would be beneficial for understanding the impacts of these interventions on preventing youth violence over time. **Embedding evaluation** within the intervention programme approach will contribute to understanding the most effective approaches to preventing youth violence. Such evaluations should include **both quantitative and qualitative approaches** to better understand the impacts and effects of each intervention. There is still a need to grasp what strategies have sustained and long-lasting effects. Research of this nature will allow for progress to be made in this area.
- ii. **Evaluation research should incorporate a validated measure of behaviour change (e.g., victimisation and perpetration and bystander behaviour).** Where possible, assessment of modifiable precursors of young people’s behaviour should be incorporated. This will provide the opportunity for researchers to elucidate the change mechanisms that underpin effective programmes and interventions.

- iii. Education based approaches have been shown to be effective when delivered within school settings. **Further research could investigate the impact of these interventions when delivered in alternative community-based settings** and with those who do not attend school and when implemented in those who are not of school age (i.e. young adults).
- iv. **Evaluation research should continue to elucidate factors that moderate the effectiveness of youth violence interventions** (Kovalenko et al., 2020). Improved evaluation efforts are necessary to better understand what works for whom and under what circumstances, as well as why certain approaches are effective, when others are not. Faggiano et al (2014) note that “not knowing why, how, and where prevention interventions work limits knowledge about generalizability and optimization of intervention”.
- v. More broadly, **very little research has focused on examining the effectiveness of these interventions in low and middle income countries**. We cannot assume that findings from high income countries will transfer.
- vi. Strengthening this evidence base will **require longitudinal evaluations of effectiveness across different population groups and communities, using validated measures of violence related outcomes and relevant associated risk factors**. It has also been highlighted that better reporting is needed if programmes are to be replicated elsewhere (Fagan & Catalano, 2013).

Findings: effectiveness of interventions

Effective Evidence that the intervention is associated with a positive impact on preventing violence, based on a moderate or strong evidence base.		
Type of Intervention	Evidence of effectiveness in preventing violence	Moderating factors ² (where available)
<u>Bullying prevention programmes</u>	Effective: A number of evaluations have found that school-based bullying prevention programmes are effective in reducing both bullying perpetration and victimisation (e.g. <i>Olweus</i> & <i>KiVa</i>)	<p>Potential facilitators:</p> <ul style="list-style-type: none"> • Well-planned • Intensive/longer duration • Based on theories of bullying perpetration and victimisation as well as bystander behaviour • Whole school approach (involving staff, students, parents, and the community) • Multiple delivery modes • Trained facilitators • Culturally sensitive • Age-tailored <p>Potential barriers:</p> <ul style="list-style-type: none"> • Resistance/ scepticism on the part of administrator and staff around the problem of bullying • Lack of readiness of school staff to implement and sustain a comprehensive effort • Implementation fidelity

² Factors which might facilitate effectiveness or act as a barrier to effectiveness

		<ul style="list-style-type: none"> • Unexpected changes that burden the school staff
<u>Social, emotional, and life skills development</u>	Effective: There is evidence to suggest that programmes that seek to develop young people's social, emotional and life skills can have a positive impact on a range of violence related outcomes (e.g. <i>PATHS</i>)	Potential facilitators: <ul style="list-style-type: none"> • Implementation fidelity³ • Incorporates the teaching of cognitive, affective, and behavioural skills • Competence enhancement and empowerment approaches • Interactive teaching methods • Well-defined goals • Provision of clear teacher guidelines

Promising

Findings were positive but not to the extent that they constituted evidence that an intervention was 'effective'.

<u>Dating violence prevention programmes</u>	Promising: There is promising evidence that school-based programmes which seek to prevent violence in dating and intimate partner relationships (through developing life skills, improving knowledge of abuse, and challenging social norms and gender stereotypes that increase the risk of violence) are effective.	Potential facilitators: <ul style="list-style-type: none"> • Content underpinned by evidence-based theory and appropriately tailored to the target audience • Multiple sessions over time, that aim to change attitudes and norms rather than simply provide information • Should be incorporated into school policies • For men, programmes delivered in mixed male and female groups are more effective than
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³ 'Implementation fidelity' is the degree to which an intervention is delivered as intended

		those presented in all-male groups.
<u>Pre-school academic enrichment</u>	Promising: There is promising evidence that programmes that set out to provide good quality early education are effective.	Potential facilitators: <ul style="list-style-type: none"> • Parental interventions integral part of the programmes • Administered to at-risk children and families (although care should be taken to avoid stigmatization of such groups) • Combining group and individual work.
<u>Parenting training/education</u>	Promising: There is promising evidence that interventions, which aim to develop parenting skills and strengthen the relationship between parent and child may have positive effects on perpetration of youth violence.	Potential facilitators: <ul style="list-style-type: none"> • Opportunities for parents to practice new skills • Teaching principles of positive parenting, rather than specific prescribed techniques • Teaching strategies to handle child's behaviour in a positive and age appropriate way • Accounting for potential difficulties in relationships between adults in the family.
<u>Mentoring</u>	Promising: There is promising evidence that Universal and Targeted ⁴ mentoring programmes are effective.	Potential facilitators: <ul style="list-style-type: none"> • Emotional support as part of provision • Meet at least once a week • Mentoring takes place over a prolonged period • Part of wider suite of interventions

⁴ Universal programmes are delivered to all pupils in a year group or school) whilst Targeted programmes are implemented with young people who are considered to be at increased risk of engaging in youth violence.

		<ul style="list-style-type: none"> • Programme well-run with effective training and support for mentors and careful monitoring of contact. <p>Potential barriers:</p> <ul style="list-style-type: none"> • Unstructured mentoring • Unmotivated or otherwise unsuitable mentors
<u>Community coalitions</u>	<p>Promising: There is promising evidence that community coalitions which use local data to understand problems, inform preventative action, and encourage community partnerships are effective.</p>	<p>There is currently insufficient evidence to form reliable conclusions on facilitators and barriers relevant to community coalitions.</p>
<p style="text-align: center;">Mixed Studies with contrasting results and/or body of evidence</p>		
<u>Early childhood visitation</u>	<p>Mixed: There is mixed evidence that home visitation programmes are effective.</p> <p>Research is lacking within a UK setting.</p>	<p>The literature does not yet highlight any potential moderators for this intervention.</p>
<u>Out-of-school activities</u>	<p>Mixed: There is mixed evidence that out-of-school activities such as after school provision and activities that are provided separately from education are effective.</p> <p>Evaluation of programmes taking this approach is limited.</p>	<p>Potential facilitators: Not clear whether particular activities are more effective than others but whatever the specific activities, programmes should be:</p> <ul style="list-style-type: none"> • Comprehensive • Age/development appropriate • Long term

		<ul style="list-style-type: none"> • Should attract, retain, and build good relationships with young people who are at risk. <p>Potential barriers:</p> <ul style="list-style-type: none"> • Unstructured activities • Peer contagion⁵ • Programme costs • Lack of reach and awareness within communities at particular risk of violence can reduce the participation of young people who more likely to become involved in violence.
<p>Ineffective and potentially harmful effects Evidence that the intervention is associated with worse violence outcomes</p>		
<u>Deterrence and fear-based approaches</u>	<p>Ineffective and potentially harmful effects: Programmes using fear-based approaches are not effective, and may be associated with an increased risk of offending. Their implementation should be avoided.</p>	
<p>Inconclusive Studies with contrasting results and/or body of evidence</p>		
<u>Programmes that seek to reduce gang involvement</u>	<p>Inconclusive: Due to a limited body of research it is not yet possible to draw reliable conclusions on the effectiveness of these interventions.</p>	

⁵ Peer contagion refers to the transmission or transfer of violence-related behaviour from one adolescent to another.

Introduction

Background

This report summarises available international evidence of what works to prevent youth violence. The way in which youth violence is conceptualised is contested as there is no universally agreed international definition of youth, and violence is defined variably across different contexts and ideological interests (Batchelor, Armstrong, & MacLellan, 2019).

In line with the World Health Organisation (WHO) we have taken the decision to adopt a broad definition of youth violence, which encompasses “violence that occurs among individuals aged 10–29 years who are unrelated and who may or may not know each other, and generally takes place outside of the home” (2015: 5). Youth Violence occurs most often in community settings, between acquaintances and strangers, and can take many forms: from threats (with or without weapons), bullying and physical fighting to more severe sexual and physical assault, and homicide (WHO, 2020).⁶ Youth violence can also take the form of domestic abuse, which involves any form of physical, verbal, sexual, psychological or financial abuse perpetrated by a partner or ex-partner⁷. Among romantically involved but unmarried adolescents it is often referred to as dating violence or intimate partner violence (WHO, 2016). As well as having physical and psychological consequences for young people, youth violence can have a negative impact on families and the wider community (Bellis, 2017).

Youth violence within a Scottish context

Scottish Government’s Justice Analytical Services (JAS) is currently undertaking a programme of analytical work around violence in Scotland. A

⁶ Research suggests that “Young people encounter multiple and various forms of violence on a daily basis – verbal and physical conflicts with friends, family, or siblings – that are seen simply as part of the fabric of daily life, distinct from what might be understood to be a matter for the police.” (Batchelor et al., 2019). As such our definition of youth violence encompasses both physical and non-physical violence.

⁷ Domestic abuse is understood as a particular form of Violence Against Women and Girls (United Nations, 2015). According to the Crown Office and Procurator Fiscal Service (COPFS) and Police Scotland, Domestic Abuse is defined as: Any form of physical, verbal, sexual, psychological or financial abuse which might amount to criminal conduct and which takes place within the context of a relationship. The relationship will be between partners (married, cohabiting, civil partnership or otherwise) or ex-partners. The abuse can be committed in the home or elsewhere including online. Both men and women experience DA but women in Scotland were almost twice as likely as men to have experienced partner abuse since the age of 16 (20.0% and 10.9%, respectively) (Scottish Crime and Justice Survey, 2016/18).

range of statistical sources are utilised to provide an account of the magnitude, scope and characteristics of violence within this context. These measure different types of violence and include (i) Scottish Crime and Justice Survey (SCJS), (ii) Police Recorded Crime and (iii) Criminal Proceedings data. Using these sources, bespoke analyses⁸ of data pertaining to non-sexual violence in young people aged 10 to 29 was conducted to provide insights into youth violence within Scotland.

The SCJS is a face-to face victimisation survey, where randomly selected individuals aged 16 and over living in private residential households in Scotland are asked about their experiences and perceptions of crime over the last 12 months. The survey captures a range of offences and provides some details of the crimes experienced by individuals, which may not have been reported to the police. Despite a fall in violent victimisation rates for 16 to 24⁹ year olds over the past decade, this age group has re-emerged in the [2018/19 Scottish Crime and Justice Survey](#) as the cohort most likely to report being the victim of violence. Looking at those aged 16 to 29, in line with the definition of youth violence in this report, almost 1 in 20 young people (4.6%) reported experiencing violence in 2018/19.

Police Recorded Crime data captures a broad range of non-sexual violent crime. This statistical source is particularly useful when examining patterns of low-volume crimes that are challenging to access through victimisation surveys. Analysis of a deep dive of this data demonstrates that between 2008/09 and 2017/18 there was a decrease of 10 percentage points in the proportion of victims of serious assault and attempted murder who were aged between 10 and 29 years old. This is mainly driven by a decrease in the 16 to 29 age group. That being said, of the crimes sampled, 45% of victims in 2017/18 were young people aged 10 to 29^[1]. In this ten year period, there has also been a reduction of 10 percentage points in the proportion of perpetrators of serious assault and attempted murder who were aged between 10 and 29 years old. Similarly, this was due to a reduction in the 16 to 29 age group. However, nearly half (47%) of the perpetrators in 2017/18 were young people aged 10 to 29^[2].

⁸ This analysis was conducted by Analysts within Justice Analytical Services

⁹ This is the age breakdown used in the SCJS Main Findings Report

^[1] 41% of all victims were aged 16 to 29 years old.

^[2] 41% of all perpetrators were aged 16 to 29 years old.

Scottish Government Criminal Proceedings data provides details of offences dealt with by courts in Scotland, sentencing outcomes and characteristics of convicted offenders¹⁰. This data shows that, within the 10-29 age group, there has been a substantial reduction in court proceedings and convictions relating to Group 1¹¹ Non-sexual crimes of violence over the past ten years. This was also found to be the case for cases involving common assault. Whilst encouraging, over 6,000 main charges of violent crimes and common assault dealt with by the court in 2018/19 involved young people aged 10-29 years old. Within this age group, these proceedings resulted in 4,762 convictions¹².

Although data from established sources suggests substantial progress has been made in reducing violent crime involving young people in Scotland during the past decade, youth violence remains a key public health priority. Moreover, when considering these figures from Scotland alongside concerns that the indirect social and economic consequences of the COVID-19 pandemic may lead to an increase in youth violence (Irwin-Rogers, Muthoo, & Billingham, 2020), there's a pressing need to better understand what works to prevent violence between young people in order that those who are at risk of becoming involved can be best supported.

Aim of this report

This report is intended to be a useful resource for policy and practitioners, drawing together evidence of what is known about what works in preventing youth violence.

This report aims to:

- **Synthesise existing evidence** about the effectiveness about youth violence prevention interventions and signpost to further evidence to help inform decision making.
- **Provide a clear indication of the effectiveness** of an intervention based on a critical assessment of the available evidence base.

¹⁰ Changes in the profile of people being convicted for violent crime over time can be visualised using an App created within Justice Analytical Services:
<https://scotland.shinyapps.io/sq-convictions/>.

¹¹ Group 1 includes Homicide, Attempted murder & Serious assault, Robbery and other non-sexual violence.

¹² Despite a reduction in the size of the cohort of offenders aged 10 to 29 years old, there is no clear trend in youth reconviction rates (for any crime or offense) in the year following an index conviction for a violent crime during the past ten years. This was also true when considering reconviction rates for violent crimes in particular. In 2017-18, 23% of 10-16 year-olds and 9.8% of 17-29 year olds were re-convicted for a violent crime in the year following and index conviction.

- Provide information around **barriers and facilitators** to the successful implementation of interventions.

Determining prevention levels

Within this report, we examine interventions that seek specifically to *prevent* youth violence. The following WHO (2002) definition¹³ of prevention levels have been adopted:

- **Primary prevention** – approaches that aim to prevent violence before it occurs
- **Secondary prevention** – approaches that focus on the more immediate responses to violence, such as pre-hospital care or emergency services
- **Tertiary prevention** – approaches that focus on long-term care in the wake of violence, such as rehabilitation and reintegration, and attempts to lessen trauma or reduce the long-term disability associated with violence

This review focuses on primary prevention approaches to youth violence. In focusing on prevention and early intervention, this report reflects the Scottish Government's public health approach to violence prevention. Within the ScotPHN Violence Prevention Framework (2019:9), it has been noted that:

While all forms of prevention are important, if we actively want to reduce new cases of violence in Scotland, significant weight must be placed on a shared understanding of the public health approach with the effective pursuit of primary prevention as a key constituent of this.

For successful primary prevention, early intervention is required that focuses on young people (WHO, 2010:2).

The public health approach acknowledges that the pathway to violence is complex and multifaceted, with causes at the individual, relationship, community, and societal levels. As such, to prevent youth violence it is necessary to reduce risk and promote protective factors (Figure 1) at each of these levels. The evidence reviewed within this report reflects that the majority of available evaluation research concerns strategies that address risk factors at the individual and relationship levels. There are fewer outcome evaluations which focus on the impact of community- and society- level strategies.

¹³ WHO (2002:15) [World Report on Violence and Health](#)

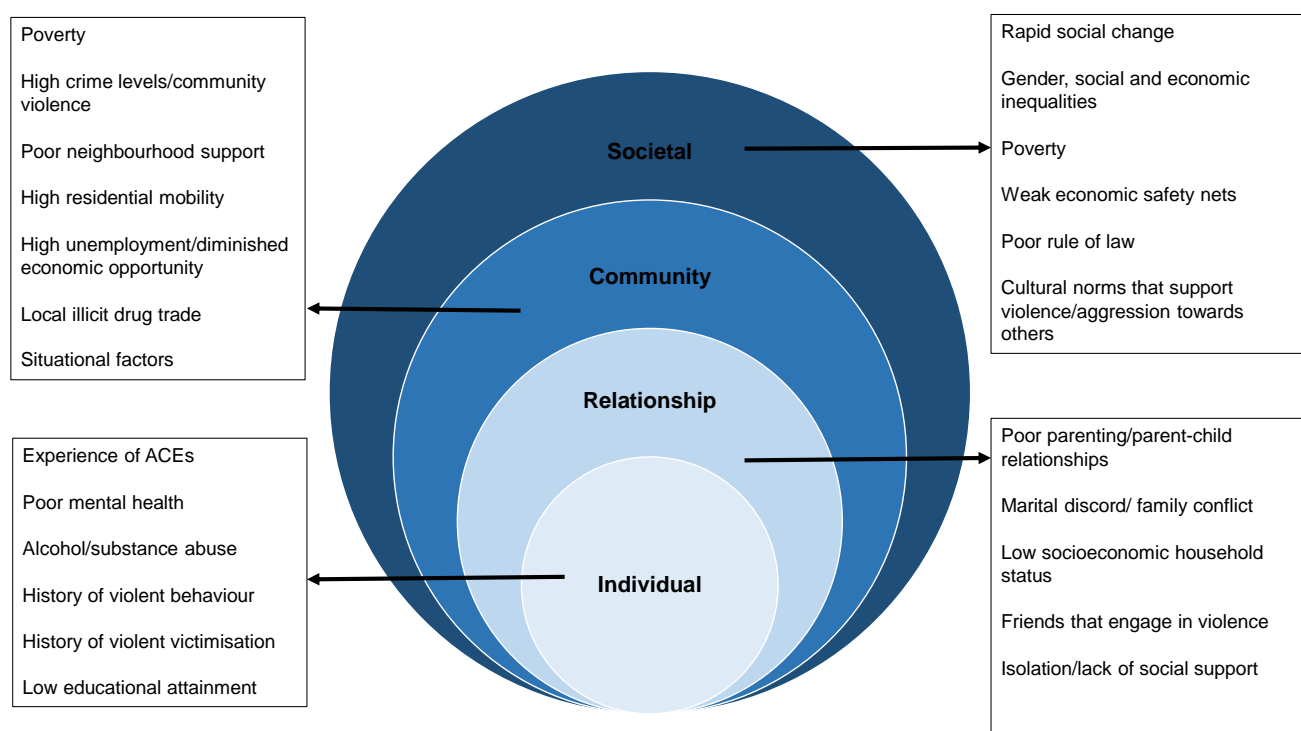


Figure 1. Risk factors for violence across individual, relationship, community and societal level (Adapted from WHO, 2017b).

Report Approach

This report identified relevant existing evidence reviews and reports, such as those produced by the World Health Organisation (WHO) and used these as a starting point from which to explore evidence on what works to prevent youth violence. Consultation has taken place with academics and key experts in the field and they have been involved in quality assuring drafts of the report.

It is important to note that this report is not an exhaustive and definitive account of the evidence in this area. Rather, it constitutes a collation of evidence that was identified and accessed during the time available. It focuses on the most common interventions, assessing their effectiveness and signposting to relevant evidence. This work aims to be a foundation upon which new and existing research can be added as it becomes available or is identified in the future¹⁴.

To acknowledge the overlaps between different forms of violence within certain interventions, this report has been structured by intervention-type, rather than violence-type. However, where an intervention related explicitly to one form of youth violence, this has been highlighted.

¹⁴ see also in this Scottish Government report series, [What Works To Reduce Crime \(2014\)](#) and [What Works To Reduce Reoffending \(2015\)](#)

Out of scope interventions

Within this report, certain interventions were classed as beyond the current scope. Two possible reasons for being out of scope were identified:

- i) Topic out of scope – areas which are wider than preventing violence¹⁵ and where the policies relating to this would sit outwith the remit of Justice Analytical Services, and/or where interventions focus exclusively on reducing violence perpetration in young people (rather than preventing it from happening).

Analysts within Justice Analytical Services at The Scottish Government are working to update the 2015 publication [What Works to Reduce Reoffending: A Summary of the Evidence](#) and such interventions (e.g. therapeutic interventions) sit better within the context of that report than this one.

- ii) Evidence base out of scope: i.e. we have looked at the evidence base, but it does not directly address violence related outcomes, therefore we cannot draw trustworthy conclusions regarding the impact of such interventions on violence prevention or reduction.

Due to limited available evidence, cost, and cost effectiveness have also not been covered within this report.

Assessment of effectiveness of interventions

Decision-making tools (effectiveness classification criteria and decision tree) were developed to inform the process undertaken in synthesising the available evidence (see Annex [B](#), [C](#) and [D](#)). These tools were developed for, and initially implemented within, the Scottish Government report [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#). They have been adopted within this report to ensure a consistent and transparent approach to classifying the effectiveness of interventions to prevent violence. In particular, the following aspects are considered in classifying the available evidence:

- The relevance of the evidence: must include outcomes related to violence prevention/reduction **or** risk factors **or** intermediate outcomes for violence
- What the evidence says about the effectiveness of the intervention
- The strength of the available evidence (see [Annex B](#) on methodology)

¹⁵ The interventions listed as out of scope below are predominantly identified as secondary or tertiary prevention and have thus been deemed out of scope.

The following six colour-coded categories of effectiveness¹⁶ are used throughout:

Effective (Green)

Promising (Amber)

Mixed (Amber)

No effect (Red)

Negative effect/potentially harmful (Red)

Inconclusive (Grey)

It should be noted that the **inconclusive** category is:

- distinct from the **no effect**¹⁷ category
- is based on insufficient evidence to make a judgement on impact of an intervention (e.g. only pilot evaluations available)
- indicates the need for further research and evidence before conclusions can be drawn on the effectiveness of an intervention

¹⁶ [Annex D](#) provides detailed information about each of these evidence classifications.

¹⁷ By contrast, a **no effect** classification has strong or moderate evidence available with no evidence of effect (positive or negative) for preventing youth violence.

School and education-based programmes

Classification: Effective

Background

School and education-based programmes can be **Universal** (i.e., delivered to all pupils in a year group or school) or can be **Targeted** at those who are considered to be at increased risk of engaging in youth violence. They typically aim to “build their skills, knowledge, and motivation to choose nonviolent behaviours and conflict resolution approaches” (David-Ferdon & Simon, 2014). Programmes that take this approach include bullying prevention programmes, social and emotional development programmes, and dating violence prevention programmes.

The WHO Practical Handbook on [School-Based Violence Prevention](#) highlights that:

Schools can be ideal places for activities aimed at preventing violence. They can involve many young people at one time, influencing them early in life. Skilled teachers can deliver violence prevention programmes and act as significant role models outside of family or community life.

Available Evidence

Bullying prevention programmes

Bullying (including cyberbullying) refers to “unwanted aggressive behaviour by another child or group of children who are neither siblings nor in a romantic relationship with the victim. It involves repeated physical, psychological or social harm, and often takes place in schools and other settings where children gather, and online” (WHO, 2019)

Bullying prevention or anti-bullying programmes have been consistently shown to reduce bullying perpetration and victimisation, as well as improving bystander responses or attitudes and beliefs about bullying (Bellis et al., 2017; Zych et al., 2015). An international systematic review conducted by Gaffney et al (2019a) estimated that on average, anti-bullying programmes were able to reduce bullying behaviours by about 19-20%, and rates of being bullied by 15-16%.

Whilst a growing body of evidence provides support for the potential role of bullying prevention programmes in reducing involvement in cyberbullying (Gaffney et al., 2019b) further research in this area is necessary. Going forward, this work will be important given that cyberbullying and cyber victimisation are predicted to become an increasing challenge within modern

society. Moreover, there are concerns that cyberbullying has the potential to cause as much (or more) harm than traditional bullying due to the relative anonymity of perpetrators in many cases, larger audiences, the potential of 24/7 access to technology, and the permanence of posted messages (Campbell, 2019). As there is often an overlap between offline and online bullying, there is a need for more research examining whether these type of behaviour should be targeted simultaneously and if it is possible to do so effectively (Gaffney et al., 2019b)

One of the most widely researched and best-known bullying prevention programme is the [Olweus Bullying Prevention Programme](#). This programme aims to reduce existing bullying problems amongst school pupils, prevent the development of new bullying problems, and improve peer relations at school (Olweus & Limber, 2010). It uses a whole-school approach¹⁸ which includes: implementation of clear school rules and management structures for bullying; training for staff; a classroom curriculum for students; awareness raising for parents; improvements to the physical school environment; and the use of evaluation tools. As such it has been noted that the *Olweus Bullying Prevention Programme* should be regarded as a coordinated collection of research based components¹⁹ that form a unified, multi-level, whole school approach to bullying (Olweus & Limber, 2019).

The programme has shown to reduce child reports of both perpetrating and being a victim of bullying behaviour (Gaffney, Farrington & Ttofi, 2019a); Limber et al., 2018; Olweus et al., 2019). Overall, effects were stronger the longer the programme had been in place. The *Olweus Bullying Prevention Programme* was initially developed and tested in Norway and has since been evaluated with young people in the United States. It has also been

¹⁸ This approach works towards making sure that the whole school shares the same vision towards reducing violence, and that the school head, teachers, administrative staff, students, parents and the community work together towards this shared goal (WHO, 2019).

Interventions that take a whole school/school-wide approach have been shown to have a positive impact on other student outcomes including school suspensions/exclusions (Bradshaw et al., 2010). Research suggests that school exclusions are associated with a greater risk of violence in young people, and a [report](#) by the Scottish Government Youth Justice Improvement Board in 2017 noted that Early school exclusion is one of the strongest predictors of making the transition from the Children's Hearing System to the adult criminal justice system and ending up in custody. As such, whole-school approaches may have the potential to indirectly influence a young person's risk of becoming involved in violence. Research examining the impact of reducing school exclusions on the prevention of youth violence outcomes is needed.

¹⁹ The programme has four major components: individual level, classroom level, school level, and community.

implemented within the UK, but further evaluation is required within the context.

Another example of an effective bullying prevention programme is [KiVa](#), which according to the WHO “takes a whole school approach, incorporating curricula, online games, work with bullies and victims, materials for teachers, and a guide for parents. It aims to improve social and emotional skills, influence group norms and bystander behaviour, and create a climate of non-bullying in classrooms and the rest of the school” (WHO, 2019: 29). It does so through discussions, short videos, and learning-by-doing exercises and the lessons are accompanied by online games tailored to each age group.

In randomised controlled trials in Finland and Italy, *KiVa* was found to significantly reduce rates of being bullied and bullying behaviour in children aged 10-12 years old (Karna et al., 2011; Nocentini et al, 2017; White, 2019). The effects of the programme were apparent across various forms of bullying, including cyber bullying and victimization (Salmivalli, Kärnä, & Poskiparta, 2011; Williford et al., 2013). Moreover, the programme influenced bystanders’ behaviours, students’ anti-bullying attitudes, and their empathy towards victimized peers (Kärnä, Voeten, Little, Poskiparta, Kaljonen, et al., 2011; Saarento, Boulton, & Salmivalli. Impacts on bullying perpetration and victimisation were also reported following a trial of the programme in Wales (Clarkson, Charles & Saville, 2019).

Moderating factors

Potential facilitators

A recent systematic review of reviews relating to youth violence prevention from Kovalenko et al (2020:7) provided recommendations on how to improve the effectiveness of programmes that aim to prevent bullying. The authors suggest that “anti-bullying programs should be well planned (Vreeman & Carroll, 2007), intensive, and of longer duration (Ttofi & Farrington, 2011).

Curricula should be based on theories of bullying perpetration and victimization (Baldry & Farrington, 2007) and include training in:

- Empathy (Polanin et al., 2012; Ttofi & Farrington, 2011)
- Social perspective-taking (Ttofi & Farrington, 2011; Vreeman & Carroll, 2007)
- Emotional control
- Problem-solving
- Peer counselling

Whole-school approaches involving school rules and sanctions should be used to prompt student and teacher training.

Howard et al. (1999) argued that programs should use multiple delivery modes, including media (e.g., video), face-to-face interaction, and physical-environment redesign and ensure consistency and complementarity across modes.

Ttofi and Farrington (2011) suggested that families should be involved in planning and implementation. Student needs, school climate (Polanin et al., 2012), and playground supervision (e.g., identification of “hot spots,” Ttofi & Farrington, 2011) should be considered. Bullying behaviors should be regarded as group processes where each participant has their role and social status and treated accordingly (Polanin et al., 2012). Ttofi and Farrington (2011) suggested that secondary school programs could be more effective because of decreasing impulsiveness and increasing rational decision making. Thus, age-tailored programs are needed”.

Potential barriers

Olweus and Limber (2019) note that educators who seek to implement the programme in their school can face some challenges. These include:

- **Resistance and scepticism on the part of administrator and staff around the problem of bullying** (i.e. underestimating the frequency and consequences of bullying, as well as the ability of youth to effectively address it without adult support)
- **Lack of readiness of school staff to implement and sustain a comprehensive effort²⁰**
- **Implementation the components of the programme with fidelity.** In light of the competing demands placed on teachers’ time and resources, those responsible for implementing the programme may be more inclined to adopt programme elements that appear less demanding relative to those that require more time, attention, and training (Olweus & Limber, 2010a)

²⁰ Molnar-Main and Cecil (2014) identified three categories of variables related to the readiness of a school to implement comprehensive prevention initiatives: (i) organizational capacity, which includes resources, structures, and organizational practices of the school; (ii) implementer characteristics, which include buy-in, commitment, and self-efficacy of faculty and staff; and (iii) leadership factors, which include such variables as leadership stability, an ethos of shared leadership and a commitment to ongoing improvement, encouragement of parental engagement, and a clear understanding on the part of school leaders of the programme requirements

- **Unexpected changes that burden the school staff** (e.g. staff turnover, change of the head teacher, problems with the school building, challenging classrooms, changes to/demanding curriculum)

Social, emotional, and life skills development programmes

There is international evidence that programmes that seek to develop young people's social, emotional, and life skills can have a positive impact on a range of violence related outcomes (i.e., perpetration and victimisation (Bellis et al., 2012; Bellis et al., 2017; David-Ferdon, 2016)). Moreover, the WHO [INSPIRE](#) package highlights increasing access to social-emotional learning and life-skills training as one of seven key strategies to have shown success in ending violence against children (including youth violence) (WHO, 2016).

Wilson and Lipsey (2017) synthesised the results of 249 studies that examined the impact of social, emotional, and life skills development programmes on aggressive and disruptive behaviours. These programmes reduced violent outcomes in young people (such as fighting, hitting, and bullying) by 25%.

According to WHO (2015) these skills include:

- problem-solving
- critical thinking
- communication
- decision-making
- creative thinking
- relationship skills
- self-awareness building
- empathy
- coping with stress and emotions

An example of an intervention that takes this socio-emotional learning and skills-building approach is *Promoting Alternative Thinking Strategies (PATHS)*. This Universal intervention is a social and emotional development programme that is designed to be delivered by teachers and targets young people between the ages of 3 and 12 years of age. The curriculum focuses on increasing self-control, feelings and relationships, and interpersonal and cognitive problem solving. The *PATHS* program concepts should be used by all staff in the school including the senior management team, guidance teachers, and support staff. This provides a school-wide common language for emotional awareness, self-control, and problem solving.

The [CDC Technical Package for the Prevention of Youth Violence](#) reports that “Multiple evaluations of *PATHS* show significant programme impacts on aggression, violent behaviours, and a number of developmental risk factors for violent behaviour among participants” (David-Ferdon, 2016: 22). *PATHS* has been identified as a Model Program by [Blueprints for Violence Prevention](#), which indicates that it is supported by a strong evidence base (Mihalic, 2001). This programme has been implemented within Scotland, and the UK more broadly but evaluation is required to better understand the effectiveness of this intervention in preventing youth violence outcomes within this context.

Another effective programme which sets out prevent youth violence by improving young people’s personal and social competence is [Life Skills Training](#) (WHO, 2009). This is a substance prevention programme that targets psychological and social factors known to promote the initiation of substance use and other risk behaviours (including violence). It comprises three major components: drug resistance skills, self-management skills, and general social skills. Stronger prevention benefits have been found for youth who participated in at least half of the program. These included less physical and verbal aggression, fighting, and delinquency (Botvin et al., 2006).

Moderating factors

Potential facilitators

When looking at facilitators to the effectiveness of social and emotional learning (SEL) in general, Bowles et al (2017:6) note that “program selection should be based on a needs assessment of the different factors that will affect program implementation at the school (e.g., administrative support and feasibility; acceptance by teachers and administrators; cultural considerations). SEL programs should be intensive, proactive, sustainable, embedded in broader efforts to create positive school climate, and address multiple levels of the school context (Jimerson et al., 2012; Jimerson et al., 2010). Best practice suggests implementing SEL within a multi-tiered system of supports framework (Jimerson, Burns, & VanDerHeyden, 2016). SEL programs need to be culturally sensitive and implemented in a culturally competent fashion. In addition, careful and continued monitoring of the programs is necessary to ensure it is being implemented with fidelity”. (p. 7)

Further, Clarke et al (2015:7) notes that the effective programmes identified in their review of school-based and out-of-school programmes in the UK shared a number of common characteristics. These include:

- Focus on teaching of skills, in particular the cognitive, affective and behavioural skills and competencies as outlined by The Collaborative for Academic, Social, and Emotional Learning ([CASEL](#)).
- Use of competence enhancement and empowering approaches
- Use of interactive teaching methods including role play, games and group work to teach skills (practice skills they were taught)
- Well-defined goals and use of a coordinated set of activities to achieve objectives
- Provision of explicit teacher guidelines through teacher training and programme manuals (e.g. it is important to have capable and motivated educators and provide them with good-quality training on the content of messages and how to deliver them)

When combined with teacher training and parental education, social development programmes may also provide longer term benefits (WHO, 2009). However, further research is required here as a limited body of research focuses on the longer term effects of these programmes.

Dating violence prevention programmes

Classification: Promising

Within the context of youth, dating violence can be defined as “physical, sexual, or psychological/emotional violence, including stalking, occurring within a teen dating relationship” (Niolon et al., 2019:2). Given that young people typically begin dating for the first time during adolescence, programmes that seek to prevent dating violence tend to target secondary school pupils. Overall, these programmes are based on the “assumption that these healthy attitudes and skills will carry through as they transition into later adolescent years and form long-term intimate relationships” (Lundgren and Amin, 2015: 546).

According to the [WHO School-Based Violence Prevention Handbook](#) (2019:32), “these approaches aim to prevent and reduce violence in dating and intimate partner relationships through developing life skills, adding to children’s knowledge of abuse, and challenging social norms and gender stereotypes that increase the risk of violence”. There is promising evidence that these interventions are effective in improving violence-related attitudes and knowledge. However, the evidence on behavioural outcomes is less clear (White 2019). Whilst research suggests that dating violence prevention programmes may reduce the number of young people who are exposed to or perpetrate violence against women and girls (physical, emotional, or sexual) within the context of an intimate partner relationship, findings are not

consistent (Kovalenko et al., 2020). Evaluations have largely focused on short-term outcomes and so the long term impact of these interventions on behavioural violence outcomes is not clear. Consequently, Ludgren and Amin (2015) noted that more research on school based interventions measuring violence as an outcome is needed.

Although evidence is promising for this approach overall, there is strong evidence that [Safe Dates](#) is one of the most effective school-based programmes for preventing different types of dating violence (i.e. physical, psychological, and sexual) (Lester et al., 2017). This intervention targets 12-18 year olds and promotes equal relationships. It “includes a number of different school-based activities: a 10-week curriculum looking at behaviour and attitudes associated with dating abuse (50 minutes a week), a play about dating abuse and violence, a poster contest, and materials for parents such as newsletters. Alongside this, community activities such as support services and training for service providers are provided. In the USA, the curriculum has been successful in reducing sexual, physical and emotional abuse due to changes in dating-violence norms, gender role norms and knowledge of support services” (WHO, 2019:33).

Safe Dates was recently adopted within [Dating Matters: Strategies to Promote Health Teen Relationships](#)²¹.

Bystander interventions have also been implemented with the aim of preventing violence within the context of young people’s intimate partner relationships.

As highlighted in [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#), bystander²² approaches aim to modify: “gender inequitable attitudes, beliefs and cultural norms which support abuse, and ultimately increasing pro-social bystander behaviour²³ to prevent it” (Gainsbury et al. 2020:2). Adopting a bystander approach involves understanding individuals as potentially empowered and active bystanders

²¹ Dating Matters has been developed as by the CDC and is a comprehensive, multi-component prevention model “including classroom-delivered programs for sixth to eighth graders, training for parents of sixth to eighth graders, educator training, a youth communications program, and local health department activities to assess capacity and track teen dating violence-related policy and data”.

²² A bystander is “somebody who observes an act of violence, discrimination or other unacceptable or offensive behaviour” (Powell, 2011:8). A bystander can therefore be a friend, classmate, team-mate, colleague, relative or a stranger. Bystander approaches aim to encourage ‘active’ or ‘prosocial’ bystanders to intervene in response to violence incidents (Powell, 2011).

²³ These behaviours are centred on bystanders actively intervening to prevent or end violent behaviours among peers.

with the ability to support and challenge their peers in a safe way, rather than being understood as potential victims/survivors or perpetrators.

An example of bystander intervention designed to be implemented with youth is the [Mentors in Violence Prevention \(MVP\) programme](#). Within the context of MVP, males and females are not looked at as potential victims/survivors or perpetrators but as empowered bystanders with the ability to support and challenge peers²⁴.

It is important to note that existing evaluations of bystander interventions with young people predominantly focus on attitudinal change, rather than the reduction of violence as an explicit outcome. This focus is, in part, due to the difficult nature of measuring Gender Based Violence.

Evaluations of MVP programmes in secondary schools in the United States have found positive results in changing pupils' attitudes and behaviours both in the shorter and longer-term (see Powell, 2011; and multi-year MVP evaluations here). MVP has been evaluated within three secondary schools in Scotland. However, further research is needed within this context.

Further detail on MVP, and its effectiveness in preventing gender based violence in youth, is presented within the report [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#) (2020). As can other examples of interventions that apply a bystander approach (e.g. *Coaching Boys into Men*, *Green Dot programme*).

Moderating factors

Potential facilitators

Kovalenko et al 's (2020:7) systematic review on effective interventions to prevent youth violence notes that programme content should be “underpinned by evidence-based theories and appropriately tailored to the culture and needs of target audiences”. Effective dating and relationship violence programs involved:

- peer education
- use of drama and poster activities
- education on legislation, personal safety, consequences, health and sexuality, gender roles, healthy relationships, and the role of bystanders

²⁴ For accessible overviews of the MVP programme, see [Scottish Violence Reduction Unit website on MVP](#) or [Mentors in Violence Prevention \(MVP\) via Restorative Justice Coventry](#)

- focus on conflict resolution, problem-solving, sexual decision making, and dealing with pressure
- be incorporated into school policies
- these programmes should clearly define terms such as aggression, rape, and dating violence and be gender-specific or gender-neutral (De Koker et al., 2014)”

Moreover, according to WHO (2010:83): “Dating programmes are more effective if they are delivered in multiple sessions over time (rather than in a single session) and if they aim to change attitudes and norms rather than simply provide information”. Where programmes set out to change norms, there is the potential for violence also to be reduced among those who haven’t received the programme through those who have via changes in norms within social networks and modelled bystander behaviours (Coker et al., 2016).

The WHO (2009:5) report on [Violence Prevention: the Evidence](#) suggest that there is evidence that “for men, programmes presented to mixed male and female groups are less effective in changing attitudes than those presented to all-male group”.

Barriers

Fox et al. (2014) note that UK evaluations of safe dating programmes have “highlighted some of the challenges in terms of service delivery and suggestions for good practice, such as what should be taught (i.e. programme content), how it should be taught (e.g. teaching methods) and who should deliver it (e.g. teachers or external organisations)” (Fox et al., 2014:29).

With regards to bystander interventions, Williams and Neville’s (2017) identified staff and mentor workload and a strain on time as potential barriers to the implementation of sustainable *MVP* programmes.

A [WHO \(2010:45\)](#) evidence review on preventing forms of VAWG²⁵ also identifies that additional research is required to:

Evaluate the effectiveness of dating violence prevention programmes in the longer term, when integrated with programmes for the prevention of other forms of violence, and when delivered outside North America and in resource-poor settings.

²⁵ Report reviewing evidence on preventing intimate partner and sexual violence against women.

Parenting and family-focused interventions

Classification: Mixed

Background

Most parenting and family-focused interventions are implemented during the early years of a child's life. By intervening early, they aim to reduce the likelihood that the young person will engage in youth violence later on.

O'Connor & Waddell (2015:18) note that:

Family and parent-focused interventions recognise that creating and sustaining positive changes in children and young people when they have challenging, complex, and sometimes chaotic home lives is very difficult. These approaches seek not only to respond to causal factors at the individual level, but at the parent and family level also.

The challenges of demonstrating long term impact following interventions in the early years have previously been acknowledged (Home Office, 2018). It is challenging and costly to measure these outcomes in the long term as a reduction in violence may only be evident several years after the programme has been completed and a range of other factors may also have influenced these outcomes.

As a result, research monitoring the long-term impact of these approaches is limited, and instead evaluations tend to focus on intermediate outcomes that provide information on whether the intervention may prevent later involvement in violence. Evaluation research has largely focused on whether parenting and family-focused interventions influence *risk factors* for youth violence. Few studies have been longitudinal in nature and so evidence relating to the impact of these programmes on involvement in violence between the ages of 10 to 29 is limited.

Available Evidence

Early childhood home visitation programmes

According to Bellis et al (2017:51), these time-limited programmes “provide intensive support in the home to improve parenting skills, promote healthy child development and support maternal mental health”. One example of this approach for young mothers expecting their first child is [Family-Nurse Partnerships \(FNPs\)](#). Evidence from the USA demonstrates benefits for both the mother and the child relating to youth violence and its risk factors (Bellis et al., 2017; David-Ferdon, 2016; O'Connor & Waddell, 2015), and those who

participated in the programme report fewer arrests and convictions by the age of 15 (David-Ferdon et al., 2016). The UK Cross-Government report [Ending Gang and Youth Violence](#) notes that a review of thirty years of research in the United States has shown a 59% reduction in arrests and a 90% reduction in supervision orders by age 15 for the children of mothers helped by this programme in the United States. FNPs are being trialled within the UK, but long-term violence-related outcomes are not yet available within this context.

Moderating factors

The CDC [Comprehensive Technical Package for the Prevention of Youth Violence and Associated Risk Behaviors](#) notes that:

Home visiting programs are effective in improving parenting behaviors and children's social and emotional development, but the evidence is mixed with some programs showing strong effects and others showing few to no effects potentially due to the varying content and delivery of these programs (David-Ferdon, 2016:16).

It is important to bear in mind that differences in healthcare systems between the UK and North America may influence the effectiveness of the Family Nurse Partnership. For example, although this approach has been shown to positively influence a wide range of outcomes in North America, an initial evaluation of United Kingdom implementation did not show significant benefits during the first two years of life compared to existing services already offered to young pregnant women. However, it is possible that benefits may accrue over a long period of time across domains of child development (e.g. violence-related outcomes).²⁶

Pre-school academic enrichment programmes

Classification: Promising

These programmes set out to provide good quality early education with the aim of helping young children to develop their social, emotional, and cognitive skills. They may include parent training or family support and aim to enhance protective factors (Bellis, 2017) and are often implemented with children from low income families who are living in deprived areas. There is promising evidence that these programmes can reduce involvement in violence during childhood and later in life. In addition, they are associated with a reduction in violent offending and criminal activity (David-Ferdon, 2016; Bellis et al., 2017).

²⁶ This intervention has been noted as having a promising evidence base in terms of preventing violence against women and girls within the Scottish Government report [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#).

The *Child-Parent Centre Programme* provides education for 3 and 4 year olds, as well as activities to improve child-parent relationships, outreach services and health services. Those participating in the programme reported significantly lower levels of juvenile arrests and arrests for violent offences at age 18 (Reynold et al., 2001). Young people who participated in the program for 4 to 6 years demonstrated reductions in arrests for violence, lower rates for violent convictions, and were less likely to have been incarcerated on more than one occasion during the 15 year follow up period. (Reynolds et al., 2001; Reynolds et al., 2007). Those who had remained in the programme for longer periods were less likely to have been involved in violent crime.

[HeadStart](#) is a community-based programme which brings together child education, childcare, health services, and family support within dedicated child centres. Evaluations show that participation in Head Start is associated with lower levels of aggressive behaviour at age 3 (Love et al., 2005) and lower rates of child maltreatment (a predictor of future youth violence) (Green et al., 2014). In England, the [Sure Start](#) programme provides similar services to all children living within areas served by a *Sure Start* Children's Centre. An evaluation of Sure Start programmes compared 5883 three-year-old children and their families from 93 disadvantaged Sure Start areas with 1879 children and families from 72 similarly deprived areas participating in the Millennium Cohort Study. The study found better social development and more positive social behaviour in children from Sure Start areas (Melhuish et al., 2008). However, effects on aggressive or violent behaviour have not yet been measured.

Moderating factors

Potential facilitators

The WHO report [Preventing Youth Violence: An Overview of the Evidence](#) (2015:26) highlights that "The effect of centre-based interventions seems to be larger when parent interventions are an integral part of the programme and/or if the programme is administered to at-risk children and families. Research also shows that programmes which combine group and individual work are more effective than programmes with only one of these elements".

Potential barriers

Bellis (2017) also notes that targeting programmes at high risk groups can be an effective use of resources but care must be taken to avoid the stigmatisation of such groups.

Parenting training/education

There is evidence that interventions which aim to develop parenting skills and strengthen the relationship between parent and child may have promising effects on perpetration of youth violence ([Public Health England, 2019](#)). They do so by encouraging safe, stable and nurturing relationships between parents and young people (WHO, 2013) and targeting risk and protective factors (Farrington, 2007). [Triple P](#) and [The Incredible Years](#) are both examples of programmes that focus on parenting and aim to promote positive parenting relationships. This is relevant to youth violence prevention as the relationship between parents and their children can directly affect child development (WHO, 2015). Participation in these programmes is associated with a reduction in child maltreatment and problematic child behaviour, both of which represent risk factors for perpetrating violence later in life (Bellis et al, 2012; David-Ferdon, 2016; WHO, 2015). They have been adapted for use within the UK.

The *Raising Healthy Children Project*, which was implemented as part of the Seattle Social Development Project was designed to reduce vulnerability and increase protection against a range of risk behaviours at the individual, peer, family and school level. It was hypothesised that training parents to manage their families in ways that promotes bonding to family and to school would reduce the likelihood that their children would engage in health-risk behaviours. Young people who participated in the programme reported fewer lifetime violent delinquent acts by the age of 18 years old and were less likely to have criminal records at age 21 (Hawkins et al., 1999).

Whilst the aforementioned programmes are designed to be implemented during the Early Years the CDC Comprehensive Technical Package for the Prevention of Youth Violence and Associated Risk Behaviors notes that the “transitional period into adolescence is when risk behaviors can increase and more severe forms of violence can emerge”. As such, other programs have been developed that incorporate working with families when young people are aged 10–17. Examples of these programs include *Strengthening Families 10–14*, *Coping Power*, and *Familias Unidas™* (David-Ferdon, 2016:17).

Moderating factors

Potential facilitators

The [Preventing Violence: Evaluating Outcomes of Parenting Programmes](#) report (2013) summarises specific components that are associated with effective parenting programmes. These include:

- Opportunities for parents to practice the new skills that they learn (e.g. through role playing or video feedback). Practice effective communication and problem solving strategies.
- Teaching parents principles of positive parenting, rather than specific prescribed techniques in response to certain behaviours. This allows parents to learn the skills (e.g. positive reinforcement and encouragement) to respond positively and appropriately when new situations arise
- Teaching strategies to handle poor behaviour in a positive and age-appropriate way. Alongside these strategies, programmes should include strategies that aim to strengthen positive parent-child relationships through play and praise
- Considers difficulties in the relationships between adults in the family

Mentoring and alternative activities

Classification: Promising

Mentoring

Background

The promising nature of mentoring in relation to preventing and reducing violence has been highlighted in the Scottish Government report [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#) (2020). Within the context of youth violence, mentoring involves an older peer or adult(s) acting as a positive role model for a young person, and mentors often provide social, emotional and/or academic guidance (Bellis, 2017). These programmes can be Universal or Targeted interventions (i.e. aimed at youth who are considered to be at higher risk of becoming involved in violence). However, knowledge about “what works” remains limited and is predominantly based on programmes and evaluation research that have been implemented within the USA (Bellis et al., 2012). Therefore, building an evidence base within a UK context is an important next step.

Available Evidence

As well as taking a bystander approach to youth violence prevention, the Mentors in Violence programme also incorporates mentoring. Through a peer-to-peer learning approach, *MVP* involves training peer mentors to deliver sessions. Within this context, peer mentors are young people who are “older or more senior from the same peer group” as the mentees Williams and Neville (2017:4) highlight:

The fact that ‘mentors’ are in the same social group as ‘mentees’ (i.e. high school pupils) is designed to qualify them as representative of prototypical group norms, and therefore credible messengers of information regarding how to feel and act.

As noted previously in this report, international evaluations of the Universal *Mentors in Violence Prevention (MVP)* programme have shown positive effects with regards to changing pupils’ attitudes²⁷ and behaviours in relation to gender-based violence (Eriksen, 2015; Powell, 2011; Williams & Neville, 2017).

There is some promising evidence for the impact of other mentoring programmes on involvement in other types of violence (Bellis et al., 2017). For example, [*Big Brothers Big Sisters*](#) is one example of an intensive community and school-based one-to-one mentoring programme for “at-risk” young people. The CDC [*Comprehensive Technical Package for the Prevention of Youth Violence and Associated Risk Behaviors*](#) highlight that “An evaluation of the community-based BBBS mentoring program found positive impacts on a number of problem behaviors (Grossman & Tierney, 1998). At the 18-month follow-up, mentored youth had skipped half as many days of school as youth who did not have a mentor. In addition, they were 46% less likely to have started using illegal drugs and 27% less likely to have started consuming alcohol, which are important risk factors for youth violence. Mentored youth were also 32% less likely to have engaged in a physical fight” (David-Ferdon, 2016: 26).

Moderating factors

Potential facilitators

[*Advice for Those Commissioning Mentoring Programmes*](#), from the Early Intervention Foundation (2015) highlights that “mentoring can be a valuable part of preventative work” and there is promising evidence to suggest that it can have positive impacts if delivered in the right way. This guidance notes that the positive effects of mentoring tend to be stronger when programmes have the following characteristics:

- emotional support is a key part of the mentoring provision

²⁷ It should be noted that the relationships between attitudes held by an individual and their behaviour is not always straightforward and that “attitude change does not guarantee behaviour change” (Flood, 2006; 28). However, it is important to measure attitudes as they may shape broader social norms, which do in turn influence behaviours (Scottish Social Attitudes Survey, 2014). Further, evidence does suggest that attitude is linked to perpetration.

- mentors are motivated to participate as part of their own professional development rather than just wanting to volunteer
- mentors and mentees meet at least once a week and spend more time together at each meeting
- the mentoring takes place over a prolonged period: studies suggest that the benefits of mentoring are less likely to be maintained after the mentoring ends
- the mentoring is part of a wider suite of interventions: mentoring on its own may not reduce re-offending
- the programme is well-run with effective training and support for mentors and careful monitoring of contact

Potential barriers

Further, the [Preventing Youth Violence and Gang Involvement](#) report from the Home Office (2013:23) notes that “caution should be taken when implementing mentoring programmes. Poorly implemented mentoring programmes (for example, unstructured mentoring, or with unmotivated or otherwise unsuitable mentors) can make things worse”.

Classification: Mixed

Out of school activities

Out of school activities can include after-school provision and activities that are provided separately from education (e.g. music, sports, or volunteering) and can be implemented in school and community settings. These programmes “provide opportunities for youth to strengthen their social and academic skills and become involved in school and community activities to expand their prosocial experiences and relationships. These approaches also address key risk and protective factors for youth violence by helping to provide supervision during critical times of the day, such as from 3pm to 6pm when youth crime and violence peak” (David-Ferdon, 2016:25). Evidence from evaluations that investigate the effectiveness of these programmes in preventing youth violence are limited and findings to date are mixed. There is often substantial variation across the characteristics of these programmes making it difficult to form clear conclusions about the effectiveness of this approach.

Both the [*Los Angeles Better Educated Students for Tomorrow*](#) (LA's *BEST*) and [*After School Matters*](#) programmes have been shown to have a promising impact on young people's involvement in gangs²⁸ and perpetration of violence²⁹ ([Public Health England, 2019](#)). LA's *BEST* "seeks to provide a safe haven for at-risk young people in neighbourhoods where gang violence, drugs, and other types of anti-social behaviours are common" (Goldschmidt and Huang, 2007). A range of education and recreational enrichment activities are offered to young people, with the goal of supporting their intellectual, social, and emotional development within a safe, supervised, and nurturing environment. A longitudinal evaluation of this programme demonstrated reductions in young people's arrests for both violence and crime.

However, it has been noted that some evaluations of other programmes that take this approach have demonstrated negative effects and that "bringing together high-risk youths may have adverse effects" (WHO, 2015; 38).

Research evaluating the effectiveness of out-of-school activities on youth violence outcomes within the UK is limited. The Early Intervention Foundation note that the impact of 11 sports-based programmes in London, which aimed to prevent youth violence and crime, was mixed (McMahon & Belur, 2013). These findings were limited by small sample sizes and a lack of control groups³⁰. As such, further research is necessary to better understand the effectiveness of out-of-school activities in relation to the prevention of youth violence.

Moderating factors

Potential facilitators

As noted has been suggested that these mixed effects are likely due a range of moderating factors including differences in programme model, duration, programme structure, staff, and diversity of participants (David-Ferdon, 2016). The Home Office report on [Preventing Youth Violence and Gang Involvement](#) notes that it is not clear whether any particular activities are more or less effective than others. The authors highlight that: "Whatever the specific activities, the research suggests that programmes should be comprehensive (addressing a range of risk factors for violence, for example, social skills, behavioural control and peer networks), age/development appropriate, long

²⁸ It is important to bear in mind that gang activity within the USA is arguably different to that in Scotland and the UK.

²⁹ Indicated by lower rates of arrest for violence and crime than in the control group

³⁰ The control groups are made up of young people who were not participating in the sports based programmes.

term, and that they should attract, retain and build good relationships with young people who are genuinely at risk of offending” (2018: 27).

Specific to *LA’s BEST* it was noted that those who attended the after-school programme at least ten days a month and had significant adult contact benefited most (Goldschmidt and Huang, 2007)

Potential barriers

This Home Office (2018:27) report also cautions that “some studies suggest that loosely structured activities may actually make things worse”. This may be the case due to peer contagion effects (Dishion, 1999) – whereby any positive impact of an intervention for youth might be offset by processes of peer influence that occur when youths who are at risk of (or already are) engaging in violence are given the opportunity to interact with each other in groups (Petrosino, et al., 2013).

The World Health Organisation report [Preventing Youth Violence: An Overview of the Evidence](#) (2015: 38) note that “Barriers to participation include programme costs, specifically fees and transportation costs or costs for equipment. Some programmes fail to reach out to communities at particular risk of violence, and a lack of awareness of these programmes may reduce levels of participation on the part of youths at high risk of violence”. To ensure that these interventions reach those most at need, the authors encourage practitioners to make effort to remove these barriers, particularly where young people are living in low socioeconomic areas or are at an increased risk of violence.

Community coalitions

Classification: Promising

Background

In their report [Preventing Violence, Promoting Peace](#), Bellis et al (2017:60-61) note that “community coalitions use local data to understand problems and inform preventative action” and encourage “partnership between young people, their families, schools, community organisations and public services”. The authors of this policy toolkit for preventing interpersonal violence highlight that the implementation of community coalitions are associated with a reduction in homicide, violent crime, and violent behaviour.

Available Evidence

One example of an initiative that has taken this approach is [Communities That Care](#). Here, community coalitions are implemented to collect data locally, which provides an opportunity to establish the extent to which young people are experiencing both risk and protective factors. The needs of youth are prioritised based on this assessment and individual, school-based, family-focussed, or community level interventions are implemented to fill any gaps in service and target the specific needs of this community (David-Ferdon, 2016). This intervention also sets out to strengthen community-level protective factors by reducing norms that encourage violent behaviours and enhancing young people's attachment to the community. A randomized trial involving twenty-four communities in seven states (USA) demonstrated reductions in the incidence of self-reported violent behaviours one year following the implementation of *Communities that Care*³¹ (Hawkins et al., 2012). Further evidence regarding the effectiveness of community coalitions is needed. However, the complexity of communities, the wide range of contextual factors and the numerous challenges to implementing the programme with sufficient fidelity to the model, makes the evaluation of community based initiatives difficult.

The result of a five-year pilot of the *Communities that Care* scheme within three communities in the UK demonstrated that whilst the programme was supported and accepted by those involved, it was challenging to measure its impact on risk and protection. This is the case as it is designed to be a long-term community intervention and so a longer-term view needs to be taken when considering its potential role in preventing and reducing violence in the UK (Crow, 2004). This approach has been implemented within a Scottish context. However, it was deemed to be too early to examine the impact of the intervention at the stage the evaluation was conducted.

Moderating factors

As our understanding of the role of community coalitions in reducing and preventing violence is limited, it is not yet clear which factors enable or impede its effectiveness. However the [Evaluation of three 'Communities that Care' demonstration projects](#) (2004) conducted by the Joseph Rowntree Foundation

³¹ Within this evaluation, involvement in violent behaviour was determined using items that assessed whether young people had attacked someone with the intent to harm, carried a gun to school, or beaten someone up.

in highlighted that the following factors played a key role in the successful implementation of the initiative:

- Presence of strong partnerships, active communities and good leadership prior to the start of the programme.
- Active and supportive 'champions' of the project among the senior executives of key local agencies.
- A wide range of professionals involved at operational and managerial level from the beginning - especially where specific programmes were to be implanted, such as in schools and social services.
- Structures and processes which allow for working between strategic and operational levels.
- Early and comprehensive inductions for new partners and staff
- Project co-ordinators who maintained momentum, increased the active involvement of partners, and kept projects focused on core objectives
- Moving from planning to delivery was the most difficult part of the process. Success was more likely where the programme was built on the consent and active involvement of all involved.
- Money and resources were critical. Staff and local people found it frustrating when time and effort spent devising a plan were not matched with the resources to implement the work.

Classification: Negative effect / Potentially harmful

Deterrence and fear-based approaches

Background

Programmes that aim to deter young people from involvement in gangs or violence using scare tactics or confrontational techniques are intended to highlight the negative consequences of engaging in that behaviour (Lipsey, 2009). These include interventions such as ["Scared Straight"](#) and other juvenile awareness programmes for preventing youth violence³² and delinquency take young people (specifically those who were considered to be at high-risk of engaging in violent or criminal activity) on visits to adult prisons.

³² Other examples of deterrence based juvenile awareness programmes include JOLT, Texas Face-to-Face Programme, SQUIRES and Stay Straight (Petrosino et al., 2013)

Available Evidence

It was assumed that providing the young people with testimonials from those who were currently incarcerated, and exposing them first-hand to the reality of prison life, would scare or shock them into not engaging in violence. However, evidence has demonstrated that these programmes are associated with increased risk of offending (Petrosino et al., 2013) and their implementation should be avoided. Whilst these studies are predominantly based on male participants and programmes in the USA, so their applicability to girls and a UK context is not conclusive, there is arguably sufficient evidence to warrant caution against using them. It is not clear why these programmes lead to an increase in risk. However, it has been suggested that one explanation may be “peer-contagion” (defined within the literature as the transmission or transfer of violence-related behaviour from one adolescent to another).

Classification: Inconclusive

Approaches specific to reducing and preventing gang involvement and subsequent gang violence

Gang membership in youth can be associated with high levels of violence. Strategies that address gang-violence, encourage gang members to change their behaviours and prevent young people from joining gangs may be an important component in violence prevention strategies. Overall, research on what works to prevent gang involvement and subsequent gang violence is very limited. This does not mean that effective gang-specific programmes do not exist, but that it is not possible to draw reliable conclusions on the effectiveness of these approaches based on the evidence that is currently available.

It has been suggested that Universal strategies may offer limited utility within this context as most young people are not at risk of engaging in gang violence or joining a gang (Gravel et al., 2013). Moreover, it may be challenging to identify, recruit, and retain young people to these programmes who are involved in a gang or at risk of becoming a gang member in these programmes (Brisson et al., 2020). It has been suggested that programmes that are tailored specifically to youth involved in gangs may only serve to increase social cohesion between these young people (Gravel et al., 2013).

The WHO Practical Handbook on [School-Based Violence Prevention](#) (2016:31) highlighted *Gangs Resistance Education And Training (G.R.E.A.T.)* as one programme that decreases the risk of gang membership in young

people in North America. The handbook notes that the programme comprises “a classroom curriculum aimed at 8- to 13-year-olds that aims to prevent violent behaviour and gang membership as well as develop positive relationships between youths and police. The 13 lessons are delivered by police officers, who receive training in working with youths. Lessons include developing social and emotional skills and learning about crime and gang membership”.

The results of a multi-site evaluation involving young people across 7 cities in the United States demonstrated that young people who participated in *G.R.E.A.T* were 39% less likely to report gang memberships than young people who were not involved in the programme (at one year follow up). However, *G.R.E.A.T* did not have a significant impact on rates of violent offending (Esbensen et al., 2012).

One example of a community-based approach that has been implemented within a Scottish context is the *Community Initiative to Reduce Violence (CIRV)*. The programme offers access to diversionary activity, personal development, and employment preparedness in exchange for adherence to a “no violence, no weapon” pledge, which was monitored through police systems. A preliminary³³ post hoc before-and-after quasi-experimental design compared rates of criminal offending (including violent and non-violent offences) in male youths aged 16–29 who engaged with the initiative with age-matched gang-involved youths from an equally deprived area of the city. Violent offending reduced across all groups over the time of the evaluation. In the cohort followed for 2-years, the rate reduction was greater in the intervention group (52%) than the comparison group (29%). The reduction in the rate of physical violence was not significantly different between the intervention group and the comparison group; however, the rate of weapons carrying was reduced more in the intervention group than the comparison group (84% vs 40% respectively in the 2-year follow-up cohort) (Williams, Currie, Linden, & Donnelly, 2014). The authors note that these results suggest that adopting a public health approach with gang-related youth was associated with reduced weapon carriage, which can prevent consequences for victims, offenders, and society.

³³ It should be noted that preliminary investigations of this nature should only be taken as indicative, rather than robust evidence of “what works”. The authors note that “a before-and-after quasi-experimental design with a comparison group was chosen as it offered a pragmatic yet robust approach (Robson et al., 2001, Stoto and Cosler, 2008). It is, however, acknowledged that such a design is susceptible to a number of biases”.

Overall, it is important to remember, however, that gangs are only part of the problem of the overall picture of youth violence.

Conclusion

This review was undertaken to support strategic thinking around what works to prevent youth violence. The report has focused on primary prevention interventions – those aimed at preventing violence before it occurs (WHO, 2002) and, therefore aligns with the Scottish Government's public health approach to tackling violence (ScotPHN, 2019).

From the evidence reviewed above it can be concluded that available interventions can prevent youth violence. Specifically, school and education-based approaches are effective in doing so, and dating violence prevention programmes, family-focused interventions, mentoring, and community-based coalitions have shown promise within this context.

Overall, much of the available evidence on the effectiveness of primary interventions to prevent youth violence has come from high income countries (such as the USA). In this context, it is important to account for cultural context in the application of interventions within a Scottish context.

Moreover, when considering the implications of these findings the CDC Technical Package for the Prevention of youth violence acknowledges that “there can be significant heterogeneity among the programs, policies, or practices that fall within one approach or strategy area in terms of the nature and quality of the available evidence. Not all programs, policies, or practices that utilize the same approach (e.g., home visitation, mentoring) are equally effective, and even those that are effective may not work across all populations” (CDC, 2016:8). This should be kept in mind when considering how the findings of this review may transfer to young people in Scotland.

Some interventions have been identified as out of scope for this report. While these interventions have not been included within this report, this does not necessarily indicate that they do not work. Rather, they have been excluded due to limited available evidence (e.g. high-quality evaluations) or they are beyond the primary prevention focus of this report (e.g. topic out of scope).

Directions for future research

Monitoring and evaluation are key components of a public health approach to youth violence reduction and prevention. Whilst this field of research is rapidly growing and the evidence base has expanded greatly, further research is

required. Based on the evidence presented within this report, the following areas for future research have been identified.

- i. **Further evaluations of interventions – both in Scotland and elsewhere – are necessary to understand ‘what works’.** For example, for the interventions classified as ‘inconclusive’ additional evidence via high-quality longitudinal evaluations would be beneficial for understanding the impacts of these interventions on preventing youth violence over time. Embedding evaluation within the intervention programme approach will contribute to understanding the most effective approaches to preventing youth violence. Such evaluations should include both quantitative and qualitative approaches to better understand the impacts and effects of each intervention. There is still a need to grasp what strategies have sustained and long-lasting effects. Research of this nature will allow for progress to be made in this area.
- ii. **Evaluation research should incorporate a validated measure of behaviour change (e.g., victimisation and perpetration and bystander behaviour).** Where possible, assessment of modifiable precursors of young people’s behaviour should be incorporated. This will provide the opportunity for researchers to elucidate the change mechanisms that underpin effective programmes and interventions
- iii. Education based approaches have been shown to be effective when delivered within school settings. **Further research could investigate the impact of these interventions when delivered in alternative community-based settings** and with those who do not attend school and when implemented in those who are not of school age (i.e. young adults).
- iv. **Evaluation research should continue to elucidate factors that moderate the effectiveness of youth violence interventions** (Kovalenko et al., 2020). Improved evaluation efforts are necessary to better understand what works for whom and under what circumstances, as well as why certain approaches are effective, when others are not. Faggiano et al (2014) note that “not knowing why, how, and where prevention interventions work limits knowledge about generalizability and optimization of intervention”
- v. More broadly, **very little research has focused on examining the effectiveness of these interventions in low and middle income**

countries. We cannot assume that findings from high income countries will transfer.

- vi. Strengthening this evidence base will **require longitudinal evaluations of effectiveness across different population groups and communities, using validated measures of violence related outcomes and relevant associated risk** factors. It has also been highlighted that better reporting is needed if programmes are to be replicated elsewhere (Fagan & Catalano, 2013).

The COVID-19 crisis has had (and will likely continue to have) a profound impact on Scotland. The indirect economic and social consequences of the circumstances and restrictions brought about by this pandemic have highlighted, and in many cases, worsened existing inequalities within our society (Jones et al., 2020; [Scotland in Lockdown, 2020](#)). By indirectly exacerbating key risk factors, COVID has the potential to contribute to increased rates of youth violence in Scotland (Irwin-Rogers et al., 2020; Cohen & Bosk, 2020). This timely report provides evidence for interventions that could be implemented to tackle this public health problem, and recommendations for evaluation research to strengthen our understanding of 'what works' going forward.

Annex A: Signposting to key sources and further information

Justice Analytical Services is undertaking a programme of analytical work around violence in Scotland. A range of statistical sources³⁴ are used when measuring violence. The recent report [Non-sexual violence in Scotland](#) triangulates these evidence sources to provide an up to date account of the current magnitude, scope and characteristics of violence in Scotland.

Other relevant analytical publications on violence in Scotland, produced or commissioned by JAS include:

- [Scottish Crime and Justice Survey 2018/19: main findings](#), Scottish Government, June 2020
- [Repeat violent victimisation: evidence review](#), Scottish Government, April 2019
- [Recorded Crime in Scotland 2018/19](#), Scottish Government, September 2019
- [Taking stock of violence in Scotland](#), SCCJR, September 2019

In Scotland, the Scottish Public Health Network (ScotPHN) have published [Examples of projects to prevent and reduce violence in Scotland](#) (2018)³⁵. In 2019 they also published a [Violence Prevention Framework](#) that promotes a public health approach to understanding different types of violence and interventions that may be effective in preventing them. In both publications, youth violence prevention is highlighted and discussed. This report builds upon this work.

In January 2021, the Youth Endowment Fund launched their "Evidence and Gap Map". This resource provides a visual representation of the quantity and quality of evidence that is available for different interventions that are aimed at keeping children and young people safe from involvement in violence (<https://youthendowmentfund.org.uk/evidence-and-gap-map/>).

³⁴ Sources include: (i) Police Recorded Crime, (ii) Scottish Crime and Justice Survey (SCJS), (iii) Emergency Hospital Admissions due to Assault and (iv) Criminal Proceedings.

³⁵ This publication does not include evaluations or information about the effectiveness of these projects.

Annex B: Methodological discussion

In line with the report [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#), this review identified existing evidence drawn from reviews and reports, such as those produced by the World Health Organisation (WHO). They were used as a starting point from which to explore evidence on what works to prevent youth violence.

A literature search was also conducted by the Scottish Government Library and covered a wide range of resources, including: IDOX, EBSCOHOST (Academic Search, SocIndex), PROQUEST (Applied Social Sciences Index and Abstracts (ASSIA), ERIC, PAIS International, International Bibliography of the Social Sciences (IBSS), ProQuest Sociology, Social Services Abstracts, Sociological Abstracts) and Web of Science.

While not completely comprehensive, this report aims to highlight the interventions with robust and reliable evaluations, using this evidence to classify their effectiveness (see details below). Drawing on and synthesising a range of sources, this report also looks at moderating factors; that is, potential barriers and facilitators to interventions working effectively.

In addition to reviewing key literature, extensive consultation took place with academics and key experts in the field. Relevant internal and external stakeholders contributed to quality assuring drafts of this report.

Reviewing and assessing available evidence

This report draws upon existing systematic evidence reviews, peer-reviewed academic publications, and a range of high-quality reports; including the most up-to-date evidence possible. In doing so, this report relies upon the classifications that the authors have assigned to their evidence. Where the strength of the evidence is explicit within such reports, the classifications of “weak”, “moderate” and “strong” evidence are used. The publications cited within this report include details of how these authors assessed the evidence presented.

Certain types of studies such as well conducted randomised control trials (RCTs) may be more likely to be classed as providing strong evidence. A definition for RCTs is provided in Box 1 below.

Box 1: RCT definition from National Institute for Health and Care Excellence (NICE) glossary online (no date)

“A study in which a number of similar people are randomly assigned to 2 (or more) groups to test a specific drug, treatment or other intervention. One group (the experimental group) has the intervention being tested, the other (the comparison or control group) has an alternative intervention, a dummy intervention (placebo) or no intervention at all. The groups are followed up to see how effective the experimental intervention was. Outcomes are measured at specific times and any difference in response between the groups is assessed statistically. This method is also used to reduce bias”.

This research approach is sometimes understood as the ‘gold standard’ of evaluations as they use a rigorous and reliable approach which helps researchers to draw conclusions regarding causal relationships (Cleaver et al., 2019).

RCTs are less commonly found within social science research and intervention evaluations. Instead, a range of quantitative and qualitative methods can be used to produce reliable, robust, and high-quality data on both specific outcomes (e.g. attitudes towards gender violence through quantitative methods) and understandings of the process (e.g. understanding the setting, how the programme was implemented through qualitative methods) (see Williams and Neville, 2017:27). Moreover, using qualitative methods within evaluations can allow researchers to consider the unquantifiable processes and factors that might impinge on the success of an intervention; particularly important when researching social behaviours (Cleaver et al., 2019).

An RCT design is not always practical or feasible given constraints of working in real-life situations. As such, quasi-experimental pre-and-post studies are often conducted where there are practical and ethical barriers to conducting randomized controlled trials. These investigations are non-randomised, which means that study participants are not randomly allocated to the experimental (intervention) and control (no interventions) conditions. Outcomes are assessed before and after a planned intervention. However, these estimated effects obtained from these studies are susceptible to a higher level of bias than their experimental counterparts. This means that it is more challenging to infer whether that intervention has *caused* any change in violence related outcomes and that the results of these studies should be interpreted with greater caution.

Assessment of effectiveness of interventions

Categories of evidence of effectiveness were developed, drawing on definitions/terminologies used by the National Institute for Health and Care Excellence (NICE) for [reviewing research evidence](#) and The Department for International Development's (DFID) [Rapid Evidence Assessment](#) (see **Annex C**). The inclusion criteria for evidence within this report on preventing and reducing youth violence included³⁶:

- High-quality peer-reviewed studies, evaluations, systematic reviews, and grey literature (including RCTs, cohort evaluations, qualitative studies³⁷)
- Studies focusing on interventions intended to prevent violence (primary prevention) or further violence (secondary prevention)
- Studies focusing on the effectiveness of interventions in either preventing/reducing further youth violence
- Studies from high-income countries, published in the English language³⁸

[Annex C](#) and [D](#) include the decision-making tools (effectiveness classification criteria and decision tree) developed to illustrate the process undertaken in synthesising the available evidence. These tools have been used to ensure a consistent and transparent approach to classifying the effectiveness of interventions to prevent youth violence. In particular, the following aspects are considered in classifying the available evidence:

- The relevance of the evidence: must include outcomes related to violence prevention/reduction **or** risk factors **or** intermediate outcomes for violence
- What the evidence says about the effectiveness of the intervention
- The strength of the available evidence

³⁶ These criteria have been informed by [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#) report

³⁷ The evidence presented within this report is primarily from quantitative research published in peer-reviewed publications and organisational reports, however qualitative research is identified as important in understanding the effectiveness of an intervention.

³⁸ This review is limited by the fact that we only drew upon evidence published in the English language

The decision tree leads to the following six categories of effectiveness, which have been colour coded. [Annex C](#) provides definitions for each of these evidence classifications:

Effective (Green)

Promising (Amber)

Mixed (Amber)

No effect (Red)

Negative effect/potentially harmful (Red)

Inconclusive (Grey)

It should be noted that the **inconclusive** category is:

- distinct from the **no effect**³⁹ category
- is based on insufficient evidence to make a judgement on impact of an intervention (e.g. only pilot evaluations available)
- indicates the need for further research and evidence before conclusions can be drawn on the effectiveness of an intervention

Where a respected expert organisation such as, for example, WHO had assigned a particular level of effectiveness to an intervention, this review has used their effectiveness rating, rather than following the decision-making process outlined in the decision tree. Exceptions to this include where robust new evidence has been produced since the publication of ratings by these organisations, or where an effectiveness rating is not relevant to a high-income country like Scotland (e.g. if that rating was only applicable to low income countries in a WHO report).

Caveats

There is the potential for interventions that fall “out of scope” for this review to positively impact on violence prevention in Scotland. Their omission from this report should not be seen as indicative of lack of effectiveness in violence prevention, rather as indicative of violence prevention not being their main aim or focus.

Likewise, there are limited robust evaluations which met the criteria for inclusion into this report. Again, this does not discount the effectiveness of the intervention. There may also be promising interventions that are not included within this report as they have not been evaluated or had evaluations published (Fulu and Kerr-Wilson, 2015).

³⁹ By contrast, a **no effect** classification has strong or moderate evidence available with no evidence of effect (positive or negative) for preventing youth violence.

As highlighted in [What Works to Prevent Violence Against Women and Girls: A Summary of the Evidence](#), it can be hard to draw robust conclusions about what works, due to factors such as variable and low quality evaluations. Moreover, assessing the effectiveness of primary preventative interventions in relation to future violence is challenging.

Whilst an exhaustive discussion of the difficulties around assessing the effectiveness of violence prevention strategies is beyond the scope of this report, it is important to acknowledge these and the implications they may have for our understanding of what works to prevent youth violence. Within the [Taking Stock of Violence in Scotland](#) report (2019:61) it is noted that:

The complex and multi-faceted nature of violence makes it difficult to establish an evidence-base in terms of effective interventions. Not only are controlled evaluation designs and randomised trials near impossible in the context of violent street cultures, for example, in the few instances where such designs are implemented it is often difficult to attribute any 'promising' results solely to the intervention under evaluation.

When considering the impact of violence prevention interventions, it is important to keep in mind the wider structural, cultural and societal contexts in which violence occurs ([Bellis, 2017](#); [Equally Safe, 2016](#); [WHO, 2016](#); [WHO, 2019](#)). The [ecological model framework](#) takes these contexts into account alongside the interactions between the individual level, personal relationships, community contexts and societal factors in influencing interpersonal violence, including youth violence ([WHO, 2020](#)).

Implementation issues

'Implementation fidelity' is the degree to which an intervention is delivered as intended. A good level of implementation is critical to the successful translation of evidence-based interventions into practice (Breitenstein et al., 2010). Programmes do not always transfer from one geographic or cultural setting to another and the structures for delivering prevention programmes might not always be in place (Breitenstein et al., 2010).

Diminished fidelity may be why interventions that show evidence of efficacy in highly controlled trials may not deliver evidence of effectiveness when implemented in real life contexts/routine practice. Likewise, transferring programmes to substantially different contexts may require adaptation and re-evaluation (Faggiano et. al, 2014). Williams and Neville's (2017) evaluation of a Mentors in Violence Prevention (MVP) programme in Scotland highlights that caution should be taken regarding "implementation fidelity" to ensure that the US evidence base is utilised, while also ensuring that the programme is appropriately adapted for a Scottish context.

A substantial proportion of the evaluation research presented within this report has examined violence prevention efforts within North America. Although some programmes have been developed (or adapted) for use elsewhere, there is much less evidence relating to the evaluation of these approaches of these approaches in the UK and research within a Scottish context is particularly limited. As the demographics, socio-cultural dynamics, nature of violence, and systems of policing, criminal justice, and education within North America do not map easily onto the Scottish context⁴⁰, the transferability of interventions or their effectiveness cannot be assumed. To illustrate the challenges of transferability in violence prevention initiatives, previous research demonstrates that there are differences between the effectiveness of the Olweus Bullying Prevention Programme in Norway (where it was originally designed and implemented) and the United States. These differences may reflect cultural and social differences between young people in Norway and those in the USA. Therefore, as interventions are dependent on the culture and context where they are implemented, further research evaluating the transferability to, and violence prevention impacts in, different settings is much needed.

Interventions that have been identified as out of scope have been outlined in [Annex E](#).

⁴⁰ An overview of the Scottish policy context relating to violence and violence reduction can be found within Chapter 3 of the report "[Taking Stock of Violence in Scotland](#)".

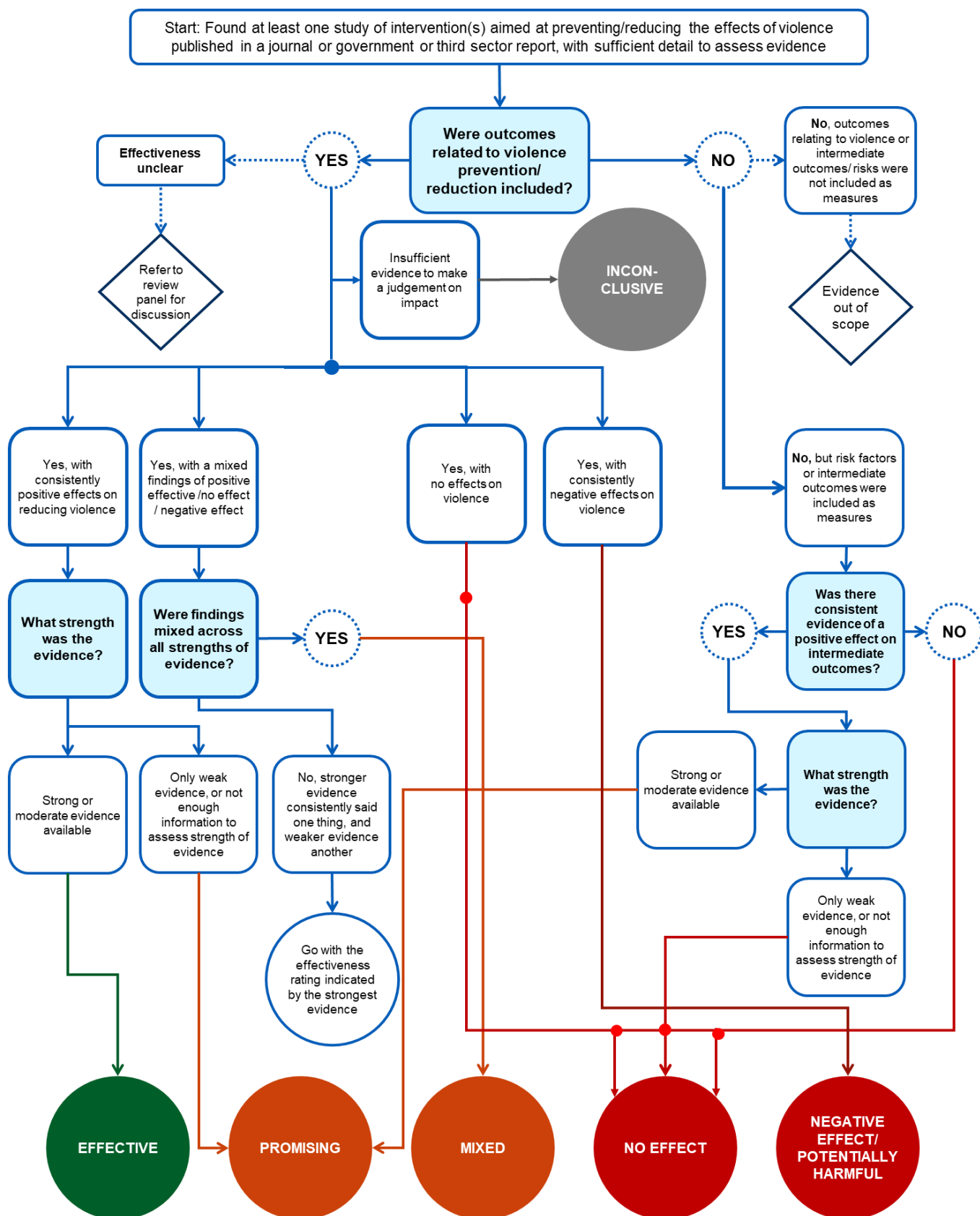
Annex C: Classification of Intervention Effectiveness

Drawing on definitions and terminologies used by [NICE](#) and [DFiD](#) a comprehensive classification system has been developed to categorise the effectiveness of interventions based on available evidence. This decision-making tool has been used to determine effectiveness ratings throughout this report on what works to prevent youth violence. It has been used alongside a purposively designed decision tree presented in [Annex D](#).

Effectiveness ratings applied to interventions

Category	Definition
Effective	Evidence that the intervention is associated with a positive impact on preventing violence, based on a moderate or strong evidence base. Due to the complexity of causality, an 'effective' intervention should be considered one that contributed towards violence prevention or mitigation rather than one that single-handedly accounts for a decrease in violence.
Promising	Findings were positive but not to the extent that they constituted evidence that an intervention was 'effective', this could be: (i) in cases where an intervention has a positive impact on an intermediate outcome, rather than in reducing violence itself (ii) where authors noted a positive change, but expressed doubts as to whether the intervention could confidently be said to have contributed to this (e.g. due to evidence being rated as "weak" or the other factors potentially having an impact).
Mixed	<u>Findings of individual article -</u> (i) An individual article that finds varied impact of a single intervention across research sites, or populations. (ii) An article examining multiple strands of an interventions that finds some were effective/promising and others not. <u>Findings from a number of studies-</u> (i) Where there have been a number of studies and the results contrast – e.g. some found positive effects and some did not. (ii) Similarly, a body of evidence that is mostly comprised of individual articles finding a 'mixed' impact of interventions would be considered 'mixed' overall.
No effect	No evidence of effect (positive or negative) of the intervention on reducing violence includes moderate or strong evidence found the intervention had no effect on reducing violence
Negative effect/ Potentially harmful	Evidence that the intervention is associated with worse violence outcomes (e.g. worse than at the start of the intervention, or worse than for a control group).
Inconclusive	Insufficient evidence to make a judgement on impact.

Annex D: Evidence of Effectiveness Decision Tree



Annex E: Out of Scope Interventions

Two possible reasons for an intervention being out of scope have been identified:

- i) **Topic out of scope** – areas which are wider than preventing violence⁴¹, and/or where the policies relating to this would sit outwith the remit of Justice Analytical Services, and/or where interventions focus exclusively upon reducing violence perpetration in young people (rather than preventing it from happening).
- ii) **Evidence base out of scope:** i.e. we have looked at the evidence base, but it does not directly address violence related outcomes, therefore we cannot draw trustworthy conclusions regarding the impact of such interventions on violence prevention or reduction.

The table below details interventions that have been classified as out of scope for this review. Where possible, web links have been included to published work in this area. Whilst this report focuses on primary prevention, all reviews of the literature that were examined highlighted the need for a comprehensive approach to violence that encompasses primary, secondary and tertiary prevention.

Table showing interventions and topics that were identified as out of scope for this report:

Justice, legislative, and policy focussed interventions	
Legislative changes	Topic out of scope Legislative changes have been identified as beyond the scope of this report. As such, legislative changes are not explored.
Criminal justice interventions for youth violence	Topic out of scope As this report focuses on pre-criminal and prevention-focused interventions, criminal justice interventions such as remand and custodial sentences are out of scope. However, the What Works to Reduce Re-Offending (2015) , which is due to be updated in 2021, will review international evidence on the extent to which these interventions reduce youth reoffending.

⁴¹ The interventions listed as out of scope below are predominantly identified as secondary or tertiary prevention and have thus been deemed out of scope. For more information regarding primary prevention, see [ScotPHN \(2019\) Violence Prevention Framework](#).

Policy change and interventions seeking to address macro-social determinants of youth violence (e.g. poverty and social inequalities)	<p><i>Evidence base out of scope</i></p> <p>These approaches are beyond the scope of this report. Due to the availability of evidence, we have limited the scope to focus on individual, relationship, and community-level interventions. Whilst society level risk and protective factors such as these are important, they are not amenable to the same type of evaluation/evidence base as the interventions and programmes that have been included in this report. As such, these approaches are not explored within the context of this report.</p>
Intervention cost and cost effectiveness	
Cost and cost effectiveness	<p><i>Evidence base out of scope</i></p> <p>cost and cost effectiveness have not been covered within this report due to limited available evidence</p>
Interventions aimed at those already involved in violence	
Therapeutic approaches	<p><i>Topic out of scope</i></p> <p>Therapeutic programmes include those that involve cognitive and behavioural therapy-based techniques which aim to reduce symptoms of mental health and behavioural challenges (and in some cases improve family functioning (e.g. functional family therapy, trauma-focused therapy-based programmes and multi-systemic therapy)). As this report focuses on prevention-focused interventions, and evaluation research has concentrated on the impact of therapeutic programmes on young people with a history of engaging in violence, interventions that take this approach are out of scope. However, the What Works to Reduce Re-Offending (2015), which is due to be updated in 2021, will review the international evidence on the extent to which these programmes reduce reoffending.</p>
Vocational training	<p><i>Topic out of scope</i></p> <p>Vocational training involves offering young people, who have a history of violence involvement, the opportunity to acquire technical, trade or supervisory knowledge and skills (WHO, 2010:40). As this report focuses on pre-criminal justice and prevention-focused intervention, programmes that involve vocational training are out of scope. However, the What</p>

	Works to Reduce Re-Offending (2015) report, which is due to be updated in 2021, will review the international evidence on the extent to which vocational training reduces reoffending.
Hospital-based programmes	<i>Topic out of scope</i> Hospital-based programmes can provide the opportunity to intervene where young people have been injured through their involvement in violence. As this report focuses on pre-criminal and prevention-focused interventions, hospital-based programmes aimed at those with a history of being involved in violence are out of scope. However, the What Works to Reduce Re-Offending (2015) , which is due to be updated in 2021, will review the international evidence on the extent to which programmes implemented within the context of hospital reduce reoffending.
Deterrence/discipline-based programmes for those already involved in violence	<i>Topic out of scope</i> Deterrence and discipline-based approaches are based on confrontation, discipline, and control that aim to deter young people from re-offending (e.g. military-style boot camps). As this report focuses on pre-criminal justice and prevention-focused interventions, programmes that take this approach are out of scope. However, the What Works to Reduce Re-Offending (2015) report which is due to be updated in 2021, will review the international evidence on the extent to which deterrence and discipline-based programmes reduce reoffending.
Response and support services	
Interventions designed to support young people who are victims of violence	<i>Topic out of scope</i> Given a focus on preventing violence before it happens, intervention focused on supporting young people who are victims of youth violence are out of scope. Although victimisation is a predictor of violence perpetration in youth, limited evidence has examined the effectiveness of this approach to preventing youth violence. As such, this approach is not explored in this report.
Additional interventions out of scope	
Community and problem	<i>Evidence out of scope</i>

oriented policing	<p>Whilst research has investigated the impact of community and problem oriented policing on violence outcomes more broadly, there is limited evidence relating to the impact of this intervention specifically on youth violence or violent crime in young people. As such, this approach is not explored in this report.</p>
Addressing the harmful impact of alcohol and drugs	<p><i>Topic out of scope</i></p> <p>While an important facilitator of perpetrator use of violence, interventions relating to harmful use of alcohol and substances have been deemed out of scope within this report</p>

References

Baldry, A. C., & Farrington, D. P. (2007). Effectiveness of programs to prevent school bullying. *Victims and Offenders*, 2(2), 183–204

Batchelor, S. Armstrong, S. and MacLellan, D. (2019) Taking Stock of Violence in Scotland. Glasgow: SCCJR.

Bellis, M. A., Hughes, K., Perkins, C., & Bennett, A. (2012). Protecting people, promoting health: a public health approach to violence prevention for England. *Public Health England*.

Bellis, M. A. (2017). Preventing violence, promoting peace: a policy toolkit for preventing interpersonal, collective and extremist violence. *Commonwealth Secretariat*

Breitenstein, S. M., Gross, D., Garvey, C. A., Hill, C., Fogg, L., & Resnick, B. (2010). *Implementation fidelity in community-based interventions*. *Research in nursing & health*, 33(2), 164-173.

Botvin, G. J., Griffin, K. W., & Nichols, T. D. (2006). Preventing youth violence and delinquency through a universal school-based prevention approach. *Prevention science*, 7(4), 403-408.

Bowles, T., Jimerson, S., Haddock, A., Nolan, J., Jablonski, S., Czub, M., & Coelho, V. (2017). A review of the provision of social and emotional learning in Australia, the United States, Poland, and Portugal. *Journal of Relationships Research*, 8.

Brisson, J., Pekelny, I., & Ungar, M. (2020). Methodological strategies for evaluating youth gang prevention programs. *Evaluation and program planning*, 79, 101747.

Campbell, M. (2019). Specific interventions against cyberbullying. *Making an impact on school bullying: Interventions and recommendations (Routledge Psychological Impacts)*, 176-201.

Clarkson, S., Charles, J. M., Saville, C. W., Bjornstad, G. J., & Hutchings, J. (2019). Introducing KiVa school-based antibullying programme to the UK: A preliminary examination of effectiveness and programme cost. *School psychology international*, 40(4), 347-365.

Clarke, A. M., Morreale, S., Field, C. A., Hussein, Y., & Barry, M. M. (2015). What works in enhancing social and emotional skills development during childhood and adolescence. A review of the evidence on the effectiveness of school-based and out-of-school programmes in the UK. A report produced by the World Health Organization Collaborating Centre for Health Promotion Research, National University of Ireland Galway.

- Clarkson, S., Charles, J. M., Saville, C. W., Bjornstad, G. J., & Hutchings, J. (2019). Introducing KiVa school-based antibullying programme to the UK: A preliminary examination of effectiveness and programme cost. *School psychology international*, 40(4), 347-365.
- Cleaver, K., Maras, P., Oram, C., McCallum, K. (2019): A review of UK based multi-agency approaches to early intervention in domestic abuse: Lessons to be learnt from existing evaluation studies, *Aggression and Violent Behavior*, 46, 140-155 <https://doi.org/10.1016/j.avb.2019.02.005>
- Cohen, R. I. S., & Bosk, E. A. (2020). Vulnerable youth and the COVID-19 pandemic. *Pediatrics*, 146(1).
- Crow, I. (2004). *Does Communities That Care work?: An evaluation of a community-based risk prevention programme in three neighbourhoods*. Joseph Rowntree Foundation.
- David-Ferdon, C., & Simon, T. R. (2014). Preventing Youth Violence: Opportunities for Action. *Centers for Disease Control and Prevention*.
- David-Ferdon, C., Vivolo-Kantor, A. M., Dahlberg, L. L., Marshall, K. J., Rainford, N., & Hall, J. E. (2016). A comprehensive technical package for the prevention of youth violence and associated risk behaviors.
- De La Rue, L., Polanin, J. R., Espelage, D. L., & Pigott, T. D. (2017). A meta-analysis of school-based interventions aimed to prevent or reduce violence in teen dating relationships. *Review of Educational Research*, 87(1), 7–34
- De Koker, P., Mathews, C., Zuch, M., Bastien, S., & Mason-Jones, A. J. (2014). A systematic review of interventions for preventing adolescent intimate partner violence. *Journal of Adolescent Health*, 54(1), 3–13.
- Dishion, T. J., McCord, J., & Poulin, F. (1999). When interventions harm: Peer groups and problem behavior. *American psychologist*, 54(9), 755.
- Eriksen, S. (2015): 'Programme Evaluation: The Mentors in Violence Prevention Leadership Training at California State University, Long Beach. <http://www.mvpstrat.com/wp-content/uploads/2016/03/program-evaluation-report-sje-december-2015.pdf> (accessed 08.07.019)
- Esbensen, F. A., Peterson, D., Taylor, T. J., & Osgood, D. W. (2012). Results from a multi-site evaluation of the GREAT program. *Justice Quarterly*, 29(1), 125-151.
- Fagan, A. A., & Catalano, R. F. (2013). What works in youth violence prevention: A review of the literature. *Research on social work practice*, 23(2), 141-156.

Faggiano, F., Allara, E., Giannotta, F., Molinar, R., Sumnall, H., Wiers, R., ... & Conrod, P. (2014). Europe needs a central, transparent, and evidence-based approval process for behavioural prevention interventions. *PLoS Med*, 11(10), e1001740.

Farrington, D. P. (2007). Childhood risk factors and risk-focused prevention. *The Oxford handbook of criminology*, 4, 602-640.

Fellmeth, G. L. T., Heffernan, C., Nurse, J., Habibula, S., & Sethi, D. Campbell Collaboration. (2013). Educational and skills-based interventions for preventing relationship and dating violence in adolescents and young adults. A systematic review. *Campbell Systematic Reviews* 2013:14 (ED557997). ERIC.

<https://eric.ed.gov/contentdelivery/servlet/ERICServlet?accno¼ED557997>

Fox, C.L., Hale, R., Gadd, D. (2014): 'Domestic abuse prevention education: listening to the views of young people', *Sex Education*, 14(1), 28-41

Fulu, E., Kerr-Wilson, A., and Lang, J. (2014). What works to prevent violence against women and girls? Evidence review of interventions to prevent violence against women and girls, Annex F. Accessed from: <https://www.gov.uk/dfid-research-outputs/a-summary-of-the-evidence-and-research-agenda-for-what-works-a-global-programme-to-prevent-violence-against-women-and-girls>

Gaffney, H., Farrington, D. P., Espelage, D. L., & Ttofi, M. M. (2019a). Are cyberbullying intervention and prevention programs effective? A systematic and meta-analytical review. *Aggression and violent behavior*, 45, 134-153.

Gaffney, H., Farrington, D. P., & Ttofi, M. M. (2019b). Examining the effectiveness of school-bullying intervention programs globally: a meta-analysis. *International Journal of Bullying Prevention*, 1(1), 14-31.

Gainsbury, A. N., Fenton, R. A., & Jones, C. A. (2020). From campus to communities: evaluation of the first UK-based bystander programme for the prevention of domestic violence and abuse in general communities. *BMC public health*, 20, 1-11.

Goldschmidt, P., Huang, D., & Chinen, M. (2007). The long-term effects of after-school programming on educational adjustment and juvenile crime: A study of the LA's BEST after-school program. National Center for Research on Evaluation, Standards, and Student Testing and University of California Los Angeles, 5.

Gravel, J., Bouchard, M., Descormiers, K., Wong, J. S., & Morselli, C. (2013). Keeping promises: A systematic review and a new classification of gang control strategies. *Journal of Criminal Justice*, 41(4), 228-242.

Green, B. L., Ayoub, C., Bartlett, J. D., Von Ende, A., Furrer, C., Chazan-Cohen, R., ... & Klevens, J. (2014). The effect of Early Head Start on child welfare system involvement: A first look at longitudinal child maltreatment outcomes. *Children and Youth Services Review*, 42, 127-135.

Grossman, J. B., & Tierney, J. P. (1998). Does mentoring work? An impact study of the Big Brothers Big Sisters program. *Evaluation review*, 22(3), 403-426.

Hawkins JD et al. Preventing adolescent health-risk behaviours by strengthening protection during childhood. *Archives of Pediatrics and Adolescent Medicine*, 1999, 153:226-234.

Hawkins, J. D., Oesterle, S., Brown, E. C., Monahan, K. C., Abbott, R. D., Arthur, M. W., & Catalano, R. F. (2012). Sustained decreases in risk exposure and youth problem behaviors after installation of the Communities That Care prevention system in a randomized trial. *Archives of Pediatrics & Adolescent Medicine*, 166(2), 141-148.

Home Office (2013). *Preventing youth violence and gang involvement*.

Home Office (2018). *Serious Violence Strategy*.

Howard, K. A., Flora, J., & Griffin, M. (1999). Violence-prevention programs in schools: State of the science and implications for future research. *Applied and Preventive Psychology*, 8(3), 197–215.

Irwin-Rogers, K., Muthoo, A., & Billingham, L. (2020) *Youth Violence Commission Final Report*.

Jimerson, S.R., Nickerson, A.B., Mayer, M.J., & Furlong, M.J. (Eds.). (2012). *Handbook of school violence and school safety: International research and practice* (2nd ed.). New York, NY: Routledge.

Jimerson, S.R., Swearer, S.M., & Espelage, D.L. (Eds.). (2010). *The handbook of bullying in schools: An international perspective*. New York, NY: Routledge

Jimerson, S.R., Burns, M.K., & VanDerHeyden, A.M. (2016). *Handbook of response to intervention: The science and practice of multi-tiered systems of support*. Springer Science & Business Media

Jones, L., , Lewis, C., Ubido, J., Hefferon, C., Baird, S., McAteer, S., & Watson, J. (2020) *Direct and indirect impacts of COVID-19 on health and wellbeing*

Kärnä, A., Voeten, M., Little, T. D., Poskiparta, E., Kaljonen, A., & Salmivalli, C. (2011). A large-scale evaluation of the KiVa antibullying program: Grades 4–6. *Child development*, 82(1), 311-330.

Kärnä, A., Voeten, M., Little, T. D., Poskiparta, E., Alanen, E., & Salmivalli, C. (2011). Going to scale: A nonrandomized nationwide trial of the KiVa antibullying program for grades 1–9. *Journal of Consulting and Clinical Psychology*, 79(6), 796.

Kovalenko, A. G., Abraham, C., Graham-Rowe, E., Levine, M., & O'Dwyer, S. (2020). What Works in Violence Prevention Among Young People?: A Systematic Review of Reviews. *Trauma, Violence, & Abuse*, 1524838020939130.

Lester, S., Lawrence, C., & Ward, C. L. (2017). What do we know about preventing school violence? A systematic review of systematic reviews. *Psychology, Health & Medicine*, 22(sup1), 187-223.

Limber, S. P., Olweus, D., Wang, W., Masiello, M., & Breivik, K. (2018). Evaluation of the Olweus Bullying Prevention Program: A large scale study of US students in grades 3–11. *Journal of school psychology*, 69, 56-72.

Lipsey, M. W. (2009). The primary factors that characterize effective interventions with juvenile offenders: A meta-analytic overview. *Victims and Offenders*, 4(2), 124–147.

Local Government Association. (2018). Public health approaches to reducing violence.

Love, J. M., Kisker, E. E., Ross, C., Raikes, H., Constantine, J., Boller, K., ... & Fuligni, A. S. (2005). The effectiveness of early head start for 3-year-old children and their parents: lessons for policy and programs. *Developmental psychology*, 41(6), 885.

Lundgren, R. and Amin, A. (2015): 'Addressing Intimate Partner Violence and Sexual Violence Among Adolescents: Emerging Evidence of Effectiveness', *Journal of Adolescent Health*, 56, 542-550

McMahon, S., & Belur, J. (2013). Sports-based programmes and reducing youth violence and crime. London: Project Oracle.

Melhuish, E. , Phan, M. , Sylva, K. , Sammons, P. , Siraj-Blatchford, I. , & Taggart, B. (2008). Effects of the home learning environment and preschool center experience upon literacy and numeracy development in early primary school. *Journal of Social Issues* , 64(1), 95–114. doi:10.1111/j.1540-4560.2008.00550.x

Mihalic, S., Irwin, K., Elliott, D., Fagan, A., & Hansen, D. (2001). Blueprints for Violence Prevention. *Juvenile Justice Bulletin*.

- Nocentini, A., & Menesini, E. (2016). KiVa anti-bullying program in Italy: Evidence of effectiveness in a randomized control trial. *Prevention science*, 17(8), 1012-1023.
- Niolon, P. H., Vivolo-Kantor, A. M., Tracy, A. J., Latzman, N. E., Little, T. D., DeGue, S., ... & Tharp, A. T. (2019). An RCT of dating matters: Effects on teen dating violence and relationship behaviors. *American journal of preventive medicine*, 57(1), 13-23.
- Nocentini, A., Zambuto, V., & Menesini, E. (2015). Anti-bullying programs and information and communication technologies (ICTs): A systematic review. *Aggression and Violent Behavior*, 23, 52–60.
- O'Connor, R. M., & Waddell, S. (2015). What works to prevent gang involvement, youth violence and crime. A Rapid Review of Interventions Delivered in the UK and Abroad, Early Intervention Foundation, London.
- O'Connor, R. M., & Waddell, S. (2015). Preventing gang involvement and youth violence. Advice for those commissioning mentoring programmes, Early Intervention Foundation, London.
- Olweus, D., & Limber, S. P. (2010). Bullying in school: evaluation and dissemination of the Olweus Bullying Prevention Program. *American journal of Orthopsychiatry*, 80(1), 124.
- Olweus, D., Limber, S. P., & Breivik, K. (2019). Addressing specific forms of bullying: A large-scale evaluation of the Olweus bullying prevention program. *International Journal of Bullying Prevention*, 1(1), 70-84.
- Petrosino, A., Turpin-Petrosino, C., Hollis-Peel, M. E., & Lavenberg, J. G. (2013). 'Scared Straight 'and other juvenile awareness programs for preventing juvenile delinquency. *Cochrane database of systematic reviews*, (4).
- Polanin, J. R., Espelage, D. L., & Pigott, T. D. (2012). A metaanalysis of school-based bullying prevention programs' effects on bystander intervention behavior. *School Psychology Review*, 41(1), 47–65.
- Powell, A. (2011) Review of Bystander Approaches in Support of Preventing Violence Against Women [online]. Victoria, New South Wales: Victoria Health Promotion Foundation. Publication P-052-V B.
- Public Health England (2019). Approaches to prevent or reduce violence with a focus on youth, knife and gang-related violence. *PHE Publications*.
- Reynolds, A. J., Temple, J. A., White. B. A. B., Ou, S., & Robertson, D. L. (2011). Age-26 cost-benefit analysis of the Child-Parent Early Education Program. *Child Development*, 82(1), 379-404

Reynolds, A.J., Temple, J.A., Ou, S.R. et al. (2007), 'Effects of a school-based, early childhood intervention on adult health and well-being', *Archives of Paediatric and Adolescent Medicine*, Vol. 161, 730–39.

Robson, L.S., Shannon, H.S., Goldenhar, L.M., & Hale, A.R. (2001). Guide to evaluating the effectiveness of strategies for preventing work injuries: How to show whether a safety intervention really works.

<http://ssmon.chb.kth.se/safebk/safetybk.pdf>

Saarento, S., Boulton, A. J., & Salmivalli, C. (2015). Reducing bullying and victimization: Student-and classroom-level mechanisms of change. *Journal of abnormal child psychology*, 43(1), 61-76.

Salmivalli, C., Kärnä, A., & Poskiparta, E. (2011). Counteracting bullying in Finland: The KiVa program and its effects on different forms of being bullied. *International Journal of Behavioral Development*, 35(5), 405-411.

Scottish Government. (2015). What Works to Reduce Reoffending: A Summary of the Evidence.

ScotPHN report (June, 2019): 'Violence Prevention Framework' – <https://www.scotphn.net/wp-content/uploads/2018/09/Violence-Prevention-Framework.pdf>

Stoto, M.A., & Cosler, E. (2008). Evaluation of public health interventions. In L.F. Novick, C.B. Morrow, & G.P. Mays (Eds.), *Public health administration: Principles for populationbased management* (pp. 495–544) (2nd ed.). London: Jones and Bartlett Publishers

Ttofi, M. M., & Farrington, D. P. (2011). Effectiveness of school-based programs to reduce bullying: A systematic and meta-analytic review. *Journal of Experimental Criminology*, 7(1), 27–56.

Vreeman, R. C., & Carroll, A. E. (2007). A systematic review of school-based interventions to prevent bullying. *Archives of Pediatrics & Adolescent Medicine*, 161(1), 78–88.

Whitaker, D. J., Murphy, C. M., Eckhardt, C. I., Hodges, A. E., & Cowart, M. (2013). Effectiveness of primary prevention efforts for intimate partner violence. Special Issue: The Partner Abuse State of Knowledge Project Part 5, 4(2), 175–195.

White, Jane. "Addressing school violence and bullying: Evidence review." (2019).

Williams, D. J., Currie, D., Linden, W., & Donnelly, P. D. (2014). Addressing gang-related violence in Glasgow: A preliminary pragmatic quasi-experimental

evaluation of the Community Initiative to Reduce Violence (CIRV). *Aggression and violent behavior*, 19(6), 686-691.

Williams, D. J., & Neville, F. G. (2017). Qualitative evaluation of the mentors in violence prevention pilot in Scottish high schools. *Psychology of violence*, 7(2), 213.

World Health Organisation (2002): World Report on Violence and Health, Report 6: Sexual Violence.

World Health Organization. (2009). Preventing violence by developing life skills in children and adolescents.

World Health Organization. (2010a). Violence prevention: the evidence.

World Health Organisation (2010b.): Preventing intimate partner violence and sexual violence against women.

World Health Organization (2013). Preventing violence: Evaluating outcomes of parenting programmes.

World Health Organization. (2015). Preventing youth violence: an overview of the evidence.

World Health Organization. (2016). INSPIRE: seven strategies for ending violence against children. World Health Organization.

World Health Organization. (2019). School-based violence prevention: a practical handbook.

World Health Organization (2020). Youth Violence: Key Facts. Available at: <https://www.who.int/news-room/fact-sheets/detail/youth-violence>

Zych, I., Ortega-Ruiz, R., & Del Rey, R. (2015). Systematic review of theoretical studies on bullying and cyberbullying: Facts, knowledge, prevention, and intervention. *Aggression and Violent Behavior*, 23, 1-21.



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The Scottish Government
St Andrew's House
Edinburgh
EH1 3DG

ISBN: 978-1-80004-639-9 (web only)

Published by The Scottish Government, February 2021

Produced for The Scottish Government by APS Group Scotland, 21 Tennant Street, Edinburgh EH6 5NA
PPDAS816446 (02/21)

W W W . g o v . s c o t