



Contents lists available at [ScienceDirect](#)

Child Abuse & Neglect



Youth exposure to violence prevention programs in a national sample[☆]

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ARTICLE INFO

Article history:

Received 10 October 2013
Received in revised form 17 January 2014
Accepted 21 January 2014
Available online xxx

Keywords:

Bullying
Crime
Victimization
Sexual assault
Dating violence

ABSTRACT

This paper assesses how many children and youth have had exposure to programs aimed at preventing various kinds of violence perpetration and victimization. Based on a national sample of children 5–17, 65% had ever been exposed to a violence prevention program, 55% in the past year. Most respondents (71%) rated the programs as very or somewhat helpful. Younger children (5–9) who had been exposed to higher quality prevention programs had lower levels of peer victimization and perpetration. But the association did not apply to older youth or youth exposed to lower quality programs. Disclosure to authorities was also more common for children with higher quality program exposure who had experienced peer victimizations or conventional crime victimizations. The findings are consistent with possible benefits from violence prevention education programs. However, they also suggest that too few programs currently include efficacious components.

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What is known on this topic?

- Many schools profess to use violence prevention programs. Evaluations have shown some such programs to be effective.

What this study adds

- This study provides some of the first national data on how many children actually were exposed to prevention programs. It also reveals how they react to the programs.

Introduction

Youth violence prevention has been a major public policy initiative in the United States for at least a generation. Hundreds of educational prevention programs have been developed, with a wide variety of targets including dating violence, sexual assault, bullying, and gang violence. They include locally developed efforts and curricula designed and disseminated

[☆] For the purposes of compliance with Section 507 of PL 104–208 (the “Stevens Amendment”), readers are advised that 100% of the funds for this program are derived from federal sources, (this project was supported by Grant Nos. 2006-JW-BX-0003 and 2009-JW-BX-0018 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, US Department of Justice). The total amount of federal funding involved is \$2,848,809. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the US Department of Justice. The authors have no financial relationships relevant to this article to disclose.

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by national research and development operations, such as the Olweus Bullying Prevention Program (Olweus & Limber, 2010) (http://www.violencepreventionworks.org/public/olweus_bullying_prevention_program.page) and Steps to Respect (<http://www.cfchildren.org/steps-to-respect.aspx>). Many research studies and meta-analyses have also been conducted to assess the value of such programs and guide their development (Hahn et al., 2007a, 2007b; Park-Higgerson, Perumean-Chaney, Bartolucci, Grimley, & Singh, 2008; Wilson & Lipsey, 2007; Wilson, Lipsey, & Derzon, 2003). Overall, they have shown that programs *can* reduce violence and aggression, but that many do not (Mytton, DiGuseppi, Gough, Taylor, & Logan, 2002; Tfofi & Farrington, 2011). A consensus has developed that in order to be effective, such programs need to have certain components such as adequate dosage, multiple components, varied teaching methods, and opportunities to practice (Cooper, Lutenbacher, & Faccia, 2000; Dusenbury, Brannigan, Falco, & Hansen, 2003; Jones, 2012; Nation et al., 2003).

In spite of the large violence prevention mobilization and indications of effectiveness, there are reasons to think that program dissemination has stalled. Schools, which are the venue for much prevention, have been challenged in recent years by budget cuts and mandates to improve learning outcomes in the conventional curriculum, leading them to abandon prevention programs (Ahmed-Ullah, 2012; National School Safety and Security Services, 2010).

There has been little formal monitoring of how many schools and communities make prevention programs available or how many children are exposed to such programs. In the early 2000s, the U.S. Department of Education commissioned a systematic study that found that violence prevention curricula were present in 75% of middle schools, 71% of high schools, and 56% of elementary schools (Cantor et al., 2001; U.S. Department of Education, 2011). However, the report noted a dearth of information about whether some programs are more effective than others and whether certain program characteristics lead to effective outcomes.

Collecting information from schools is one way of tracking prevention efforts, but querying students and families about their experiences with prevention programs is another crucial component. We had the opportunity to assess children's exposure to prevention programming as part of a national survey on children's exposure to violence. This paper reports the findings.

Methods

Participants

The National Survey of Children's Exposure to Violence II (NatSCEV II) is a "non-experimental" study designed to obtain up-to-date incidence and prevalence estimates of a wide range of childhood exposure to violence and related risk factors. It consisted of a national sample of 4,503 children and youth ages one month to 17 years in 2011. Study interviews were conducted over the phone by the employees of an experienced survey research firm. For this analysis, we used a subset of 3,391 children ages 5–17 for whom we had information on prevention programming exposure.

The primary foundation of the design was a nationwide sampling frame of residential telephone numbers from which a sample of telephone households was drawn by random digit dialing (RDD). Two additional samples were obtained in order to represent the growing number of households that rely entirely or mostly on cell-phones: a small national sample of cellular telephone numbers drawn from RDD methodology ($N = 31$), and an Address-Based Sample (ABS; $N = 750$). The ABS sample started with a national sample of addresses from the Postal Delivery Sequence File (DSF). These addresses were mailed a one page questionnaire. The ABS study sample was drawn from the pool of returned questionnaires that represented households with children 17 years old and younger. These households were then re-contacted by interviewers and asked to participate in the survey. Approximately one-half of the eligible households obtained through ABS were cell-phone-only households, and thus this method represented an effective way of including households without landlines in our sample.

Procedure

Respondents were promised complete confidentiality and were paid \$20 for their participation. The interviews, averaging 55 min in length, were conducted in either English or Spanish. Respondents who disclosed a situation of serious threat or ongoing victimization were re-contacted by a clinical member of the research team, trained in telephone crisis counseling, whose responsibility was to stay in contact with the respondent until the situation was appropriately addressed locally. All procedures were authorized by the Institutional Review Board of the University of New Hampshire. To begin, a short interview was conducted with an adult caregiver (usually a parent) to obtain family demographic information. One child was then randomly selected from all eligible children living in a household by selecting the child with the most recent birthday. If the selected child was 10–17 years old, the main telephone interview was conducted with the child. If the selected child was under age 10, the interview was conducted with the caregiver who "is most familiar with the child's daily routine and experiences." To address the possibility that caregivers might have systematically different levels of knowledge about prevention programs than youth themselves we examined rates of exposure to programming among 9-year-old children (oldest age of proxy reports) and 10-year-old children (youngest age of self-reports). Exposure in these two groups was similar, so we analyzed caregiver reports and youth self-reports together for the purposes of this paper, controlling for age and testing for interaction effects by age.

Response rates

The cooperation rate (the percentage of contacted respondents who completed the survey) and response rate (the percentage of all eligible respondents who completed the survey) averaged across collection modalities were 60% and 40%, respectively. More details about the methodology are available in [Finkelhor, Turner, Shattuck, and Hamby \(2013\)](#).

Measurement

Prevention programming. Respondents were asked if they (or their child) *ever* had any of five types of prevention programs and if so, whether the program had occurred in the past year. (It read: “Many schools or community programs teach kids about how to avoid becoming a victim of violence. (Has your child/have you) ever been to a program about any of the following?”). Questions were presented about bullying, violence avoidance, sexual assault, and avoiding gangs if children were over the age of five. Only children over the age of 12 were asked about exposure to prevention programs on dating violence. Respondents were also asked about characteristics and helpfulness of the most recent prevention program they (or their child) attended. A full list of the prevention questions can be found in [Appendix A](#).

A *higher quality* program variable was computed using the following characteristics: sent home information to parents, asked parents to come to meetings, included role play within the classroom in programming, and programming lasted for more than one day. These elements have been deemed important to effective school based prevention ([Jones, 2012](#)), although the literature is not well-developed enough to deem all such elements essential for all ages and all subject matters. To create the higher quality program variable, we summed the four components (with a maximum score of 4), and then took the programs in the top quartile, which was the equivalent of programs with 3 or 4 of the higher quality program characteristics. The low quality group and the no-exposure-to-programming group were combined resulting in a variable comparing children who were exposed to high quality programs coded as 1 and children who were not exposed to any programs and children who were exposed to *low quality* prevention program, coded as 0. Responses to quality program variables that were *not sure* or *refused* (5.6% of program participants) were coded as not of high quality.

Victimization. Although the design of the study is cross sectional and not longitudinal, we were interested in whether past year victimization rates might be lower for children with prevention program exposure over their life course. The survey used an enhanced version of the Juvenile Victimization Questionnaire (JVQ) which obtains reports on 54 forms of offenses against youth that cover six general areas of concern: conventional crime, child maltreatment, peer and sibling victimization, sexual victimization, witnessing and indirect victimization, and Internet victimization. Follow-up questions for each screener item gathered additional information, including perpetrator characteristics, whether the event occurred in conjunction with another screener event, and whether the child disclosed the event to an adult. Specific wording of all victimization questions may be found in [Finkelhor et al. \(2013\)](#).

Peer/sibling victimization. Eight questions asking about specific victimizations by peers or siblings were combined into a single aggregate variable indicating whether the child or youth had experienced any peer/sibling victimization in the past year. The eight items asked about gang/group assault, peer/sibling assault, genital assault, physical intimidation, emotional victimization, dating violence, peer lies/rumors, and social exclusion.

Conventional crime. Nine items from the JVQ covering theft, robbery, vandalism, attempted assault, threatened assault, assault with a weapon, assault without a weapon, attempted kidnapping, and bias attack (based on skin color, religion, or disability) were combined to measure whether or not the child or youth had experienced a conventional crime in the last year.

Sexual victimization. Six items that asked about the child or youth's experience of sexual assault, rape (attempted or completed), flashing, and sexual harassment were combined into a single measure indicating whether or not the child or youth had experienced any sexual victimization in the past year.

Bullying perpetration. To measure peer aggression, we asked two questions that were aggregated into a single measure. The questions were: “In the last year did (you or your child) (1) pick on another kid by chasing or grabbing him or her by making him or her do something he or she didn't want to do? Or (2) try to scare or make another kid feel bad by calling him or her names, saying mean things to him or her, or saying (he/she/you) didn't want him or her around?”

Disclosure. Follow up questions to the JVQ asked if a caregiver, an adult at school (teacher, counselor, or other adult), or a police officer (or other law enforcement official) *knew about* the victimization. This could have happened because the child disclosed it or for some other reason such as direct observation by adults. Only children who experienced a specific type of victimization (e.g., peer victimization, conventional crime, or sexual victimization) in the past year were included in the analyses predicting disclosure of that victimization type. Because caregivers were proxies for children under the age of 10, analyses on disclosures to parents were only performed on children 10–17. For this paper, disclosures to an adult at school or to police are treated as “known to authorities” and are analyzed separately from disclosures to parents.

Data analysis

The data analysis proceeded in two phases beginning with exploratory analyses of prevention programs generally and exposure to prevention programs by age. We examined bi-variate differences using a Chi-square test for independence. The second phase consisted of multivariate logistic regressions predicting peer/sibling victimization, bullying perpetration,

Table 1
Descriptive information on exposure to prevention programs (weighted percent).

Program information	Ever	Past year
Among children 5–17 years old (<i>N</i> = 3,389)		
Any program	65	55
Program topic		
Bullying	55	45
Violence avoidance	43	35
Sexual assault	21	17
Avoiding gangs	27	21
Among children 12–17 years old (<i>N</i> = 1,820)		
Dating violence	32	25

Note. *N*'s are unweighted and percentages are weighted.

disclosure to parents about peer victimization, and disclosure to authorities about peer victimization and conventional crime. All multivariate analyses controlled for age, race, gender, SES, family structure, geographical location, witnessing/indirect victimizations occurring at home, in the community, and at school.

Data analysis weighting

The weighting plan for the survey was a multistage sequential process of weighting the sample to correct for study design and demographic variations in nonresponse. Specifically, weights were applied to adjust for (a) differing probabilities of household selection based on sampling frames; (b) variations in within-household selection resulting from different numbers of eligible children across households; and (c) differences in sample proportions according to gender, age, race/ethnicity, income, census region, number of adults and children in household, and phone status (cell only, mostly cell, other) relative to the 2010 American Community Survey Public Use Microdata Sample.

Results

Sixty-five percent of the school age children (5–17) had ever been exposed to a violence prevention program, 55% in the past year (Table 1). Bullying was the most frequent of the five most common topics of such programs, with 55% of children and youth having experienced a bullying prevention program. Twenty-one percent had been exposed to sexual assault prevention programming. About a third had been exposed to dating violence prevention.

Based on information from children's most recent program exposure (Table 2), a majority of the programs (59%) involved single day, not multi-day curricula. Most (72%) gave youngsters information to take home and 64% of children discussed the program with parents. However, only 40% gave children the opportunity to practice skills, and only 18% invited parents to come in for a meeting about the program. Large percentages of the programs covered healthy and respectful relationships, warning signs for dangerous situations, and ways of resolving conflict. The most widespread content was the exhortation to tell an adult (88%).

We ranked program quality on the basis of four criteria considered important to prevention education including multi-day presentations, practice opportunities, information to take home, and meeting for parents. Twenty five percent of respondents who were exposed to programming described programs that included three out of four quality components, meaning that 15.7% of the total sample of children ages five and older reported being exposed to a high quality program.

Most respondents rated the programs as *very* (39%) or *somewhat* (32%) helpful (Table 2). Most said there was at least some new information in the program. Over a third (37%) of program exposed children said they could think of a time they decided to tell an adult something "because of what they learned in the program". Close to half (45%) could think of a time they used program information to help themselves or a friend. The higher quality programs were rated as more helpful and were more often used to help themselves or a friend. Results showing differences in ratings of helpfulness and amount of information gained for high quality programs relative to low quality are not shown.

There were some developmental differences in exposure to prevention programming. Fewer 5–9 year olds than older children were exposed to programs, and that was particularly true for sexual victimization content (Table 3 and Fig. 1). Exposure to bullying programs and violence avoidance and gang programs, tended to peak around age 13, but sexual assault content exposure continued to increase for older adolescents. Youth ages 15–17 were exposed to fewer higher quality programs and were less likely to: discuss their program at home, describe the program as very helpful, say there was new information, tell an adult as a result of the program, or say that the information helped them in some situation.

We ran multivariate analyses to ascertain whether lifetime program exposure was associated with any reduction of victimization or aggression in the past year and whether it increased the likelihood of disclosure. Because exposure to prevention programs was more common for youth exposed to more violence and because program exposure may create

Table 2
 Content and detail of most recent program.

Program content and details	Weighted % (N= 2,320)
High quality program ^a top 25th percentile	25
Length of program	
One day	59
Few days	17
Few weeks	13
Once a month	10
Give information to take home	72
Child discussed program at home	64
Practice role play	40
Parents come in for a meeting	18
Healthy and respectful relationships	73
Warning signs of dangerous situations	78
Conflict resolution/peer mediation	71
Good touch/bad touch	57
Tell an adult if child had a problem	88
Respondent reaction to most recent program	
Helpfulness of program	
Very	39
Somewhat	32
A little	21
Not helpful	9
New information learned	
No new	13
A little new	48
Most new	27
All new information	12
Told an adult something	37
Helped self or friend	
Self	7
Friend	16
Both, self and friend	22
No	55

^a Take home info, parent meeting, role play, and >one day.

sensitization effects to identifying violence, we controlled for children’s reports of witnessing/indirect victimization in addition to other environmental risk factors. We reasoned that witnessing and indirect exposure to victimization would help to control for the level of exposure to violence in the environment and perhaps also respondents’ sensitivity to perceptions of violence. Because of the cross sectional design of the study, however, we could not insure that all past-year victimizations occurred after program exposure.

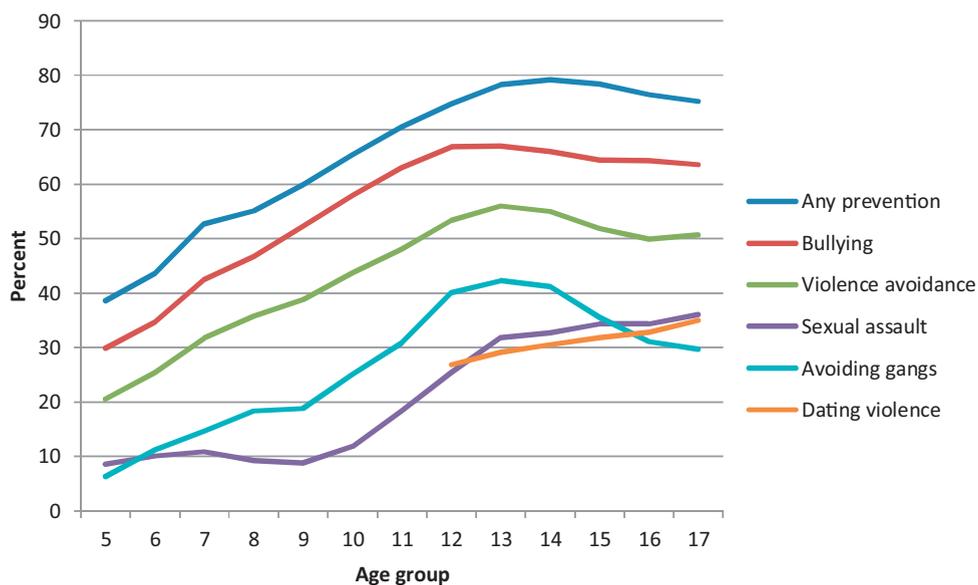


Fig. 1. Percent of youth in each age group exposed to prevention programs.

Table 3
 Prevention programs by age group (weighted percentages).

Program	Age group					
	Ever			Past year		
	5–9	10–14	15–17	5–9	10–14	15–17
Among children ages 5–17 (N=3,389)						
Any program***	47	74	77	45	64	55
Bullying***	39	64	64	38	53	43
Violence avoidance***	29	52	50	28	44	34
Sexual assault***	9	25	34	7	20	26
Avoiding gangs***	14	36	31	13	29	21
Among children ages 12–17 (N=1,820)						
Dating violence ^a		29	33		25	25
Percent receiving content or having reaction ^{a,b} (N=2,320)						
High quality program [*]	24	28	19			
Child discussed program at home***	82	60	51			
Parents come in for a meeting***	23	19	11			
Healthy and respectful relationships [*]	75	69	77			
Warning signs of dangerous situations**	74	77	84			
Conflict resolution/peer mediation**	63	71	80			
Respondent reaction to most recent program						
Helpfulness of program**						
Very	41	43	30			
Somewhat	30	29	36			
A little	19	21	22			
Not helpful	10	7	12			
New information learned***						
No new	9	10	21			
A little new	46	47	51			
Most new	27	30	24			
All new information	18	13	5			
Told an adult something***	41	41	25			
Helped self or friend***						
Self	10	6	3			
Friend	9	19	18			
Both, self and friend	21	25	20			
No	60	50	59			

^a Only the prevention program characteristics that are significantly associated with age are presented in the second half of this table.

^b Among children 5–17 years old.

^{*} $p < .05$.

^{**} $p < .10$.

^{***} $p < .001$.

Table 4
 Victimization, perpetration and disclosure outcomes associated with high quality prevention (odds Ratios-[CI]).^a

	Peer/sibling victimization	Bullying perpetration	Disclosure to parent about peer victimization ^d	Disclosure to authority about peer victimization	Disclosure to authority about conventional crime
Ages 5–9 ^b	2.4*** [1.8–3.2]	1.9** [1.2–3.1]		2.1** [1.3–3.3]	1.4 [.8–2.2]
Ages 10–14	1.9*** [1.4–2.4]	.9 [.6–1.3]	1.2 [.8–1.8]	1.2 [.8–1.7]	.8 [.5–1.1]
High quality program	1.2 [.8–1.6]	1.3 [.8–2.1]	1.9 [†] [1.2–3.3]	1.5 [†] [1.0–2.3]	1.8** [1.2–2.7]
Ages 5–9 ^c × high quality program	.5 [†] [.3–.9]	.4 [†] [.2–1.0]			
R ²	.065	.053	.039	.038	.049

^a Odds ratios are adjusted controlling for race, gender, SES, family structure, geographical location, general level of violence in community, neighborhood, school, and within the family.

^b Age 15–17 is the reference category

^c Age 10–17 and low quality/no prevention program are the reference categories

^d Among 10–17 year olds only.

^{*} $p < .05$.

^{**} $p < .01$.

^{***} $p < .001$

[†] $p < 0.1$.

Only analyses with significant or near significant effects for program exposure (5 out of 8) are shown in Table 4. Young children (5–9) who were exposed to higher quality prevention programs at some point in their lifetime did experience a reduced rate of peer victimization in the past year, consistent with the idea that program exposure can reduce peer victimization, but this finding is also vulnerable to other explanations because of the cross-sectional design. There were no significant associations for older children (10–14 or 15–17), for programs in general (as opposed to higher quality programs), or for reductions in other kinds of victimization like sexual victimization or conventional crime (analyses not shown). The pattern for peer and sibling victimization was echoed in a similar finding about bullying perpetration, which, although only significant at the <.10 level and possibly due to chance, is worthy of mention in connection to the parallel finding on victimization. In both cases, higher quality prevention programs were associated with reductions among younger children but not among older children (10–14 or 15–17).

Higher quality programs were also associated with increased reporting to parents and authorities (Table 4). Older children (10–17) with higher quality programs were more likely to report peer victimization to parents. The effect, however, did not apply to conventional crime or sexual victimization (not shown). Children across the age spectrum (5–17) with higher quality programs were more likely to have their episode known to authorities (including school officials and police) and this applied to both peer victimization and conventional crime, but not sexual victimization.

Discussion

A majority of school age children in this national sample from 2011 had been exposed to a violence prevention program, including three-quarters of youth 10–17 years old. A majority rated their most recent program as helpful. Substantial percentages said they had told an adult about something (37%) as a result of the program or that they used program information to help themselves or a friend (45%).

The survey identified serious gaps in the prevention education landscape. First, substantially fewer elementary school age children (5–9) than older children were exposed to programs, even though there are signs that it is the younger group with whom the program may be most effective. Second, most of the programs were missing program features that are generally regarded as crucial for effectiveness (Luna & Finkelhor, 1998; Nation et al., 2003), particularly multiple lesson curricula and opportunities to practice the skills. Third, program content on sexual assault was not widespread, even though sexual assault is common, occurring to a quarter of 17 year old girls over the course of childhood according to an analysis of 3 national surveys (Finkelhor, Shattuck, Turner, & Hamby, in press). Fourth, there was a drop in the quality of programs for the oldest teens (15–17), and they rated the programs as less helpful than did younger children (Table 3). This finding may result from the lower quality of the programs or the fact that the content was repetitive for older youth.

Nonetheless, the findings about the possible positive effects of program exposure were encouraging. Peer victimization rates and bullying perpetration rates in the past year were lower for the younger children (ages 5–9) who had been exposed to higher quality programs in their lifetime. This effect was specific to peer victimization (and not other victimization) because it is the type of violence that was most targeted by programming. The finding was also specific to higher quality programs (the programs with elements found to be effective in evaluation studies), as one might expect. No reduction of victimization or aggression was found for older children, however, who were the recipients of more programs. The lack of findings for older children could reflect a number of factors. The older children seemed less positive about the programs they were exposed to, a possible sign of cynicism or less engaging programming. They may also be more entrenched in behavior patterns.

There were also findings consistent with the idea that program exposure can promote disclosure to parents and authorities. It was noteworthy that higher quality program exposure was associated with greater disclosure to authorities among children of all ages. Disclosure promotion is one of the most consistent messages across programs, so it is encouraging to find that this may be one outcome. Disclosure may reduce further offending and victimization by allowing parents and authorities to intervene. It may also increase the likelihood that help will be provided to victims to reduce the impact of victimization.

In spite of these encouraging findings, however, caution needs to be observed that this was not an experimental or longitudinal study, and thus was not well designed to look at effects. Moreover, the findings about the younger children were based on information obtained from caregivers, not from the youth themselves, so some method effect or other confounding variables may influence the results. For example, the correlation may in part be explained by parenting qualities, such as the level of attention parents pay to their children's lives, or the amount of child–parent communication that exists, rather than actual program content.

There are also other limitations. The information about program exposure may be unreliable because it asked parents and youth to recall this exposure over a considerable time period. We only collected program quality information about the most recent program; children might have had exposures to other programs of various qualities at other times. Also, in some cases, the program about which we obtained information may not have actually preceded the victimizations. This study was not experimental and so the association between program exposure and victimization is only suggestive. There could be some bias to these reports if respondents see some social desirability in appearing to be educated and informed.

Moreover, although this is a large national sample, there are some general limitations to telephone surveys of this sort. The majority of contacted respondents did not participate, and we have no way to independently confirm reliability or validity of questionnaire responses.

The best way to assess the effectiveness of programs is through continued experimental designs. However, additional population surveys of the current sort would be useful to ascertain whether the dissemination of high quality programs expands.

Conclusion

Given that evidence-based violence prevention programs exist, it was good to find that so many children and youth received some of this education. But the exposure is far from universal, and signs from this study suggest that quality programs are not the norm. Large percentages of children say the information is not helpful and have found no opportunity to use it. Nonetheless, evidence continues to accrue that program exposure may have benefits. Youth violence and victimization appear to have been declining in the last 20 years (Finkelhor, 2013), the time period in which much of this education mobilization has occurred. There are strong arguments for continuing to expand the exposure of young people to the most evidence-based of these programs in the years ahead. Given the pressure that schools are under, more effort needs to be made to present such material efficiently and effectively and integrate it well into the other curricular efforts.

Contributor's statement

Dr. Finkelhor conceptualized the study, selected instruments, drafted the initial manuscript, and approved the final manuscript. Dr. Vanderminden conducted the data analysis, wrote sections of the manuscript, constructed the tables, and approved the final manuscript. Dr. Turner conceptualized the study, selected instruments, edited the initial manuscript, and approved the final manuscript. Ms. Shattuck conducted the data analysis, and approved the final manuscript. Dr. Hamby conceptualized the study, selected instruments, and approved the final manuscript.

Conflict of interest statement

The authors have no conflicts of interest to disclose.

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Appendix A.

PP3. Many schools or community programs teach kids about how to avoid becoming a victim of violence. (Has your child/you ever been to a program about any of the following?)

PP3a. Bullying?

(Note: Response categories for questions 3a–6 are as follows)

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

PP3c. Dating violence?

PP3f. Avoiding gangs or getting in trouble with the law?

If “yes” to any programs

PP4b9. Give (your child/you) a chance to practice or role-play right in class?

PP3b. How to avoid violence or handle conflict?

PP3d. Sexual assault or rape prevention?

PP4b. Did this program. . .

PP4b1. Talk about conflict resolution, negotiation skills, or peer mediation?

PP4b2. Talk about how to have healthy or respectful relationships?

PP4b3. Describe warning signs of dangerous situations?

PP4b6. Talk about good touch and bad touch?

PP4b8. Teach (your child/you) to tell an adult if (they/you) have a problem?

PP4b11. Give (your child/you) any information to take home with (him/her/you)?

PP4b12. Ask (you/your parents) to come to a meeting?

PP5. Did this program happen on just one day, on a few days, for a few weeks, or once a month?

PP6. Did (your child/you) discuss the program at home with (you/your parents) or other adult you live with?

PP7. Would (your child/you) say this program was very helpful, somewhat helpful, a little helpful or not helpful?

- 1 very helpful
- 2 somewhat helpful
- 3 a little helpful
- 4 not helpful
- 5 (VOL) Not sure
- 6 (VOL) Refused

PP8. Would you say that the program taught you no new information, a little new information, mostly new information, or all new information?

- 1 no new information
- 2 a little new information
- 3 mostly new information
- 4 all new information
- 5 (VOL) Not sure
- 6 (VOL) Refused

PP9. Can you think of any time (your child/you) decided to tell an adult about something because of what (they/you) learned in this program?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

PP10. Can you think of any time when (your child/you) used this information to help (**himself/herself**/yourself) or a friend?

- 1 Yes, (**himself/herself**/myself)
- 2 Yes, a friend
- 3 Yes, both (**himself/herself**/myself) and a friend
- 4 No
- 5 (VOL) Not sure
- 6 (VOL) Refused