The Future of Research on Evidence-based Developmental Violence Prevention – Introduction*

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Abstract

Across Europe, there is an increasing demand for good evidence that can inform policies aimed at reducing violence against and among children and adolescents more effectively. However, there is still a paucity of high quality research on the effective prevention of bullying and violence, and researchers from different parts of Europe rarely discuss their findings. The focus section of this issue of the International Journal of Conflict and Violence therefore brings together work by prominent prevention scholars from across Europe. The contributions show that significant progress is being made. The following introduction presents ten recommendation about how prevention research could be further strengthened in Europe.

Across Europe, there is an increasing demand for good evidence that can inform policies aimed at reducing violence against and among children and adolescents more effectively. However, there are wide differences between countries in the extent to which research can support violence prevention. In some countries evidence-based principles have become an important basis for policy implementation. In others, the underlying principles of evidence-based prevention are hardly known among policy-makers.

Overall, significant progress has been made: Across Northern Europe, in particular, the past 10 years have seen increasing interest from policy makers in evidence-based prevention and intervention. In the UK, for example, the recent *Allen Report on Early Intervention* (Allen, 2011) – which makes a strong case for evidence-based early prevention of child maladjustments – demonstrates broad support for research-based strategies to promote children's development. Also, centres such as the *Centre for Evidence-Based Intervention* (Oxford), the *Centre for Evidence Based Early Intervention* (Bangor), the *National Evaluation of Sure Start* (Birkbeck College) or the *Centre of Experimental Criminology* (Cambridge) are home to some internationally recognized prevention research conducted in the UK. Also, major foundations such as the *Dartington Foundation* in England, *Atlantic Philanthropies* in Ireland, or the *Jacobs Foundation* in Switzerland have committed significant resources to supporting research on evidence-based prevention. Scandinavian countries, as so often, are moving considerably further. In Sweden, for example, the government has identified the dissemination of evidence-based research knowledge into mainstream services as a major challenge, and the Swedish government now considers evidence-based practice as an essential vehicle of improving the quality of care and services. Finally, there are encouraging signs of increased European co-operation: In 2001, the *European Crime Prevention Network* was founded, which is committed to identifying and disseminating good practice in crime prevention. Since 2006, the *Stockholm Symposium of Criminology* brings together policy-makers, practitioners and researchers with the goal of findings better ways of reducing violence and crime. And in 2009, almost 20 years after its American sister organisation, the *European Society of Prevention Research* was founded.

Despite the undeniable progress and the increasing interest amongst governments in understanding how violence prevention can be made to be more effective, there persist daunting challenges. To address some of these challenges the *Institute of Criminology at the University of Cambridge* organized a conference on 5 and 6 July 2011 on "Evidence-Based Prevention of Bullying and Youth Violence: European Innovations and Experiences". It was supported by the *European Science Foundation* and the *Jacobs Foundation*. Its purpose was to bring together senior and junior researchers, policy makers, and practitioners to present and discuss innovative research. Also, the conference aimed at identifying areas where progress is essential to provide policy makers at the European, the national and the local levels with better knowledge about how to support a positive child development and reduce the substantial harm resulting from violence and aggression.

1. WHAT IS THE ISSUE?

The perpetration of bullying and aggression by young people is a widespread problem in Europe. According to the 2005/6 *Health Behaviour of School-Aged Children* survey, which covers almost all countries of Europe, an average of 42% of 11-year olds and 35% of 15-year olds reported to have been involved in a physical fight at least once during the past 12 months (Currie et al., 2008). Aggressive behaviour can

have serious and long-term negative effects on young people's health and emotional well-being. For example, children and adolescents actively involved in bullying and violence are at a significantly greater risk of later problem behaviours such as substance abuse, academic failure, unemployment, criminal convictions, and early health problems (Fergusson, John Horwood, & Ridder, 2005; Loeber & Hay, 1997).

Violence is also an important source of suffering amongst the victims. According to the same *Health Behaviour of School-Aged Children* survey, 37% of 11-year olds and 27% of 15-year olds reported to have been the victim of bullying at least once over the past couple of months. Experiences of violent victimisation have been found to be associated with a range of negative effects. These include social withdrawal, academic difficulties, substance use, and anxiety and depressive symptoms in the future (Averdijk, Müller, Eisner, & Ribeaud, 2009; Ttofi, Farrington, Lösel, & Loeber, 2011).

Over the past 10 years, new forms of coercive and threatening behaviour have emerged while others may have declined: For example, cyber-bullying - threatening or hurtful behaviour towards the victim via electronic media - has become a serious problem in line with the increasing use of social media and mobile telephones (Perren et al., 2012; Slonje & Smith, 2008). Also, sexually coercive and offensive behaviours among adolescents are emerging as a pressing issue (Averdijk, Mueller-Johnson, & Eisner, 2011).

2. GENERAL PRINCIPLES OF EFFECTIVE PREVENTION

Due to the consistently high numbers of children and adolescents involved in violence, the negative consequences for victims and perpetrators, and the emergence of new manifestations of bullying and violence, the effective prevention of violence should be high on the agenda of European public health policy-makers. But what is needed to make the prevention of bullying and youth violence prevention in Europe more effective?

Overall, there is good evidence that violence and bullying can be prevented by identifying the risk and protective factors related to children, families, schools, and communities/society at large that contribute to, or impede, from bullying and violence.

Evidence-based prevention needs to be based on the correct identification of the causal risk factors and mechanisms that lead to bullying, violence, and aggressive behaviour, as well as the knowledge about the mechanisms that impede the manifestation of problem behaviours even if risk factors are present (i.e., protective factors). Prevention is likely to be effective if it reduces risk factors that cause bullying and aggressive behaviour and/or if it builds up protective factors (Coie et al., 1993). Recent research, in particular, has shifted away from the more traditional concern with risk factors to paying more attention to protective factors, and how a better understanding of protective factors can help to build resilience and inform prevention policy (Lösel & Farrington, 2012; Pardini, Loeber, Farrington, & Stouthamer–Loeber, 2012; Rutter, 2012).Table 1 gives examples for risk and protective factors at the level of the individual, family, school, and neighbourhood/society at large.

Table 1 Examples of Risk and Protective Factors Underlying Bullying and Violence

	Risk Factors	Protective Factors
Individual	Perinatal complications	Positive mood
	impulsivity	low irritability
	restlessness and irritability	emotion regulation skills
	low empathy	self efficacy
	social-cognitive biases	high academic achievement
	low academic achievement,	social competencies
	antisocial beliefs	
	alcohol and other drug use.	
Parents and Family	Child abuse and neglect	Parental support,
	poor parental monitoring	secure attachment and bonding,
	erratic parenting	intensive supervision
	partner conflict and separation,	parental disapproval of antisocial
	parental and sibling antisocial	behaviour
	behaviour.	
School and peers	Truancy	Positive teacher-child bonds
	poor teacher-child bond	academic motivation and success
	high school disorder	high school-level discipline and clear
	association with delinquent peers	rules
	negative school climate.	non-deviant best friends
		involvement in structured prosocial
		activities
Neighbourhood and society	Social inequality and deprivation.	High social cohesion and trust
		community involvement and access
		to social support

Note: See Lösel and Farrington (2012) for a more extensive discussion.

There is now widespread agreement amongst prevention specialists about the general principles that underlie effective prevention of aggression, bullying and violence across the life-course. These principles include (Allen, 2011; Eisner, Ribeaud, & Locher, 2009; Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002; World Health Organization, 2010):

1. The need to start prevention during the first years of the life of an individual by reducing risk factors and promoting protective factors during a time when humans have a high degree of plasticity ('start early in life').

2. The need to have developmentally adequate prevention strategies in place across the whole life course from contraception to adulthood ('developmentally adequate provision across the life course').

3. The principle of embedding violence prevention into a general public health strategy that aims at reducing a broad range of negative outcomes school dropout, teen pregnancy, substance abuse, delinquency and violence, unhealthy eating, and physical inactivity. These

behaviours share many risk factors and should hence be considered as elements of a larger prevention strategy ('a public health perspective').

4. The emphasis on the combination of universal, indicated and selective prevention so that the largest resources reach the children and adolescents with the greatest needs ('adapt intervention intensity to risk exposure').

5. The consideration of an socio-ecological model that recognizes the interplay of protective and risk factors at the levels of the individual, the family, the school, peers and leisure-time activities, the neighbourhood, and the wider social, cultural and political context ('an ecological perspective of multi-layered prevention').

6. An approach that integrates policy-making and research by using high-quality basic research to guide innovation in prevention programmes and strategies, by rigorously testing prevention strategies in methodologically sound outcome evaluations, and by working with governments and policy-makers to achieve real-world effects ('an evidence-based approach to policy change').

We believe that governments could achieve noticeable population-wide reductions in bullying and aggressive behaviour amongst children and adolescents by adopting an evidence-based prevention and intervention policy (Cartwright & Hardie, 2012). This requires close co-operation between local and national governments and prevention researchers. Currently many European countries do not have the requisite research capacity and the evidence base to provide effective support in their societies. In the following postulates, we propose ten domains where research is needed to contribute to more effective violence prevention.

3. TEN RECOMMENDATIONS FOR FUTURE PRIORITY AREAS

1. Expanding the Evidence Base

A move towards the more effective prevention of aggression and violence across the life-course requires efforts to expand the scientific evidence base of what works (Sherman, Farrington, Welsh, & MacKenzie, 2002). The creation of a better evidence-base should entail a staged process that includes small scale efficacy trials of innovations or adaptations, effectiveness trials of the most promising approaches, and large-scale field trials of programmes that are planned to be taken to scale. Despite progress over the past 20 years the current knowledge base is generally still thin in Europe (Lösel & Beelmann, 2003). Also, significant differences remain between European countries in the amount of research done.

More and better evaluation research to intervention is needed in order to create the knowledge basis required for achieving a major population-level reduction in youth violence. This demands a more coherent European financial and organisational support for high quality experimental research and the encouragement of collaborative work between academic institutions and practitioners. Also, systematic reviews for different types of preventive interventions suggest that more knowledge has been

accumulated in respect of short-term effects and effects found in relatively small efficacy trials (Lösel & Beelmann, 2003; Ttofi & Farrington, 2011). In contrast, there are several areas where the lack of studies is particularly acute. These include, for example, field trials that examine whether violence prevention programmes work under real life conditions and studies that examine long-term effects over months or even years (but see Little, Berruy, Morpeth, Axford, and Taylor, 2012; Salmivalli and Poskiparta, 2012).

2. Promoting Innovation in Programme Development

Progress in effective prevention depends on the development of interventions that reflect advances in basic and applied research. Over the past two decades many impulses for evidence-based prevention strategies such as parent training programmes, early support for at-risk mothers, and school-based social skills programmes, came to Europe from elsewhere. As a result, many evaluations conducted in Europe have examined whether existing products can be transferred into the European context (e.g. Hutchings, 2012). In contrast, few innovations in research-based prevention have been initiated in Europe (but see, e.g. Kärnä et al., 2011; Lösel & Stemmler, 2012).

Testing the transportability of interventions will remain important in the future. However, there is potential in Europe for developing new practices and programmes that have a better fit to the structure of social services, education, or cultural expectations of European societies. In particular, there is considerable scope for high-quality programmes across the full range of prevention strategies that suit the needs of local and national agencies across Europe. Specific funding should support collaborations between researchers, private partners, and service providers to develop innovative and research-based interventions for individuals, schools, families, and neighbourhoods. These interventions should be tailored to meet the needs of different systems of services, specific target groups, diverse group of children, with diverse manifestations of aggression and violence (Perren, et al., 2012).

3. A Better Link Between Basic and Applied Research

Preventive interventions are more likely to be effective if they are based on empirically validated models of the causation of violence. There is therefore an important link between basic research on the causes of youth violence and the development of more effective interventions (see Stokes, 1997). Too many preventive programmes in Europe are still implemented with no or at best a tenuous basis in developmental research. This increases the risk that significant economic resources are invested into ineffective programmes.

We believe that improved collaboration between basic research and applied prevention and evaluation research will result in a better knowledge basis for effective youth violence prevention. Examples where this potential is particularly clear include the preventive implications of the link between developmental neuroscience and aggression (Bradshaw, Goldweber, Fishbein, & Greenberg, 2012; Séguin, Nagin, Assaad, & Tremblay, 2004), the implications of research on social networks for group-based prevention (Salmivalli, Huttunen, & Lagerspetz, 1997), the lessons to be learned from research on moral development for violence prevention (Malti & Krettenauer, 2012), or the ways in which advances

in research on judgement and decision making can inform prevention strategies (Nagin, 2007; Wikström, Oberwittler, Treiber, & Hardie, 2012).

4. Evaluation of Embedded Practices and System Change

Much research on evidence-based prevention has examined the effects of standardized programmes that are added to an existing system. However, social services and education systems comprise many activities with a preventative purpose (Little, 2010). For example, if a pupil shows disruptive behaviour in a classroom the teachers, headteachers and social workers may intervene in various ways. However, we lack knowledge about the effectiveness of these interventions, and how they can be improved.

Also, many evaluations test commercially distributed products. Yet local and national authorities often deliver services that are similar in purpose and structure to these products (e.g. support for young mothers, parenting advice, anti-bullying programmes, social competencies in school curricula). Little is currently known about the effectiveness of practices embedded in mainstream services. But some findings suggest that interventions delivered as part of mainstream services may sometimes be as effective as new products (de Graaf, Speetjens, Smit, de Wolff, & Tavecchio, 2008).

Finally, there is a continuous change in family, education and youth policies across Europe that has an impact on the prevention of violence or other adolescent problem behaviour. However, most policies in education, social welfare, family policy, or policing and youth justice are implemented without any consideration of their effectiveness, and very few studies have attempted to assess whether new policies achieve their goals.

A better understanding of how embedded services and whole systems can be made more effective could have a considerable benefit for youth violence reduction (Little 2010). However, good research on these aspects requires that prevention science partly moves beyond classical randomized controlled experiments and broadens its methodological scope. Also, we believe that substantial progress could be made by building evaluation components into the process of policy change (Cartwright & Hardie, 2012).

5. Integrate Situational and Developmental Approaches to Violence Prevention

Violence prevention researchers often distinguish between *developmental* approaches that try to influence the propensity to engage in violent or criminal acts over the life-course (i.e. change the person and his or her social, emotional, cognitive, and moral development; see Tremblay and Craig, 1995) and *situational* approaches that try to influence factors that change the likelihood of a crime or violent act happening. Situational approaches include, for example: CCTV cameras in public space, better and more targeted police patrols in hot-spots of crime and violence, firearm control measures, school-surveillance in corridors and during lunch breaks, strengthening the likelihood of peer interventions against bullying; control and surveillance mechanisms on the internet; or changes in alcohol sales policies (Clarke, 1995). For historic reasons situational and developmental approaches to violence prevention have been seen as opposites rather than as complementary strategies.

We believe that the most promising approach to violence prevention combines developmental and situational interventions. However, evaluation research that addresses both components has been rare, both in Europe and internationally. Strategic support for innovative research that combines situational and developmental components is likely to yield highly interesting findings with a direct impact on policy making across areas such as policing, urban planning, social and family policies and education.

6. Developing and Testing Tailored Prevention Strategies

Many important risk and protective factors are similar for different types of aggression and violence. Also, most risk factors are relevant in many different cultures and societies rather than being specific to any particular society. This suggests that an effective strategy to prevent youth violence should be based on similar principles across all of Europe and that it should target a broad range of antisocial and violent behaviors rather than being highly specific.

However, while evidence suggests that the underlying principles of effective prevention are similar across cultures and settings, there is controversy about the extent to which delivery format, recruitment, and framing need cultural adaptation. For example, some evidence suggests that regular parent training programmes may be less effective for single parents than for two-parent families (Gardner et al., 2009).

Also, children and adolescents at risk of aggressive behaviour differ in the extent to which they are exposed to specific risk-factors, and their combination of environmental and individual risks may require specific approaches. For example, the approach required for socially isolated adolescents with concurrent attention-deficits and academic difficulties may differ from the approach required for more dominant, sociable and academically relatively successful bullies. Future research should therefore examine how prevention programmes can be tailored to the specific needs of different risk groups or different types of aggression (Malti and Noam, 2009). There is currently limited knowledge about the extent to which the tailoring of prevention strategies to specific needs increases their effectiveness and to which extent such tailoring would be practically desirable.

7. Improving the Quality Standards in Prevention Evaluation Research

Reviews of violence prevention research suggest much variation in the methodological quality of outcome evaluations in the field of violence and bulling prevention. While some studies meet high methodological standards, the methodological limitations of many studies make it difficult to draw firm conclusions about genuine treatment effects (Eisner, 2009). Such limitations include a poor overall study design, a low validity of core outcome measures, limited or no measures of the implementation process, and insufficient reporting of study characteristics and analytic approaches.

There is significant scope for improving the quality standards of outcome evaluations conducted in Europe. This would result in better-quality studies with more valid and generalizable information for policy makers and practitioners on what works and what doesn't. Measures for improving the methodological standards include compulsory registration of all outcome evaluations funded by public or private funding agencies in Europe, guidelines on the design and reporting of outcome studies, training in evaluation design, and greater transparency on potential conflicts of interest. Where a conflict of interest

between the role of evaluator and of programme provider is likely funding agencies should request mechanisms for independent review of the study design and the data analyses.

Progress in evidence-based prevention is often hampered by obstacles to the co-operation between researchers, intervention providers, and local stakeholders and policy officials. Introducing evidence-led development and design into education, public health policy, social services, or family services requires that policy makers and practitioners have a good understanding of the principles of evaluation research.

8. Improving Knowledge of Mechanisms and Active Components

Despite some success in identifying effective programmes, we still have a very limited understanding of the causal mechanisms that make them work. Also, we know little about the active components that render a preventive intervention effective. A better understanding of the mechanisms and active components of preventive interventions is essential for further progress, because only if we understand the general principles of *why* some interventions work can we make progress in designing the next generation of prevention approaches.

Progress on these issues has been difficult. The most frequent approach is to conduct analyses of mediators (i.e. mechanisms transporting the causal effect from the intervention to the outcome) and moderators (i.e. factors that are associated with variation in the achieved effect) after a trial has been conducted (e.g., Malti, Ribeaud, and Eisner, 2012). For example, we now understand that bullying prevention programmes tend to be more effective if they are more intensive and if they include a parent training component (Hahn, Ttofi, & Farrington, 2012). However, findings are sometimes contradictory. We believe that genuine progress requires a new and innovative type of evaluation research. Rather than randomly allocating participants to whole packages of interventions ('programmes') researchers will need to improve their capacity to isolate, based on prior findings and theoretical considerations, promising elements of an intervention whose effects can then be examined. To the extent that innovative research could identify the active building blocks of prevention activities it could help to progressively tailor more effective interventions.

9. Upscaling and Mainstreaming

While a lot has been learned about how prevention and intervention approaches can be made to work in efficacy trials, much less is known about how programmes can be taken to scale without losing their effectiveness. Comparatively often findings suggest that even evidence-based programmes fail to produce any desirable effects in large field trials (Goossens et al., 2012; Little, Berry, Morpeth, & Axford, 2012). We also know little about how evidence-based programmes can be taken to scale and embedded into mainstream services (see Spiel, Wagner, and Strohmeier, 2012). More studies are therefore necessary to examine intervention effects in large-scale field trials, preferably with follow-up measures over several years. Also, more *translational research* on programmes and policies that can effectively be inserted into mainstream services is necessary (Woolf, 2008).

We therefore believe that more well-designed, large-scale field trials that assess long term-effects are necessary (Farrington & Welsh, 2007). The trials can provide policy makers with realistic estimates of

effects that are replicable at the level of whole populations. Often, such evaluations should be conducted as independent evaluations, in which the role of the evaluators and programme developers are institutionally separated. Large-scale dissemination trials are costly and it is essential that they are carefully planned and adequately resourced, and that their findings are effectively communicated amongst researchers and policy makers in Europe.

10. Better European Cooperation

The development, testing, and implementation of policies and programmes supported by research evidence can benefit from more intensive and regular research collaboration across Europe. Despite encouraging developments in the past 10 years there remains a significant gap in systematic collaboration between European researchers on more effective ways of reducing aggression and violence. More intensive knowledge exchange on programme development, research methodologies, treatment outcomes and policy developments could greatly contribute to a greater population-wide impact of evidence-based prevention. For example, various countries are moving towards developing 'best-practice' lists or accreditation procedures. It would be desirable to co-ordinate efforts across Europe so that standards of evidence can be shared and potential clients can have access to the broadest possible body of knowledge. This includes the coordination of, and access to, already existing data across Europe, as well as easy access to evidence-based prevention and intervention programmes.

Conclusion

Shaping the socio-political and mental health discourse on children and youth in advanced European industrial society at the beginning of the 21st century embraces the understanding of responsible and healthy young generations. Civic responsibility and positive mental health outcomes are major assets for competing in a globalized environment and for securing democratic values. The recommended course of action will provide much-needed evidence of conditions that enhance positive development and impede bullying and violence in young people. This evidence is needed to effectively promote the conditions linked to favourable outcomes and alter the conditions linked to violence and bullying. It is also desired to integrate existing approaches into policies that aim at promoting young people's social, moral and emotional competencies, and fostering successful educational careers.

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