

# Addressing Risk of Violent Behavior in Youth

Substance Abuse and Mental Health Services Administration  
U.S. Department of Health and Human Services



**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration

# Violent Behavior in Youth: The Facts

## Purpose of this training:

- Provide educators, friends, and family members with **basic knowledge** about violence in youth
- Understand **protective and risk** factors associated with violent behaviors in youth
- Provide basic knowledge about the **connection of mental illnesses and violence**
- Provide information about **mental illness in youth**
- Provide **opportunities and strategies** that teachers, family members, and friends can use to manage situations of concern

# Violence in Youth: The Facts



**PART 1: Basic knowledge about violence in youth**

# Violence in America is a Public Health Issue

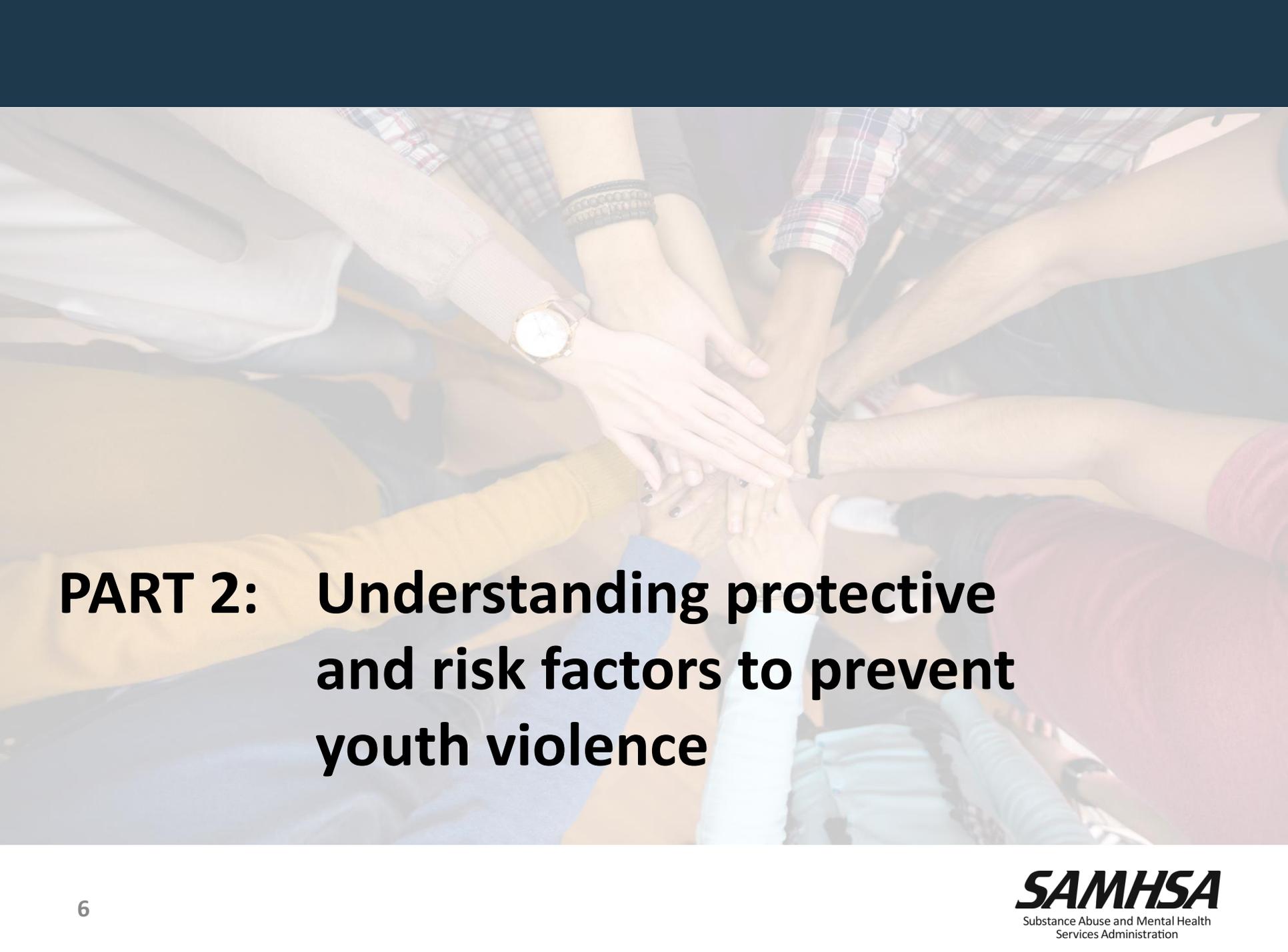
- Youth violence is the third leading cause of death among young people between the ages of 15 and 24. (CDC, National Center for Injury Prevention and Control)
- About 17.9% of high school students in 2013 reported taking a weapon to school in the past month. (CDC, Youth risk behavior surveillance, U.S. 2013. MMWR)
- According to the Centers for Disease Control and Prevention, in a 2015 nationally-representative survey of youth in grades 9-12:
  - 22.6% reported being in a physical fight in the 12 months before the survey
  - 5.3% of high school students reported carrying a gun on one or more days in the 30 days preceding the survey; the prevalence was higher among males (8.7%) than females (1.6%)
- The majority of youth will not engage in violent behavior. (U.S. Surgeon General report on youth violence, 2001)

Source: <http://www.cdc.gov/mmwr/volumes/65/ss/pdfs/ss6506.pdf>

# What is Violent Behavior in Youth: The Facts



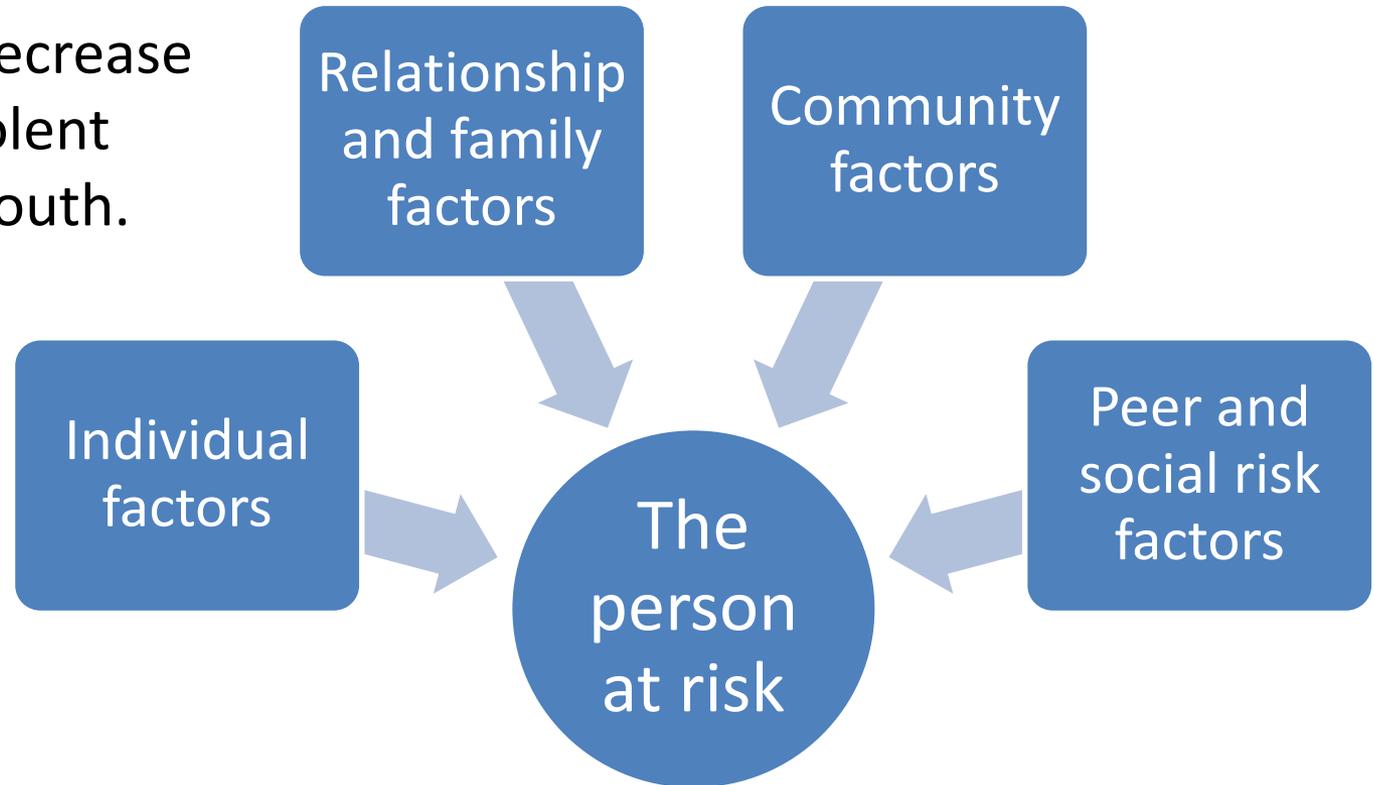
**"the intentional use of physical force or power to threaten or harm others"**



## **PART 2: Understanding protective and risk factors to prevent youth violence**

# Categories of Protective and Risk Factors

Many factors can increase or decrease the risk of violent behavior in youth.



# Everyone has Protective and Risk Factors

- All people—youth and adults alike—have characteristics that make them more likely (risk) or less likely (protective) to act out with violent behavior.
- While teachers may primarily be concerned about school-based violent behaviors, successful prevention and interventions regarding violence address risk and protective factors across multiple contexts.

# Important Concepts to Know

**Protective factors** are characteristics that make it less likely an individual will engage in violence. These are usually stable and can sometimes be built on to reduce the likelihood of violence.

**Risk factors** are characteristics that make it more likely that an individual may engage in violent behavior. Risk factors are usually fairly stable factors over time although they can evolve.

**Warning signs** are characteristics or behaviors that are associated with a current or imminent risk of violence. These are often short-term factors associated with a new stress, event, failure, loss or interaction.

# What are **protective** factors that reduce the likelihood of violent behavior in youth?



# Individual Protective Factors for All Youth

- High grade point average (high academic achievement)
- High, long-range educational aspirations
- Positive social orientation
- Popularity that is acknowledged by peers
- Highly developed social skills/competencies
- Highly developed skills for realistic planning
- Being involved in a faith community

# Family Protective Factors for All Youth

- Connectedness to family or adults
- Ability to discuss problems with parents
- Perceived parental/caregiver expectations about school performance are high and long term
- Frequent shared activities with parent/caregivers
- Consistent presence of parent/caregiver during at least one of the following: when awakening, when arriving home from school, at evening mealtime or going to bed
- Involvement in social activities
- Family use of constructive strategies for coping with problems

# Peer and Social Protective Factors for All Youth

- Engages well with emotionally mature peers
- Commitment to school (an investment in school and in doing well at school)
- Close relationships with peers who do not engage in violent behavior
- Membership in peer groups that do not support antisocial behavior
- Involvement in prosocial activities (e.g., community activities, school clubs, sports)
- Exposure to school culture that includes:
  - Intensive supervision
  - Clear behavior rules
  - Consistent negative reinforcement of aggression
  - Engagement of parents and teachers

# Community Protective Factors for All Youth

- Cohesive and inclusive school culture
- Stable economic environment
- Opportunities for community engagement
- Long-term residents of multiple generations

# Summary: Protective Factors for Youth Violence

Individual	Relationship/family	Peer/social	Community
<ul style="list-style-type: none"><li>• High academic achievement</li><li>• High, long-range educational aspirations</li><li>• Positive social orientation</li><li>• Popularity that is acknowledged by peers</li><li>• Highly developed social skills/competencies</li><li>• Highly developed skills for realistic planning</li><li>• Being involved in a faith community</li></ul>	<ul style="list-style-type: none"><li>• Connectedness to family or adults</li><li>• Ability to discuss problems with parents</li><li>• Perceived parental/caregiver high and long-term expectations about school performance</li><li>• Frequent shared activities with parent/caregiver</li><li>• Consistent presence of parent/caregiver when awakening, arriving home from school, or going to bed</li><li>• Involvement in social activities</li><li>• Family use of constructive strategies for coping with problems</li></ul>	<ul style="list-style-type: none"><li>• Engages well with emotionally mature peers</li><li>• Commitment to school</li><li>• Close relationships with peers who do not engage in violent behavior</li><li>• Peer groups that do not support antisocial behavior</li><li>• Involvement in healthy social activities (e.g., community activities, school clubs, sports)</li><li>• Exposure to school culture that includes: Intensive supervision, clear behavior rules, consistent negative reinforcement of aggression, engagement of parents and teachers</li></ul>	<ul style="list-style-type: none"><li>• Cohesive and inclusive school culture</li><li>• Stable economic environment</li><li>• Opportunities for community engagement</li><li>• Long-term residents of multiple generations</li></ul>

# What are **risk** factors that increase the likelihood of violent behavior in youth?



# Individual Risk Factors for Violent Behavior

With or without the presence of mental illness, the following are risk factors for any youth:

- Poor behavioral and impulse control
- Deficits in social cognitive or information-processing abilities
- High emotional distress
- History of treatment for emotional problems
- Antisocial beliefs and attitudes
- Exposure to violence and conflict in the family
- History of violent victimization
- Attention deficits, hyperactivity or learning disorders
- Academic struggles
- History of early aggressive behavior
- Involvement with drugs, alcohol or tobacco

# Family Risk Factors for Violent Behavior

- Family is isolated
- Family has limited communication
- Family does not engage in regular activity together
- Parents/caregivers have inconsistent or absent schedules
- Family has limited or no involvement in social activities
- Limited ability to use constructive strategies for coping with problems

# Peer and Social Risk Factors for Violent Behavior

- Association with delinquent peers
- Involvement in gangs
- Social rejection
- Lack of involvement in prosocial activities
- Poor academic performance
- Low commitment to school and school failure

# Community Risk Factors for Violent Behavior

- Diminished economic opportunities
- High concentrations of poor residents
- High level of transiency
- High level of family disruption
- Low levels of community participation
- Socially disorganized neighborhoods

# Summary: Risk Factors for Youth Violence

Individual	Relationship/family	Peer/social	Community
<ul style="list-style-type: none"> <li>• Poor behavioral and impulse control</li> <li>• Deficits in social cognitive or information-processing abilities</li> <li>• High emotional distress</li> <li>• History of treatment for emotional problems</li> <li>• Antisocial beliefs and attitudes</li> <li>• Exposure to violence and conflict in the family</li> <li>• History of violent victimization</li> <li>• Attention deficits, hyperactivity or learning disorders</li> <li>• Academic struggles</li> <li>• History of early aggressive behavior</li> <li>• Involvement with drugs, alcohol or tobacco</li> </ul>	<ul style="list-style-type: none"> <li>• Family is isolated</li> <li>• Family has limited communication</li> <li>• Family does not engage in regular activity together</li> <li>• Parents/caregivers have inconsistent or absent schedules</li> <li>• Family has limited or no involvement in social activities</li> <li>• Limited ability to use constructive strategies for coping with problems</li> </ul>	<ul style="list-style-type: none"> <li>• Association with delinquent peers</li> <li>• Involvement in gangs</li> <li>• Social rejection</li> <li>• Lack of involvement in healthy social activities</li> <li>• Poor academic performance</li> <li>• Low commitment to school and school failure</li> </ul>	<ul style="list-style-type: none"> <li>• Diminished economic opportunities</li> <li>• High concentrations of poor residents</li> <li>• High level of transiency</li> <li>• High level of family disruption</li> <li>• Low levels of community participation</li> <li>• Socially disorganized neighborhoods</li> </ul>



## **PART 3: Basic knowledge: Connection of mental illness and violence**

# Is Mental Illness a Risk Factor?

Most violence in the U.S. is **not** perpetrated by people with mental illness.

- Approximately 3-5 percent of violent crime is attributed to people with mental illness. (CDC, SAMHSA)
- Often, people with mental illness are the victims of violent behavior. (Hughes et al, 2012)
- In some cases, inadequately treated or untreated mental illness can contribute to aggression and violent behavior.

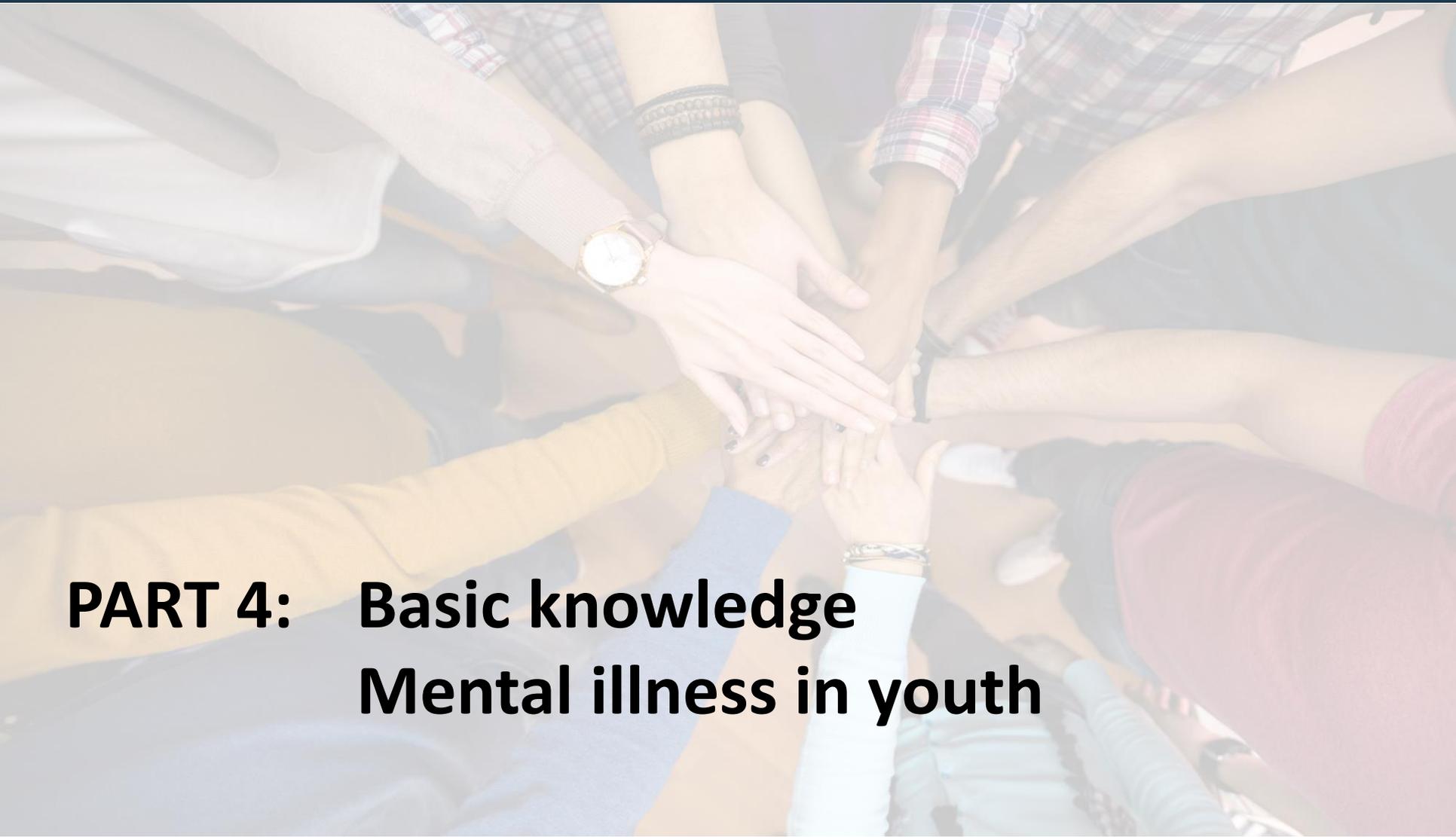
Some studies show that the presence of a specific mental illness in youth (e.g., conduct disorder, alcohol use disorder) can be **one of many risk factors** for aggression and violent behavior.

# Is Mental Illness a Risk Factor?

- SAMHSA data demonstrates that there are about 45 million adults in the US with any mental illness.
- We know that most of these individuals are not likely to be violent.
- For **adults** we know that a small subset of individuals with **untreated** or inadequately treated mental illnesses can be at increased risk for being violent or reacting violently to a perceived threat.
- Providing interventions when possible in untreated mental illness can be an opportunity to reduce risk of further escalation.

# Is Mental Illness a Risk Factor?

- Some studies show that presence of a specific mental illness in youth (e.g., conduct disorder, alcohol use disorder) can be one of many **risk factors** for aggression and violent behavior.
- Some risk factors for violent behavior are also risk factors for mental illness in children and adolescents (e.g., exposure to trauma, lack of parental involvement).
- **Building protective factors** can be helpful in reducing the risk of mental illness **and** reducing risk of violent and aggressive behaviors.



**PART 4: Basic knowledge  
Mental illness in youth**

# Mental Illness in Youth

- **Intervening early in the course of mental illness is important to improve:**
  - Academic and social functioning
  - Reducing the risk of later adult mental illness
- It is estimated that 20% of children and adolescents have a diagnosable mental, emotional, or behavioral disorder, and this costs the public \$247 billion annually. (Blau, Huang, Mallory, 2010)
- 10% have a serious emotional disturbance (SED) that significantly impacts functioning at home, at school or in the community. (Brauner & Stephens, 2006)
- 50% of adult mental illness is manifested by age 14; 75% by age 24. (Kessler et al, 2008)

# Signals That a Child or Adolescent May Need Help

- If the child often feels anxious or worried
- Has very frequent tantrums or is intensely irritable much of the time
- Has frequent stomachaches or headaches with no physical explanation
- Is in constant motion, can't sit quietly for any length of time
- Has trouble sleeping, including frequent nightmares
- Loses interest in things he or she used to enjoy
- Avoids spending time with friends
- Has trouble doing well in school, or grades decline
- Has low or no energy

# Signals That a Child or Adolescent May Need Help

- Has spells of intense, inexhaustible activity
- Harms herself/himself, such as cutting or burning her/his skin
- Fears gaining weight; exercises, diets obsessively
- Engages in risky, destructive behavior
- Harms self or others
- Smokes, drinks, or uses drugs
- Has thoughts of suicide
- Thinks his or her mind is controlled or out of control, hears voices
- Poor social functioning

# Important “Take Homes” for Review

- Building protective factors may reduce risk of some mental illnesses and may help reduce the risk of violence by helping the child develop good coping skills to manage distress and frustration.
- Getting help for youth with signs of mental illness can have many benefits including reducing later risk of: poor social functioning, aggression, poor academic performance and other costs.
- Some types of mental illness and especially untreated mental illness increases the risk for aggressive and violent behaviors.



**PART 5: Basic knowledge  
Opportunities and strategies for  
managing situations of concern**



**Teachers, coaches, and other adults can all play a role in addressing youth violence at schools in and in communities.**

# We Can Make a Difference in Risks

- Teachers, other school-based faculty, parents and others can positively impact youth and reduce the risk of violence.
- Communication is key
  - It's important that the adults involved talk to one another when there is violence or concern about violence.



# Opportunities for Impact in School Settings

- In general, the earlier an intervention is adopted, the greater the chance of it being successful and effective.
- We will discuss three opportunities for impact:
- Development of a school-wide **culture** that supports emotional safety, civility and well-being for students, faculty and staff.
- Development of a process that identifies and consistently manages acts of violence, bullying, suicidal behavioral or other behavioral disruptions. This creates a **pathway for concerns**.
- Development of a specific plan or strategy that has the capacity for follow up and management of individuals that have demonstrated warning signs and or made a direct threat. **This is a threat assessment strategy.**

# Opportunity: Maintain a Safe Civil Culture

The development of a school-wide culture that supports emotional safety, civility and well-being for students, faculty and staff can serve as a foundation.

- Ideal elements would include:
  - Acceptance of all individuals and spirit of inclusiveness
  - Clear communication
  - Acceptance of and caring for individuals with mental illness and disabilities

This requires active attention to the development of a within-school community that is active, promotes healthy engagement and a strong inclusive civil school spirit.

# Opportunity: Develop a Pathway for Concerns

- Within a civil healthy culture, develop a pathway that concerned students and faculty can report on concerns of many types including abuse, bullying and other threatened or actual activity.
- It is important that the community knows there is a safe, respectful process for addressing concerns of bullying, fighting, abuse and other unsafe behaviors that impact the community.
- Accountable persons in the process would research the reported concern and address it with a consistent process that is focused on **problem solving and not on punishment**.
- This process should include knowledge of and referral to specialty community resources such as social services, mental health treatment and others as necessary.

# Opportunity: Develop a Pathway for Concerns

- Depending on the nature of the situation, it may be useful to develop a team-based, school-centered strategy that follows the progress of the child over time and periodically reviews the situation until it is resolved. Sometimes this is known as a threat assessment and management team.
- A team approach can include school-based individuals that are familiar with a student such as:
  - Teacher, guidance counselor, school psychologist, school nurse or other mental health professional, school resource officer,
  - Can involve others in the community such as:
    - family, faith-based agency, law enforcement, sports coach, neighbor, friend, physician, mental health professional, youth peer leader, business leaders.

# Imminent Threat Assessment and Management

- For specific and credible threats of violence, a specialized team that works to manage an approach to a specific threat can be useful. This team can analyze the level of threat and develop strategies for managing it.
- This team is typically led by school administration and is able to meet on short notice to address specific threats.
- The team may have individuals from outside the school and the school resource officer and psychologist.
- An accountable person tracks the situation until it is resolved again with a problem-solving rather than punitive focus to the extent possible.

# The Role of a Trusted Adult

- School-based plans that have been developed often include the strategy of encouraging the student to identify at least one adult that he or she can trust. This has its basis in suicide-prevention strategies.
- Keep in mind that
  - Young individuals have different reasons for trusting different people at different times.
  - The choice of trusted adult should be made by the individual and realistic choices should not be judged.
  - A trusted adult can be anyone the individual has regular contact with. This could be a parent, teacher, counselor, employer, neighbor, other relative, etc.

# Characteristics of a Trusted Adult

- Has or builds connections to others that are part of the person's life
- Regular contact
- Establishes boundaries regarding what can and can not be kept confidential
- Addresses bullying and child abuse
- Supports engagement with mental health treatment if a mental illness is present or believed to be present

# Warning Signs for Violent Behavior in Youth

The following characteristics may indicate a near-term risk for violent behavior. Threat assessment teams can consider these factors:

- Recent intensification of anger and impulsiveness
- Increasing loss of temper or blow-ups and irritability
- Becoming easily frustrated
- Making threats of violence
- Taking steps towards enabling violent threats
- Recent loss or failure
- Recent victim of bullying or bullying event
- History of perpetrating violence

# Assessing Levels of Threat

**Low risk of violence:** individual does not appear to pose a threat of violence or serious harm to self/others; issues/concerns can be resolved easily.

**Moderate risk of violence:** individual does not appear to pose a threat of violence, or serious harm to self/others, at this time, but exhibits behaviors that indicate a continuing intent and potential for future violence or serious harm to self/others, and/or exhibits other concerning behavior that requires intervention.

**High risk of violence:** the individual appears to pose a significant threat of violence, exhibiting behaviors that indicate both a continuing intent to harm and efforts to acquire the capacity to carry out the plan, and may also exhibit other concerning behavior that requires intervention.

# Taking Action: A Low Risk of Violence

- Build up any protective factors
- Report any suspected child abuse
- Stop any bullying
- Consult with the school nurse, psychologist or counselor
- Consult with the school resource officer
- Refer for assessment to determine needs - such as counseling, skill building, academic assistance, social connections
- Provide support to the family, community members and/or school staff by connecting with any needed resources such as mental health, social service and other community-based resources
- Follow up and outreach periodically

# Taking Action: A Medium Risk of Violence

In addition to taking steps listed for low level of violence:

- Threat assessment team to develop a written assessment and management plan and revise as needed. Elements in the management could include:
  - Increase contact/supervision of individual
  - Maintain contact with the individual
  - Notify anyone who is the target of any threats
  - Notify school or parents/involved adults
  - Consider contacting law enforcement
  - Refer individual for counseling, dispute mediation, or other appropriate intervention
  - Increase support to the trusted adult and the team

# Taking Action: A High Risk of Violence

- Take immediate measures to protect yourself and others
- Consult with school resource officer or call law enforcement
- Notify any intended target of violence, the trusted adult, and team immediately

# When to Seek Help from an Emergency Responder

## When to seek immediate help:

- threats or warnings about hurting or killing someone
- threats or warnings about hurting or killing oneself
- threats to run away from home
- threats to damage or destroy property

# When to Get Help for a Mental Health Concern

- While mental illness may not be present in every case, whenever a parent or other adult is concerned about the possibility of a mental illness, they should arrange for a comprehensive evaluation by a qualified mental health professional.
- Some places to find resources include:
  - The school nurse
  - The school counselor
  - A family doctor
  - SAMHSA treatment locator (see final slides)
  - Your county behavioral health center

# Other Things to Think About....

Think through an assessment and management plan:

- Who is with the individual?
- Is there a need for continuous presence of a responsible companion ?
- Is there a need to monitor contact with friends that may be harmful?
- Is there a need to monitor social medial contacts?
- Eliminate (permanently or temporarily) access to any lethal means

# A Few Facts About the Mental Health System

- Laws vary by state, but in general:
  - Courts cannot commit someone to a hospital against their will unless:
    - The person is considered an acute threat to themselves or others, or they cannot care for themselves AND
    - The threat is due to a mental illness
- For children, parents are usually legally allowed to hospitalize the child even against their will.
- Since much violent behavior is not attributed to mental illness, adolescents who are aggressive or violent cannot always be hospitalized.
- When hospitalizations do occur, they are often brief, so outpatient and community supports must be in place.

# Where to Get Help for the Individual

Know what local resource for urgent treatment are available including local crisis centers and call lines.

- **SAMHSA's treatment locator:**

<https://findtreatment.samhsa.gov/>

- **National Helpline:**

<https://www.samhsa.gov/find-help/national-helpline>

# Where to Get More Information

- **American Academy of Child and Adolescent Psychiatry facts for families**

[https://www.aacap.org/aacap/Families\\_and\\_Youth/Facts\\_for\\_Families/FFF-Guide/FFF-Guide-Home.aspx](https://www.aacap.org/aacap/Families_and_Youth/Facts_for_Families/FFF-Guide/FFF-Guide-Home.aspx)

- **Centers for Disease Control**

<https://www.cdc.gov/violenceprevention/youthviolence/index.html>

# Summary of Main Points

- Reviewed basic knowledge of violence in youth
- Reviewed protective and risk factors of the individual and their context
- Reviewed the connection of mental illness and violence
- Reviewed information about mental illness in youth and
- Reviewed opportunities and strategies that schools, teachers, and family members can use to assess and manage situations of concern

# Thank You

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

Presenter Contact Information (Optional) – Use 20pt. Calibri typeface set to auto black color

[www.samhsa.gov](http://www.samhsa.gov)

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