# Violence Research Centre



# **The Evidence for Better Lives Initiative** The Importance of Developmental Crime Prevention

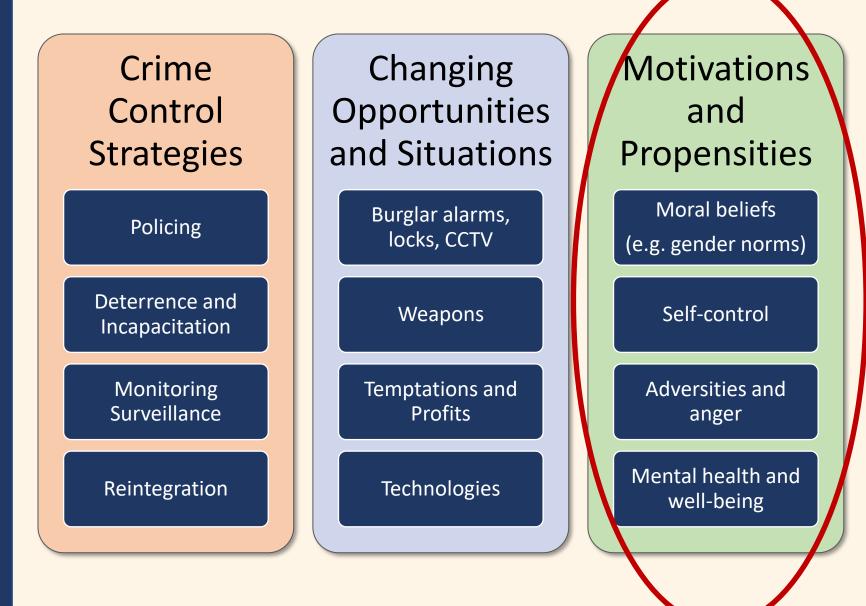
Prof Manuel Eisner



How can crime and violence be reduced, and security be increased?

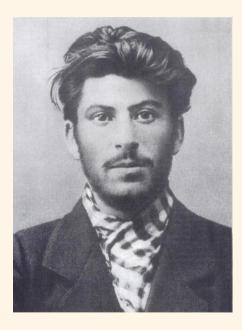
Welsh, B. C., & Farrington, D. P. (2012). Crime prevention and public policy. *The Oxford Handbook of Crime Prevention*. Oxford: OUP, 3-19.

#### Developmental crime prevention across the life course



# Who was this young gentleman?







## On Joseph Stalin's Childhood

Quotes from Montefiore, Simon S.(2008) Young Stalin. New York: Phoenix Stalin's father 'Crazy Beso' was an alcoholic cobbler.

His mother Keke spoiled Stalin, but also "beat him mercilessly".

"Once Beso threw Stalin so hard to the floor that there was blood in the child's urine for days."

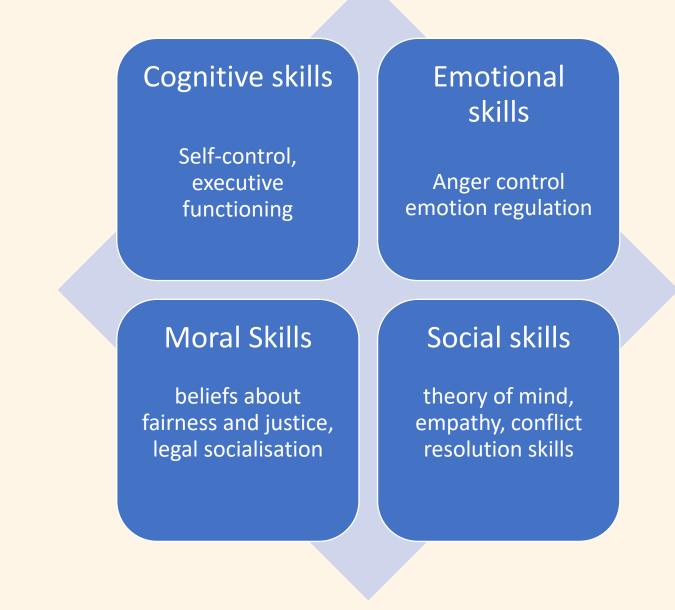
"Undeserved beatings made the boy as hard and heartless as the father himself,' believed his schoolmate Josef Iremashvili, who published his memoirs." The Questions of Developmental Prevention

- When do antisocial behaviour, crime, and violence start?
- What childhood risk- and protective factors predict adolescent and adult criminality?
- Can adolescent and adult criminality be prevented by reducing childhood risk factors and strengthening protective factors?
- How can the effectiveness of early prevention and intervention be tested empirically?

OR

**Could Stalin have been prevented with a proper Sure Start Programme in late 19th century Georgia?** 

What are the main individual-level targets of developmental crime prevention?



The Logic of Developmental Prevention

- A developmental perspective across the life-course.
- Multisystemic approach with initiatives at individual, family, school, neighourhood levels.
- Combination of strengthening protective factors and reducing risk factors.
- Integration of universal, indicated, and selective prevention.
- Research and development logic. Gradually build the evidence-base on what works and what doesn't.

Linking Developmental Epidemiology to Prevention Science Adverse Childhood Experiences (ACEs) as a framework for risk-focused developmental prevention

Adverse Childhood Experiences (ACEs) Adverse Childhood Experiences "are stressful experiences occurring during childhood (age 0-17) that directly hurt a child (e.g., maltreatment) or affect them through the environment in which they live (e.g., growing up in a house with domestic violence)" (Bellis et al, 2016)

Bellis, M. A., Ashton, K., Hughes, K., Ford, K. J., Bishop, J., & Paranjothy, S. (2016). Adverse childhood experiences and their impact on health-harming behaviours in the Welsh adult population. Public Health Wales NHS Trust.

For the WHO Adverse Childhood Experiences Questionnaire see

https://www.who.int/publications/m/item/adverse-childhood-experiences-international-questionnaire-(ace-iq)

Dimensions and Indicators of Adverse Childhood Experiences (ACEs)

Finkelhor, D., Shattuck, A., Turner, H., & Hamby, S. (2015). A revised inventory of adverse childhood experiences. *Child abuse & neglect, 48,* 13-21.



Physical abuse Emotional Abuse Sexual Abuse Bullying

### The Significance of ACEs

## The Original Study by Felitti et al. (1998)

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14(4), 245-258.

#### Design

- Almost 10,000 adult (all ages) participants, visitors to a large integrated care system
- Questionnaire with 17 forms of childhood adversities
- Wide range of health outcomes

#### Results

- Different adversities tend to come together.
- Childhood adversity is associated with a wide range of negative health outcomes.
- The more different adversities are experienced the higher is the risk of negative health outcomes including social and cognitive impairment, disease, mental health, substance use, and early death.
- Suggestion for a cutoff of 4+ ACEs.

Why does this matter for crime prevention?

#### A large study in Wales, UK, found:

#### Compared with people with no ACEs, those with 4+ ACEs are:

- **4x** to be a high-risk drinker
- **6x** to smoke e-cigarettes or tobacco
- **6x** to have had sex under the age of 16 years
- **11x** to have smoked cannabis
- **14x** to have been a victim of violence over the last 12 months
- **15x** to have committed violence against another person in the last 12 months
- **16x** to have used crack cocaine or heroin
- **20x** to have been incarcerated at any point in their lifetime

Other negative outcomes associated with ACEs include Anxiety, Depression, Diabetes, suicidality.

Results from the Wales ACE study, N = 2018.

Bellis, M. A., Ashton, K., Hughes, K., Ford, K. J., Bishop, J., & Paranjothy, S. (2016). *Adverse childhood experiences and their impact on health-harming behaviours in the Welsh adult population*. Public Health Wales NHS Trust.

What are the causal mechanisms?

<sup>a</sup> Shonkoff, J. P., Garner, A. S., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... & Committee on Early Childhood, Adoption, and Dependent Care. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, *129*(1).

Repeat exposure to frightening or threatening situations activates the cardiovascular system, the metabolic system, the immune system, and the central nervous system ('toxic stress').<sup>a</sup>

Chronic stress may lead to detrimental structural and functional changes in brain regions related to stress management (biological pathways).<sup>a</sup>

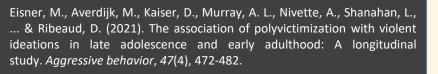
Experiences of victimisation, especially multiple types of victimisation, reduce abilities of self-control and long-term planning.

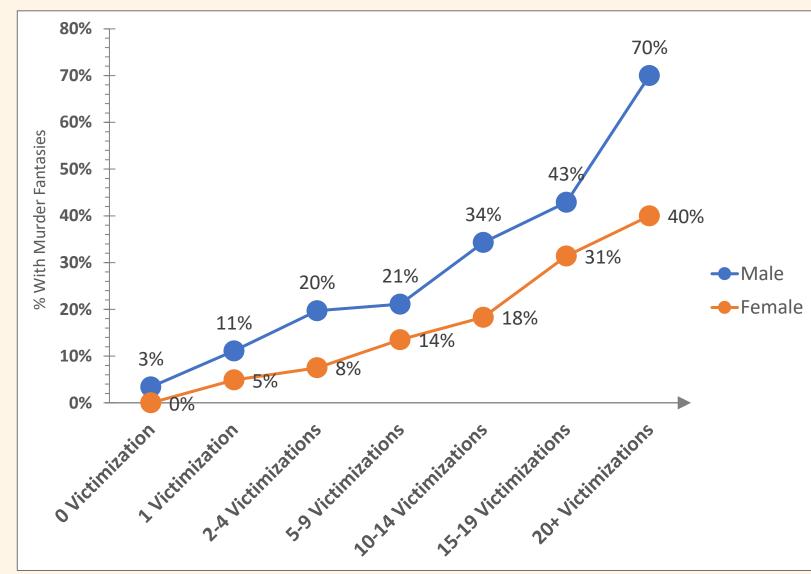
Victimisation undermines trust in others and is associated with depression and withdrawal.

Experiences of victimisation increase negative emotions including anger and violent ideations.

### An Example:

## Murder Fantasies are triggered by Poly-victimisation





Adolescents who experience poly-victimisation are much more likely to ruminate about killing someone.

Why does this matter for crime prevention? Reducing experiences of neglect, abuse and household disfunctioning at all stages of childhood could make a significant contribution to the prevention of poor physical health, mental health problems, early death in adulthood.

Addressing exposure to adversity over the life-course could be a major contribution to reducing later crime, violence and substance use.

A focus on the very first stages of the life-course:

**The Evidence for Better Lives Study** 

### Evidence for Better Lives Study (EBLS)



# Evidence for Better Lives

A global cohort study to promote the well-being of children across the life-course

A research initiative by academics at the Babes-Bolyai University (Romania), Health Services Academy (Pakistan), Hue University of Medicine and Pharmacy (Vietnam), University of Cambridge (UK), University of Edinburgh (UK), University of Ghana, University of Kelaniya (Sri Lanka), University of the Philippines, University of the West Indies (Jamaica)

Acknowledgment: The work of the Evidence for Better Lives study is supported by the Jacobs Foundation, UBS Optimus Foundation, Fondation Botnar, the Consuelo Zobel Alger Foundation, the British Academy and Leverhulme Trust, the Cambridge Humanities Research Grants Scheme, the ESRC Impact Acceleration Account Programme, the Queensland University Postgraduate Research Award, the Higher Degree Research Student Supplementary Research Funding from Queensland University of Technology, the University of Edinburgh College Office for the *College of Arts, the Humanities and Social Sciences SFC ODA* Global Challenges Internal Fund, the University of Cambridge GCRF Quality Research Fund, and the Wolfson Professor of Criminology Discretionary Fund.

## Evidence for Better Lives Study (EBLS)

**Three Priorities** 



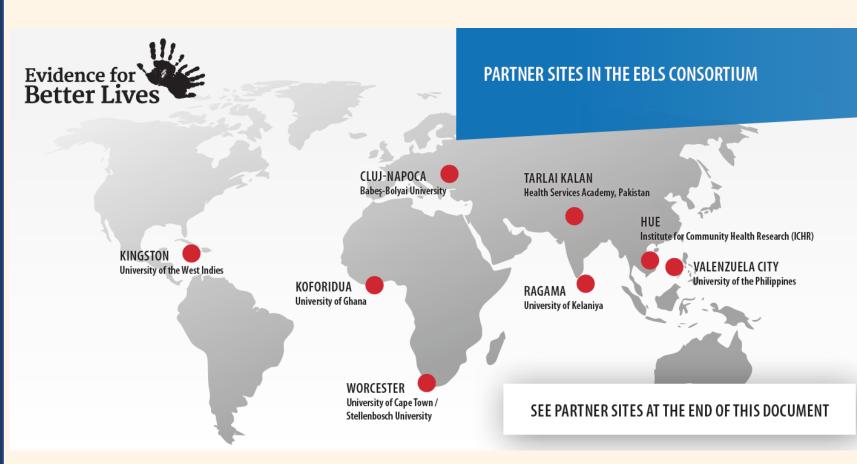
- to launch a pioneering multicentric birth cohort study focussed on low and middle income countries that tracks the well-being of children from before birth to adolescence.
- to focus on medium-sized cities and to collaborate with international, national and local stakeholders to support sustainable city-wide change related to violence against children, psycho-social health, and family well-being.
- to contribute to capacity-building by creating an interdisciplinary network of research teams, promoting early career scholars, and encouraging South-South collaboration.

For further information see:

Evidence for Better Lives Consortium (2019). Addressing Violence against Children; Mapping the Needs and Resources in Eight Cities across the World. Cambridge: Institute of Criminology https://www.vrc.crim.cam.ac.uk/files/nara\_report\_low\_res\_for\_internet\_use.pdf

# The EBLS Consortium Sites





For more information see:

https://www.vrc.crim.cam.ac.uk/vrcresearch/EBLS

# The Foundational EBLS Study

Valdebenito, S., Murray, A., Hughes, C., Băban, A., Fernando, A. D., Madrid, B. J., ... & Eisner, M. (2020). Evidence for Better Lives Study: a comparative birth-cohort study on child exposure to violence and other adversities in eight low-and middle-income countries-foundational research (study protocol). *BMJ open*, *10*(10).



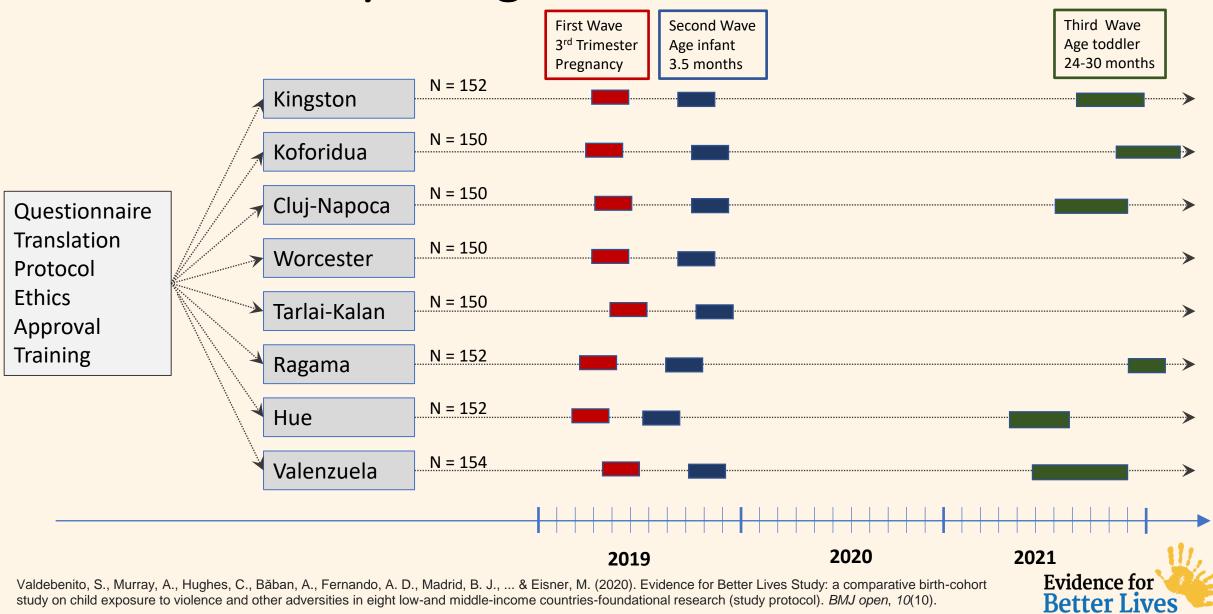
#### Goal

Demonstrate the feasibility of a comparative global cohort study with a substantial sample in each site.

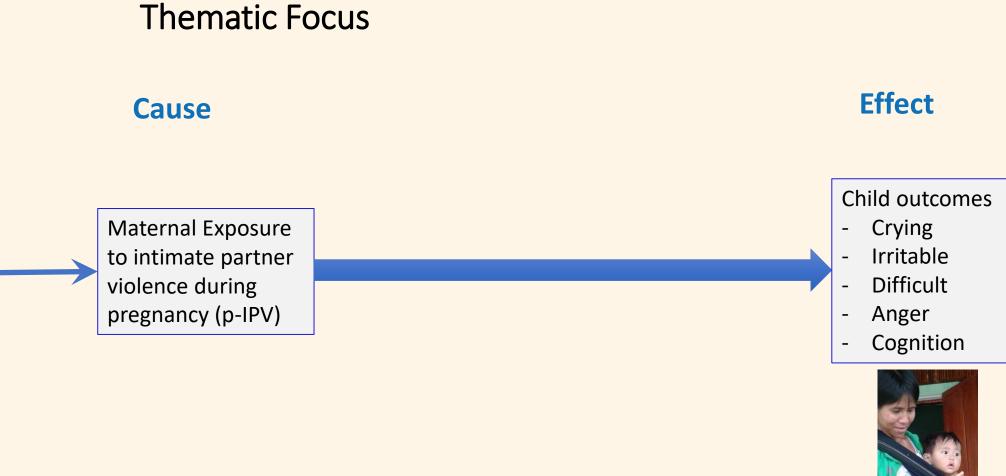
#### Design

- Convenience samples recruited through primary care providers.
- N = 150 in each site.
- Third trimester of pregnancy at baseline.
- Translation into nine languages.
- Ethical approval in all sites and at the University of Cambridge Cambridge.
- Computer-aided personal interviews plus hair sample (biological stress measure) and dry blood spots (inflammatory markers for stress).
- Selected core measures: Adverse Childhood Experiences, depression, maternal ADHD, maternal aggression, selfcontrol, intimate partner violence, foetal attachment, neighbourhood disorder and cohesion, resilience.

# The EBLS Study Design



study on child exposure to violence and other adversities in eight low-and middle-income countries-foundational research (study protocol). BMJ open, 10(10).



The Foundational Study

**Murray, A.L.,** Kaiser, D., Valdebenito, S., Hughes, C., Baban, A., Fernando, A.D., Madrid, B., Ward, C., Osafo, J., Dunne, M., Sikander, S., Walker, S., Thang, V.V., Tomlinson, M., Eisner, M. (2020). The intergenerational effects of intimate partner violence in pregnancy: Mediating pathways and implications for prevention. *Trauma, Violence, Abuse* 21 (5).



#### Effect Cause **Mediating Pathways** Physiological Stress ? Pre- and Perinatal Depression Child outcomes Maternal Exposure Crying ? Substance Use Irritable to intimate partner Difficult violence during ? **Poor Health-Care Utilisation** pregnancy (p-IPV) Anger Cognition Infection Nutrition

**Murray, A.L.,** Kaiser, D., Valdebenito, S., Hughes, C., Baban, A., Fernando, A.D., Madrid, B., Ward, C., Osafo, J., Dunne, M., Sikander, S., Walker, S., Thang, V.V., Tomlinson, M., Eisner, M. (2020). The intergenerational effects of intimate partner violence in pregnancy: Mediating pathways and implications for prevention. *Trauma, Violence, Abuse* 21 (5).

The Foundational Study

**Thematic Focus** 



## Selected Results



How many mothers had experienced significant (4+ ACEs) adversity in their childhood?



United States, general adult population (Felliti et al, 1998)

13%

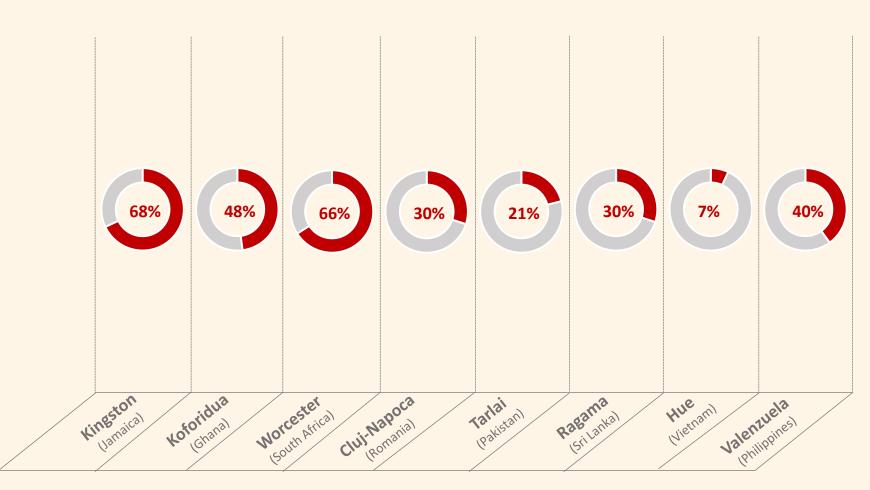
14%

42%

Wales, UK, general adult population (Bellis et al., 2016) study

8 medium sized cities in LMICs, pregnant women, EBLS

There are large differences in the proportion of pregnant women who experienced 4+ ACEs across the eight study sites Proportion of pregnant women that experienced at least four Adverse Childhood Experiences (ACEs).





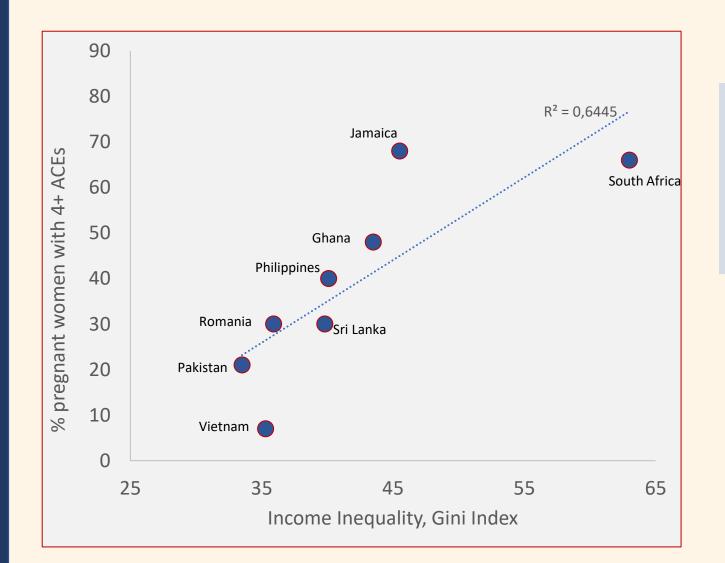


Are differences in maternal adversity between societies associated with ...

### social inequality?

Wilkinson, R. G. (2002). *Unhealthy societies: the afflictions of inequality*. Routledge.





We find a strong association between study sites where pregnant women report more ACEs and higher levels of social inequality.

#### Warning!!!

The study samples are small and not representative. While interesting, the associations may be spurious.

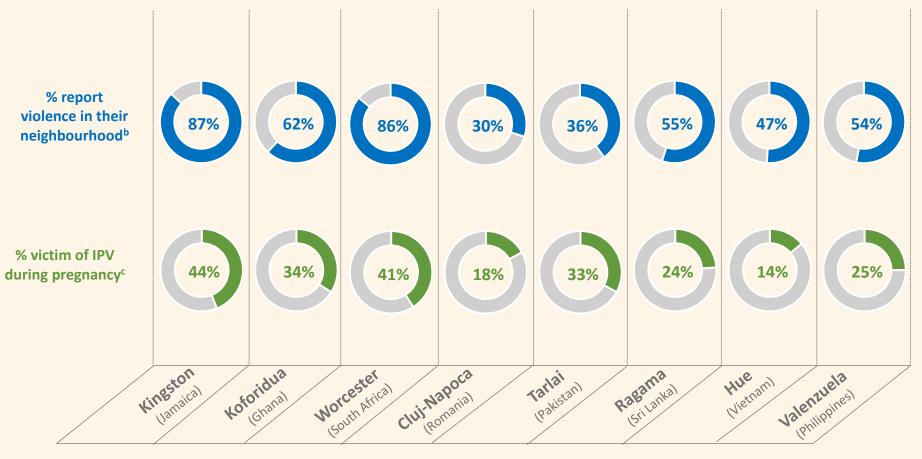


What proportion of pregnant women experienced violence...

in the community at home?



About one in three pregnant women experience physical, sexual or verbal violence during pregnancy.



#### Note:

b) % respondents who report 'gangs' or 'fights and arguments' in their neighbourhood; c) % respondents who experienced physical, sexual or psychological violence by their partner in the six months before the interview.

What is the association between...

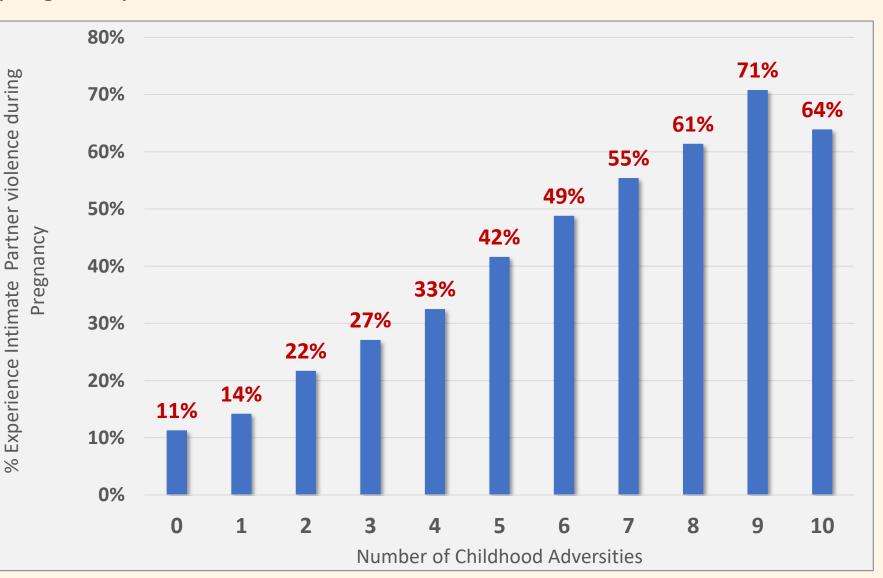
having experienced ACEs as a child

and

being abused during pregnancy?



The more ACEs a woman experienced in childhood, the more likely she is to experience intimate partner violence during pregnancy.



### A summary so far



#### What we have learned

- Large proportions of pregnant women in low and middle-income countries have experienced ACEs (neglect, violence, and household disfunction).
- Social inequality may contribute to differences in the exposure to ACEs.
- About one in three pregnant women experience intimate partner violence during pregnancy (p-IPV).
- There is a strong association between experiencing ACEs as a child and experiencing p–IPV (and experiencing community violence).
- Women who experienced p-IPV and/or ACEs are much more likely to report depression and stress during pregnancy.

#### The next steps

- Analyses of hair samples will tell us about biomarkers of stress during pregnancy (cortisol levels).
- Analyses of child behavior characteristics at ages 24-30 months will tell us about associations between exposure to ACEs during pregnancy and child outcomes.

Implications for Prevention and Intervention The case for peri-natal crimeprevention

- The first 1000 days after conception are a critical period in child development.
- Early childhood risk factors affect long-term negative outcomes in childhood, adolescence, and adulthood. This includes crime, bullying, substance use, school problems, poor mental health, poor physical health.
- We have plausible models of the causal mechanisms that are involved.
- Maternal exposure to intimate partner violence are among the best replicated modifiable risk factors.
- Interventions during pregnancy relate both to the violence against women and the violence against children agenda.

The issue of screening for p-IPV and ACEs

Curry, S. J., Krist, A. H., Owens, D. K., Barry, M. J., Caughey, A. B., Davidson, K. W., ... & US Preventive Services Task Force. (2018). Screening for intimate partner violence, elder abuse, and abuse of vulnerable adults: US Preventive Services Task Force final recommendation statement. *Jama*, *320*(16), 1678-1687.



- Several brief screening instruments available (e.g., HITS, PVS, WAST).
- WAST (Woman Abuse Screening Tool) has been adapted in Chile.
- Screening alone has no benefits. WHO does not currently recommend screening.
- Need for subsequent intervention and support.
- Effective interventions include support services that focused on counseling and home visits, addressed multiple risk factors (e.g., substance use, mental health), or parenting support for new mothers.

Perinatal Intervention and Support: The Domestic Violence Enhanced Home Visitation Program (DOVE) as an example

Sharps, P. W., Bullock, L. F., Campbell, J. C., Alhusen, J. L., Ghazarian, S. R., Bhandari, S. S., & Schminkey, D. L. (2016). Domestic violence enhanced perinatal home visits: The DOVE randomized clinical trial. *Journal of Women's Health*, *25*(11), 1129-1138.

Burnett, C., Crowder, J., Bacchus, L. J., Schminkey, D., Bullock, L., Sharps, P., & Campbell, J. (2021). "It Doesn't Freak Us Out the Way It Used to": An Evaluation of the Domestic Violence Enhanced Home Visitation Program to Inform Practice and Policy Screening for IPV. *Journal of Interpersonal Violence*, *36*(13-14).

- a brochure-based and safety planning intervention for pregnant women and mothers with infants experiencing interpersonal violence.
- Embedded into routine home visiting services for vulnerable mothers.
- Delivered primarily by home visiting nurses.
- Initial Screening.
- Three sessions during pregnancy and three during the postpartum period.
- 15-25 minutes each.
- Home visitors discussed each woman's individual experiences and tailored the intervention to her expressed needs and level of danger at each visit.

## Addressing p-IPV

The Role of the Police The police and the justice authorities play a crucial role as part of a multiagency public health approach.

- Receive emergency calls and victim reports.
- Arrest perpetrators
- Train specialist police officers and have specialist units.
- Enforce Restraining Orders (orden de alejamiento) and other immediate protection measures (medidas de protección inmediatas) imposed by the judge.
- Engage with other agencies such as victim support, social services, safe houses in a community approach which addresses risk management and safeguarding procedures.
- May assess risk for perpetrators at risk of recidivism.

# Conclusions



### Possible Policy Implications for Chile

Two suggestions



Addressing Adverse Childhood Experiences across the life-course of children may be a major strategy to reduce crime, related behavior problems, and a range of physical and mental health problems in adolescence and early adulthood in Chile.

Preventing domestic violence during and after pregnancy may be a major strategy to give children a healthy start, protect pregnant women and mothers from harm and trauma, and break the transmission of violence across generations.

# Possible Implications for Research in Chile

Four suggestions



No current study has examined Adverse Childhood Experiences and their association with adult outcomes in Chile.

Such a study could underpin a broad prevention strategy across the life course and focused on multiple stressors at all ages from prebirth.

There seems to be limited research on exposure to violence during and after pregnancy.

Such a study could help to strengthen the prevention and response systems in primary care settings.

Longitudinal studies underpin the case for developmental prevention over the life course.

A longitudinal study in Chile could help to advance long-term early prevention efforts.

The months before and after birth offer opportunities for prevention that strengthen the family and the child.

Evaluation studies of innovative preventive interventions could strengthen an integrated approach by the health and justice systems.

# Thank you for your attention!





Gestión de territorios para la prevención del delito y la violencia