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CONTACT:

[Kelli Marciel](#)

NIH Consensus Development
Program

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Panel Finds that Scare Tactics for Violence Prevention are Harmful

Good news is that positive approaches show promise

Bethesda, Maryland — Programs that rely on “scare tactics” to prevent children and adolescents from engaging in violent behavior are not only ineffective, but may actually make the problem worse, according to an independent state-of-the-science panel convened this week by the National Institutes of Health (NIH). The panel, charged with assessing the available evidence on preventing violence and other health-risking behaviors in adolescents, announced today its assessment of the current research.

The panel found that group detention centers, boot camps, and other “get tough” programs often exacerbate problems by grouping young people with delinquent tendencies, where the more sophisticated instruct the more naïve. Similarly, the practice of transferring juveniles to the adult judicial system can be counterproductive, resulting in greater violence among incarcerated youth.

“The good news is that a number of intervention programs have been demonstrated to be effective through randomized controlled trials,” explained Dr. Robert L. Johnson, Chair of the Department of Pediatrics at the University of Medicine and Dentistry of New Jersey, who chaired the state-of-the-science panel. “We were pleased to find several programs that work, and we hope that communities will adopt them and continue to develop other interventions that incorporate the features common to successful programs.”

The panel highlighted two programs that are clearly effective in reducing arrests and out-of-home placements: Functional Family Therapy, and Multisystemic Therapy. Among the important characteristics that these programs have in common are a focus on developing social competency skills, a long-term approach, and family involvement.

The panel also identified strengths and weaknesses in the field of violence prevention research, and made a number of recommendations to shape future efforts. Among these, the panel advocated a national population-based adolescent violence registry,

and greater emphasis on economic research into the cost-effectiveness of intervention to prevent violence.

The panel released its findings in a public session this morning, following two days of expert presentations and panel deliberations. The full text of the panel's draft statement will be available late today at <http://consensus.nih.gov>. The final version will be available at the same Web address in three to four weeks. Statements from past conferences and additional information about the NIH Consensus Development Program are also available at the Web site, or by calling 1-888-644-2667.

The panel is independent and its report is not a policy statement of the NIH or the Federal Government. The NIH Consensus Development Program, of which this conference is a part, was established in 1977 as a mechanism to judge controversial topics in medicine and public health in an unbiased, impartial manner. NIH has conducted 119 consensus development conferences, and 23 state-of-the-science (formerly "technology assessment") conferences, addressing a wide range of issues.

The conference was sponsored by the Office of Medical Applications of Research and the National Institute of Mental Health, of the NIH. Cosponsors included the Office of Behavioral and Social Sciences Research, the National Institute of Alcohol Abuse and Alcoholism, the National Institute of Child Health and Human Development, the National Institute on Drug Abuse, National Institute of Nursing Research, the National Library of Medicine, the Agency for Healthcare Research and Quality, the Centers for Disease Control and Prevention, the Substance Abuse and Mental Health Services Administration, the U.S. Department of Education, and the U.S. Department of Justice.

The 13-member panel included practitioners and researchers in community and family medicine, pediatrics, nursing, psychiatry, behavioral health, economics, juvenile justice, outcomes research, and a public representative. The panel reviewed an extensive collection of scientific literature related to youth violence prevention, including a systematic literature review prepared by the Southern California Evidence-Based Practice Center, under contract with the Agency for Healthcare Research and Quality. A summary of the Evidence Report on Preventing Violence and Related Health-Risking Social Behaviors in Adolescents is available at <http://www.ahrq.gov/clinic/epcsums/adolvisum.htm>.

The archived webcast of the conference sessions will be available shortly at <http://consensus.nih.gov/>.

Note to TV Editors: The news conference at 2 p.m. today will be broadcast live via satellite on the following coordinates:

Galaxy 3 Transponder 02 C-Band
Orbital slot: 95 degrees West
Downlink Freq: 3740 Vertical

Audio: 6.2/6.8

Test time: 1:30 p.m. ET

Broadcast: 2:00 - 3:00 p.m. ET

Note to Radio Editors: An audio report of the conference results will be available after 4 p.m. today from the NIH Radio News Service by calling 1-800-MED-DIAL (1-800-633-3425).

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