Summary Report

PREVENTING REVICTIMIZATION* AND USE OF AGGRESSION FOLLOWING GIRLS' MALTREATMENT: A LIFE COURSE APPROACH



Women and girls who experience childhood maltreatment are more likely to be victimized again or to use relational aggression later in childhood, adolescence, and/or adulthood.

One in three Canadian women will experience violence or abuse at least

once in their lifetime, often first during childhood, placing them at greater risk for later revictimization and/ or use of relational aggression. This lifetime exposure to violence has significant physical, psychological/emotional, behavioural, and interpersonal health consequences. Preventing violence and its health impacts requires attention to the systemic, social, and individual factors that affect the vulnerability, resources, resilience, and wellbeing of women and girls from childhood to adulthood. At the same time, it is important to remember that women and girls are diverse, and pathways to revictimization or use of relational aggression may be different for different individuals. This report provides an overview of research-based and promising programs to prevent and reduce revictimization and use of relational aggression among women and girls who have experienced childhood maltreatment.

FUNDAMENTALS TO REMEMBER:

- Identity is complex: Women and girls affected by violence may identify anywhere along the spectrum of gender identity (e.g. trans*, cisgender, genderqueer). Women and girls are diverse and may simultaneously identify with multiple groups (e.g. Indigenous, older, disabled).
- 2. Violence is a continuum: Violence occurs in many forms. This includes but is not limited to physical violence, sexual violence (e.g. assault, harassment), psychological violence, harmful sociocultural practices (e.g. female genital mutilation), and structural violence (e.g. sexism, ageism, racism).
- 3. Context is key: Violence, especially when it causes serious injury or death, is disproportionately perpetrated against women by men. Women who use violence often do so in the context of their own victimization. The broader social context (e.g. historical and current oppressions) impacts these lived experiences.

Focusing on women and girls does not mean that they are responsible for the occurrence or prevention of the violence they have experienced.

*This report uses the term "revictimization", which is commonly used to refer to the link between early and later experiences of victimization. However, we recognize that not all women and girls who have experienced violence identify with or use the term "victim."



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UNDERSTANDING THE CONNECTIONS BETWEEN MALTREATMENT AS A GIRL AND LATER REVICTIMIZATION/USE OF RELATIONAL AGGRESSION*

Both cross-sectional and longitudinal research finds links between childhood maltreatment and:

- maltreatment later in childhood
- bullying in childhood and adolescence
- sibling abuse or aggression in childhood and adolescence
- sexual assault and harassment in adolescence/ adulthood
- physical assault in adolescence/adulthood
- dating or intimate partner violence in adolescence/ adulthood

The **multi-level factors** that increase vulnerability to **revictimization** can generally be grouped as: (1) **those that increase the risk of both the initial and subsequent victimization** (e.g. poverty, gender inequality, parental substance use issues); and (2) **those that are set in motion by the initial experience of abuse** (e.g. affect dysregulation, low self-esteem, post-traumatic stress disorder). Most hypotheses on revictimization focus on the second group of factors, suggesting that alterations in psychological and psychosocial adjustment, abilities to recognize risk, and expectations of adult relationships increase vulnerability to later victimization. The first group of factors, however, are equally if not more important to address in preventing revictimization. Factors from each group can also interact with each other in complex ways across the life course.

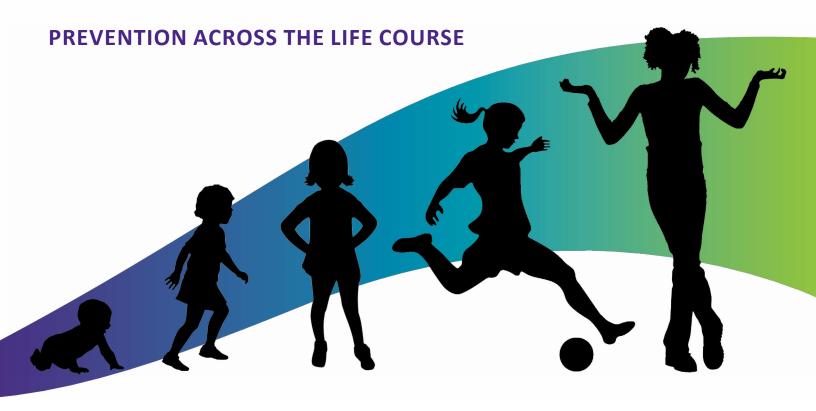
Most theories linking early victimization to later use of **relational aggression** are not gender-specific, and like revictimization models, focus primarily on individual factors. More work is needed in this area, but one promising approach is the feminist ecological model, which accounts for multiple complex interactions between **individual** (e.g. childhood maltreatment, psychological difficulties), **interpersonal** (e.g., parent criminality, peer pressure), **community** (e.g. neighbourhood violence), and **societal** (e.g. gender inequality, structural violence) risk factors.

While any experience of The use of relational aggression Lifetime exposure to violence, violence can impact the health by women and girls is intricately through both victimization and and well-being of survivors, linked to their early experiences use, has significant short- and revictimization typically involves of victimization, but more work long-term consequences for unique pathways, sequelae, and is needed to further examine health. Prevention efforts must implications for prevention. this relationship and understand consider women's and girl's gender-specific pathways. histories of violence.

REVICTIMIZATION ACROSS THE LIFE COURSE



*For a detailed review of these connections, please see our previous report and newsletter: **Report:** Links between the Maltreatment of Girls and Later Victimization or Use of Violence Report **Newsletter:** Issue 20: Links between the maltreatment of girls & later victimization or use of violence



CONTEXTUALIZING PREVENTION

Before reviewing existing prevention programs, it is important to remember the following:

1. Not all studies of prevention programs are based on only samples of women/girls and not all test for gender differences in effectiveness. It is possible a program may only work or work better for boys/men, especially with regard to use of relational aggression.

2. Women and girls with histories of victimization may have unique needs relative to those who have never experienced victimization. This might impact the effectiveness of prevention programs that do not consider past victimization. **3.** Due to the limited number of programs for reducing revictimization specifically, we also include programs for survivors of violence that reduce the consequences of victimization, which may in turn reduce vulnerabilities linked to revictimization.

4. Preventing violence from being disproportionately perpetrated by men and boys against women and girls in the first place is ideal. There is a need for community and societal-level interventions to address the root causes of gender-based violence (e.g. gender inequality, unhealthy masculinities, intersecting systems of oppression).

LEVELS OF PREVENTION

Primary prevention: aims to intervene before the occurrence of victimization or use of aggression by preventing the development of associated risk factors (e.g. limited educational opportunities, parental substance use).

Secondary prevention:

targets girls or women at high risk of experiencing victimization or using aggression, such as those who live in low-income neighborhoods. **Tertiary prevention:** takes place after victimization or use of aggression has been identified, with interventions intended to minimize the impact of victimization for survivors and decrease the risk of recurring use of aggression.

RESEARCH-BASED VICTIMIZATION PREVENTION PROGRAMS*

	Infancy/ pre-school	School age	Adolescence/ young adulthood	Adulthood
Primary prevention		Walk Away, Ignore, Talk, Seek Help (WITS)	Enhanced Assess, Acknowledge, Act Sexual Assault Resistance Program	
Secondary prevention	Nurse-Family Partnership Healthy Start Program Psychoeducational parenting intervention		Web-based Combined Sexual Assault Risk and Alcohol Use Reduction Program	
Tertiary prevention	Child-Parent Psychotherapy	Community-provided Trauma-focused Cognitive Behaviour Therapy Community-Based Intervention Program Project Support I & II Strengths- and Community-Based Support and Advocacy	Multisystemic Therapy DePrince Group Interventions Revictimization Prevention Program Sexual Assault Risk Reduction Program	Healing Our Women Project

*Programs highlighted in **blue** are specific to girls/women and/or revictimization.

*Programs included if they reduced relevant risk factors or increased protective factors.

RESEARCH-BASED RELATIONAL AGGRESSION PREVENTION PROGRAMS*⁺

	School age	Adolescence/young adulthood
Primary prevention	I Can Problem Solve (ICPS)	Sisters of Nia
	Life Skills Training	Safe Dates Program
	Promoting Alternative Thinking	The Fourth R
	Strategies (PATHS)	Families for Safe Dates Program
	Second Step	
Secondary prevention	Linking the Interests of Families and	Safe Dates Program
	Teachers (LIFT)	Moms and Teens for Safe Dates
	Seattle Social Development Project	
Tertiary prevention	Making Choices: Social Problem Skills for Children	Multi-dimensional Treatment Foster Care
	Friend to Friend (F2F)	Functional Family Therapy
		Multisystemic Therapy
		Youth Relationships Project

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*Programs included if they reduced relevant risk factors or increased protective factors.

PROGRAM IN FOCUS: THE ENHANCED ASSESS, ACKNOWLEDGE, ACT SEXUAL ASSAULT RESISTANCE PROGRAM

- Developed, pilot-tested, and implemented in Canada by <u>Dr. Charlene Senn</u> (University of Windsor).
- Consists of four 3-hour units which aim to teach young women how to assess risk, acknowledge danger, and engage in verbal or physical self-defence.
- Evidence from a randomized controlled trial involving three Canadian universities indicates that women who participated in the program had a significantly lower risk of both reported attempted sexual assault and reported completed sexual assault one year later.
- The program was found to be effective for both women who had experienced prior victimization and women who had not.
- After two years, the program was still found to significantly reduce the risk of attempted and completed sexual assault, as well as attempted coercion and non-consensual contact by 30-64%.
- Significant increases were also found in perceptions of personal risk, risk detection, self-defence, self-efficacy, and knowledge of effective verbal and physical resistance strategies.

PROGRAM IN FOCUS: FRIEND TO FRIEND (F2F)

- School-based program designed for urban, mostly African American fifth-grade girls.
- Goals: reduce physical and relational aggression, improve problem-solving skills, increase prosocial behaviours.
- Developed in collaboration with parents, teachers, community members, and girls themselves using a participatory action framework.
- Highly accepted by participants and their teachers and is considered culturally sensitive.
- Relationally aggressive girls are grouped with prosocial role models.
- Found to significantly decrease relational and physical aggression, loneliness, and hostile attributions.
- Found to significantly increase prosocial behaviour, problem-solving abilities, and peer likability (as reported by teachers).

PROMISING VICTIMIZATION/AGGRESSION PREVENTION PROGRAMS**

	School age	Adolescence/young adulthood	Adulthood
Primary prevention	Early Childhood Friendship Project	Sexual Assault Education and Prevention Program (V) The Fourth R: Uniting Our Nations	
Secondary prevention		MAC-UK (RA)	
Tertiary prevention		Trauma Systems Therapy (RA) Brief Acceptance and Mindfulness-Based Program (V)	Intensive Treatment Program for Female Offenders (RA) Spirit of a Warrior Program (V/RA) Sexual Assault Education/ Prevention Program for Female US Navy Personnel (V)

*Programs highlighted in **blue** are specific to girls/women and/or revictimization.

V=Victimization prevention; RA=Relational aggression prevention

PREVENTION PROGRAMS WITH APPLICATIONS ACROSS LIFE STAGES*

Program	Level of Prevention	Prevention of Victimization or Relational Aggression
Incredible Years Program	Primary	Victimization
Raising Healthy Children	Primary	Relational Aggression
Triple P Parenting Program	Primary/secondary	Victimization
Strengthening Families Program	Primary/secondary	Victimization
Olweus Bullying Prevention Program	Primary/secondary	Relational Aggression
Brief Strategic Family Therapy	Secondary	Relational Aggression
Parent-Child Interaction Therapy	Secondary	Victimization
Trauma-focused Cognitive Behavioural Therapy	Tertiary	Victimization
Game-based Cognitive Behavioural Therapy	Tertiary	Victimization
Dialectical Behaviour Therapy	Tertiary	Victimization
Multisystemic Therapy	Tertiary	Victimization

*For more information on each program, please see our full report

DEVELOPING PROTECTIVE RESOURCES AND RESILIENCE

Beyond focusing on reducing risk factors, building strengths and promoting resilience may be especially important to preventing revictimization and future use of aggression by girls/women who have experienced childhood maltreatment.

Although many of the



prevention programs listed in this report include components to develop protective resources, little research has actually examined what factors may have been involved to prevent revictimization among survivors of early abuse or violence who never experienced subsequent victimization or use of aggression.

Higher levels of protective factors in adolescence among youth with high levels of cumulative risk exposure may be particularly important for reducing later odds of violence. BREAKING THE LINK BETWEEN EARLY VICTIMIZATION AND LATER REVICTIMIZATION OR USE OF AGGRESSION

KEY PROTECTIVE FACTORS:

- Self-efficacy
- Sense of mastery
- Proactive coping
- Situational assertiveness
- Empowerment strategies
- Self-esteem
- Emotional regulation strategies

PREVENTION APPROACHES:

SOCIETAL-LEVEL

Violence against women and girls is ultimately a systemic issue, rooted in gender inequality.

Achieving gender equality involves removing all legal, social, and economic barriers to women's and girls' empowerment.

This requires policy changes and programs to:

- Eliminate childhood poverty
- Increase access to educational and economic opportunities
- Recognize and reduce unpaid work
- Achieve food security
- Increase access to clean water and sanitation
- Make all urban and rural areas safe, inclusive, and sustainable
- Challenge gender norms and attitudes
- Raise awareness of gender-based violence

COMMUNITY-LEVEL

Neighbourhood risk factors are among the most salient and consistent predictors of violence.

Community interventions must focus on:

- Reducing poverty
- Increasing safety and neighbourhood cohesion
- Economically empowering women
- Addressing gender norms and attitudes
- Engaging men and boys as partners in ending violence against women and girls

CONSIDERATIONS AND FUTURE DIRECTIONS

Childhood maltreatment and later revictimization or use of relational aggression are strongly associated. This link is not inevitable and has important implications for prevention. **KEY** Prevention involves addressing complex, multi-level factors and requires coordination between **MESSAGES** all stakeholders and sectors who directly or indirectly provide services to women/girls who have experienced victimization/use aggression. Women and girls are not responsible for the violence they have experienced, but work can be done to reduce vulnerabilities and promote resilience while simultaneously working to end gender-based violence in society overall. Can programs intended to prevent initial victimization or reduce its consequences effectively disrupt the pathway toward additional victimization? **UNANSWERED** What are the gender-specific pathways and risk factors from childhood maltreatment to later QUESTIONS use of relational aggression by women and girls? Do existing programs work for diverse groups of women/girls or are more culturally sensitive programs needed? Develop a girl/woman-centered approach to victimization and use of aggression prevention. Include revictimization and use of aggression as possible outcomes of child maltreatment and **NEXT STEPS** work to reduce this risk within existing programs. Focus on diversity: women's and girls' experiences of victimization and use of aggression are directly related to their status within a gendered society AND are simultaneously shaped by additional social locations and systems of oppression (e.g. racism, homophobia, transphobia, poverty, ableism, ageism, place of residence, colonization). Conduct longitudinal, intersectionality-informed, mixed-methods research to identify the • salient signposts at different stages of development for different groups of girls/women along

pathways of safety and nonviolence to better inform prevention programs.

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