



Original article

High School Students in a Health Career Promotion Program Report Fewer Acts of Aggression and Violence

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A B S T R A C T

Purpose: This study examined the effects of two school-based programs on the perpetration of nonphysical aggression, physical violence, and intimate partner violence among high-risk secondary school students in an economically disadvantaged and predominantly Latino school district. The intervention program was El Joven Noble, and the control program was the Teen Medical Academy.

Methods: The study used a repeated-measures quasi-experimental intervention/control design. The participants self-reported the previous 30 days' acts of nonphysical aggression, physical violence, and intimate partner violence at baseline and at 3 and 9 months after enrollment. Program- and grade-level effects at 3 and 9 months were examined using three-factor analyses of covariance models with one factor for repeated measures. The covariate in each of the models was the baseline measure of the dependent outcomes.

Results: No significant baseline differences were found between the participants in the intervention ($n = 96$) and control ($n = 127$) programs. At 9 months after enrollment in the study, high school students who participated in the Teen Medical Academy reported fewer acts of nonphysical aggression ($p < .001$) and physical violence ($p = .002$) than high school students who participated in El Joven Noble. Students who participated in the Teen Medical Academy also reported fewer acts of intimate partner violence ($p = .02$) than students who participated in El Joven Noble.

Conclusions: High school students who participated in a health career promotion program reported fewer acts of aggression and violence as compared with high school students who participated in a culturally tailored character development program.

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IMPLICATIONS AND
CONTRIBUTION

Violence persists as the second leading cause of adolescent mortality and disproportionately affects ethnic minority youth. The study findings suggest that a health career promotion program may be an effective Latino youth violence prevention strategy. The effects of this type of intervention on youth violence have not been previously reported.

Violence continues to be a major source of mortality and morbidity for youth in the United States. On an average, 14 young people between the ages of 12 and 24 in the United States die from homicide each day [1]. This makes violence the second leading cause of death for American adolescents and young adults [2].

Significant racial and ethnic disparities exist with regard to youth violence. The youth homicide rates for African American,

Latino, and non-Latino whites are 32.4, 11.8, and 2.5 per 100,000, respectively [1]. Violence persists as the leading cause of death for African American youth, and Latinos are nearly five times more likely to be victims of homicide than non-Latino white youth [2,3]. Although the homicide rate for African American youth is higher, in the southwestern United States (Arizona, California, Colorado, Nevada, New Mexico, Texas, and Utah), more Latinos than African Americans die because of homicide [2]. Currently, 24% of the children in the United States are Latino [4]. As the proportion of Latino youth continues to rapidly increase, finding effective violence prevention strategies for youth in Latino communities becomes increasingly important.

As compared with students in regular public schools, Latino students in alternative schools are twice as likely to experience

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violence [5,6]. Results of the National Alternative School Youth Risk Behavior Survey showed that 60% of Latino students in alternative schools had been in a physical fight in the previous 12 months and 34% had carried a weapon in the previous 30 days. Twenty-five percent of them had been in a physical fight on school property and 16% had been threatened or injured with a weapon on school property in the past 12 months [6]. The 2009 Youth Risk Behavior Survey indicated that 12% of Latino high school students had been hit or slapped by an intimate partner in the past 12 months, and 8% had been forced to have unwanted sexual intercourse at some point during their lives [7].

Systematic reviews have shown that school-based violence interventions, especially those designed to improve relationship or social skills, can decrease aggressive behaviors [8–10]. Violence prevention programs demonstrate increasing effectiveness as the level of intervention increases from primary to tertiary [11]. Consistent with these reviews, a previous prospective school randomized controlled trial demonstrated that participation in *El Joven Noble*, a culturally tailored character development program, was effective as a secondary violence prevention strategy among elementary schoolchildren in an economically disadvantaged and predominantly Latino school district [12].

In this study, a multidisciplinary team of academic researchers address Latino youth violence by continuing to partner with the same local community and school district. The purpose of this study was to determine the effects of participation in *El Joven Noble* on the perpetration of violence among high-risk middle and high school youth in the district's alternative school, the Disciplinary Alternative Education Program (DAEP). The study examines program effects on the perpetration of acts of nonphysical aggression, physical violence, and intimate partner violence. The Teen Medical Academy, a health career promotion program, was implemented as the control program [13].

We hypothesized that students who participated in the intervention program, *El Joven Noble*, would report fewer acts of aggression and violence than students who participated in the control program, the Teen Medical Academy.

Methods

Protection of human subjects

The study protocol was reviewed and approved by the Institutional Review Board of the University of Texas Health Science Center at San Antonio, TX. A Certificate of Confidentiality was obtained from the National Institutes of Health. Parental consent and child assent was obtained in writing before participation in the study.

Study setting

The study was conducted with students in the DAEP of one economically disadvantaged and predominantly Latino school district. Students are referred for placement in the DAEP from five middle and three high schools. On average, 300 students are placed in the DAEP each year. Approximately 70% of the students are referred for violence, and 30% are referred for substance use. The most frequent violence-related offenses are persistent disruptive conduct, mutual fighting, assault on another student, and participation in gang activity. The most frequent substance use offenses are possession, distribution, or use of marijuana or other controlled substances. Both middle and high school DAEP stu-

dents attend school on the same campus, but in grade-segregated classrooms. Most students are placed in the DAEP for 6 weeks.

Study design

The study used a quasi-experimental intervention/control with repeated-measures design. In year one, high school students in the DAEP were invited to participate in *El Joven Noble*, and middle school students in the DAEP were invited to participate in the control program, the Teen Medical Academy. In year two, high school students in the DAEP were invited to participate in the Teen Medical Academy, and middle school students in the DAEP were invited to participate in *El Joven Noble*. Previous participation in either arm of the study was an exclusion criterion in year two.

A continual recruitment, enrollment, and withdrawal design that matched the flow of students in and out of the DAEP was used. As students entered the DAEP, they were invited to participate in the study. After obtaining parental consent and child assent, students were eligible to participate for the duration of their placement. Thus, at each session, it was possible for new students to join, whereas others withdrew from the study.

Description of the intervention and control programs

Both the intervention and control programs consisted of a series of eighteen 45-minute sessions that were conducted twice a week. Participants opted out of their daily life skills class on Tuesdays and Thursdays to participate. In this study, students participated in a mean of 6.4 sessions.

El Joven Noble is a culturally tailored character development program that focuses on establishing and maintaining healthy relationships with self, family, intimate partners, community, and culture (J. Tello, unpublished data, 2003). It uses a variety of interactive educational strategies, including storytelling, small group discussions, crafts, and Native American talking circles. The activities strive to facilitate an attachment to, a commitment to, an involvement with, and a belief in a nonviolent cultural identity that replaces violence-provoking norms and attitudes with beliefs that support harmony and balance in all relationships. In a previous community-based participatory action violence prevention research study, local community members selected *El Joven Noble* as an intervention and were trained to implement the program with elementary schoolchildren [12]. In this study, three trained and experienced Latino community facilitators and a Latino project coordinator implemented the sessions of *El Joven Noble*. The facilitators and project coordinator were in their late forties.

The Teen Medical Academy is a health career promotion program that focuses on common medical conditions frequently managed by primary care physicians [13]. The sessions focus on teaching human anatomy and pathology using hands-on diagnostic and therapeutic medical equipment. In the Teen Medical Academy sessions, participants learned how to manage and treat lacerations, nondisplaced fractures, asthma, heart attacks, liver disease, and gallstones. One Family Medicine faculty member, one Family Medicine resident (while on a Community Medicine rotation), one trained community facilitator, and a project coordinator implemented the sessions of the Teen Medical Academy. The average age of the Family Medicine residents was about 30 years; the other facilitators were in their late forties.

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