A Literature Review: Strategies on Youth Violence

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Abstract: **The current literature review was done to make an account of Youth Violence and its preventive strategies. Youth Violence is an increasing concern of our society and is surprisingly growing each passing day. Its growth lies beneath the development of the individual. The numerous factors nurturing it are also the parts of the society and know the least to minimize or help the individual to overcome it. Also, many of the interventions do not end up being fruitful as they are not designed to fit the needs of the individual. This study covers strategies that are carefully picked and selected by their effectiveness to prevent youth violence. These strategies will help to empower each member of the society to help the individual to overcome the issue and thereby contributing to create peaceful and healthy environment.**

Keywords: **interventions, society, strategies, youth, youth violence**

1. Introduction

The behavior of an individual is the underlying impression that is formed by each one of us. Though, we propagate the belief that we should not judge the book by its cover. Our perception of a situation might not be the same with the person sitting next to us. And in this way, we respond differently to the same situation. For example: in anger one might leave the room while the other might resolve it some or the other way. With this perspective we address the topic of aggression and violence in Youth. Aggression initiates with anger (comprising lesser degree) and an emotion which directs our discomfort with the object/person/thing. While Violence is a higher degree of anger in which there exists purposeful harm especially physically. The acts of violence and aggression are distinctly visible, and they are the major concern of parents/ counselors /schools/ community especially talking of youths. They are most of the global population and are harnessed by different ways of responding aggressively. By addressing this topic, we would understand to why particularly youth are now-a-days aggressive and violent.

1) Violence

World Health Organization defined violence in the World report on violence and health (2002) as: "the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal development, or deprivation." Oxford dictionaries define Violence as: Behavior involving physical force intended to hurt, damage, or kill someone or something." Violence an act of physical force that causes or is intended to cause harm. The damage inflicted by violence may be physical, psychological, or both. Violence may be distinguished from aggression, a more general type of hostile behavior that may be physical, verbal or passive in nature. The World report on violence and health presents a typology of violence to understand the contexts in which violence occurs and the interactions between types of violence. They are:

- Self-directed violence refers to violence in which the perpetrator and the victim are the same individual and is subdivided into self-abuse and suicide.
- Interpersonal violence refers to violence between individuals and is subdivided into family and intimate partner violence and community violence. The former category includes child maltreatment; intimate partner violence; and elder abuse, while the latter is broken down into acquaintance and stranger violence and includes youth violence; assault by strangers; violence related to property crimes; and violence in workplaces and other institutions.
- Collective violence refers to violence committed by larger groups of individuals and can be subdivided into social, political, and economic violence.

Developmental Antecedents: How do people become violent? To find effective ways to prevent or ameliorate a child's or youth's propensity toward violence, psychology has devoted much attention to this question. Although no definitive answer yet exists that would make it possible to predict exactly which individuals will become violent, many factors have been identified as contributing to a child's risk profile. Biological factors, child rearing conditions, ineffective parenting, emotional and cognitive development, gender differences, sex role socialization, relations to peers, cultural milieu, social factors such as economic inequality and lack of opportunity, and media influences, among others, all are thought to be factors that contribute to violent behavior. Psychologists

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continue to search for a unified theoretical model that can account for these factors and assign them appropriate weight as risk factors for a child's or adolescent's involvement in violence as a perpetrator, victim, bystander, or witness. The strongest developmental predictor of a child's involvement in violence is a history of previous violence. Although the form and the absolute level of an individual's aggression varies considerably throughout the lifespan, an individual's relative level of aggression among age-mates shows remarkable continuity and predictability over time. Children and youth also show substantial consistency in their relative level of violence across social domains even though their absolute level typically differs considerably from setting to setting. This consistency across time and social domain may persist into adulthood, despite the well-known process of "maturing-out" of many antisocial behaviors. A few factors contribute to keeping the pattern consistent; however, many of these factors are alterable, especially at the earlier stages of child development. For this reason, effective intervention for aggressive and violent behavior in childhood is critical, and the earlier the better.

2) Youth Violence

Youth violence is the intentional use of physical force or power to threaten or harm others by young people ages 10-24. It typically involves young people hurting other peers who are unrelated to them and who they may or may not know well. Youth violence can take different forms. Examples include fights, bullying, threats with weapons, and gang-related violence. Determinants of Youth Violence

3) Individual Factors

At the individual level, factors that affect the potential for the violent behavior include biological, psychological, and behavioral characteristics. These factors may already appear in childhood or adolescence, and to varying degrees they may be influenced by the person's family and peers and by other social and cultural factors. One risk factor for youth violence is gender. According to Kimmel & Mahler (2003) the most important aspect of gender in violence is the power of control which is usually associated with masculinity. Also, according to Paulhus et al (2018) in some individuals anger is poorly regulated increases the chances of violent behavior. This behavior is related to traits like psychopathy, sadism etc. Many researchers like Philips et al (2003) have highlighted the fact that some individuals have strong liking for weapons which also increases the drive within an individual to react to situations violently.

4) Psychological and Behavioral Characteristics

Among the major personality and behavioral factors that may predict youth violence are hyperactivity, impulsiveness, poor behavioral control, and attention problems. Nervousness and anxiety, though, are negatively related to violence. According to the World Health Organization the main factors are history of early aggressive behavior and low educational achievement.

5) Relationship Factors

Factors associated with the interpersonal relations of young people – with the family, friends, and peers- can also strongly affect aggressive and violent behavior and shape personality traits that, in turn, contribute to violent behavior. The influence of families is usually the greatest in this respect during childhood, while during adolescence friends and peers have increasingly important effects. Many researchers have pointed out the main reason behind strained is communication. And because of which the emotions pent up leading to frustration which results in aggression.

6) Family Influences

Parental behavior and the family environment are central factors in the development of violent behavior in young people. Poor monitoring and supervision of children by parents and the use of harsh, physical punishment to discipline children are strong predictors of violence during adolescence and adulthood.

7) Peer Influences

Peer influences during adolescence are generally considered positive and important in shaping interpersonal relationships, but they can also have negative effects.

8) Community Factors

The communities in which the young people live are an important influence on their families, the nature of their peer groups, and the way they may be exposed to situations that lead to violence.

9) Societal Factors

Several societal factors may create conditions conducive to violence among young people. They include:

a) *Demographic and social changes*- Rapid demographic changes in the youth population, modernization, emigration, and urbanization are linked with increase in youth violence.

b) *Income inequality*- or socioeconomic status also hampers the holistic development and mental health as well. According to American Psychological Association, a low socioeconomic status like ill health, poverty etc. in one way or the other affects our society. The inability to fulfill the necessities of life develops frustration which further leads to aggression among individuals.

c) *Political structures* – The quality of governance in a country, both in terms of legal framework and the policies offering social protection, is an important determinant of violence. In particular, the extent to which a society enforces its existing laws on violence, by arresting and prosecuting offenders can act as a deterrent against violence.

d) *Cultural influences*- Culture which is reflected in the inherited norms and values of society, helps determine how people respond to a changing environment. Cultural factors can affect the amount of violence in a society- for instance, by endorsing violence as a normal method to resolve conflicts and by teaching young people to adopt norms and values that support violent behaviors. It is thus a significant determinant of behavior. Violence is woven into the fabric of many societies and is a part of a set of rules that direct behavior and help shape group identities. For example, hitting children is culturally accepted usually and the same is transferred as a belief to the children a way to overcome conflicts. Gender stereotypes reinforce the concept of the right of a husband to dominate his spouse which is exercise through domestic violence.

At the community extent, rules and regulations regarding community participation and shared self-help have important inference for community cohesiveness and consequently for the degree of violence as well.

Also, one important means through which violent images, norms and values are propagated is the media. Exposure of children and young people to various forms of the media have increased dramatically in recent years. So, we can say that prevalence of social and cultural factors of violence has significant implications for violence prevention and intervention programs. Violence prevention programs, which do not address cultural norms are at greater risk of not being effective in the long run.

10) Significance of Birth Order in Youth Violence

Birth order refers to the order in which a child is born in the family. The birth order can be divided into three categories:

    a) First born.
    b) Middle born (children born after first born and before last born)
    c) Last born.

Adler, (1928) in his work "characteristics of the first, second and third born child' explained why middle born children are more prone to commit some deviant activity. According to him, first born follow societal values and norms and tend to be ideal. While the middle-born face competition leading to anxiety, sibling rivalry, strain etc. Tygart (1991) explains that there exists a curvilinear relationship between birth order and delinquency. This curvilinear relationship may be the reason why middle order children lack parental supervision and love. Many studies claim that the relationship between development of deviant behavior and birth order exists. And later born are more prone in committing a crime than the first born. (Rahav1980, Argy et.al 2006, Begue and Roche 2005, Cundiff, 2013). According to Sulloway (1996) later borns have the tendency to revolt in comparison to the first born. The cause of this being rivalry that develops over parental attachment and resources. (As cited in Cundiff, 2013, p. 3-4).

11) Sibling Influence

Many researchers have studied the role of siblings in the development of criminal behavior based on several contexts: different countries, different kinds of sibling pairs, self-reporting versus official data, several kinds of crime. The relation that exists between elder and younger siblings' delinquency be connected to various factors. First, elder siblings who have committed certain delinquent activity may act as a role model during early adolescence (10 – 14 years of age) of their younger siblings and the later will begin to experiment with delinquent behavior (Patterson, 1984). Secondly, some younger siblings may conclude that participating in delinquent activities will increase their value and popularity among their peers, particularly if their elder sibling is apparently popular for such conduct.

Social learning theory and Patterson (1984) suggests that younger siblings will be likely to follow the behavior of their older siblings due to the process of social learning. Social learning theory explains that people learn certain behavior and attitude from others by observing them and in due course of

time they modify their behavior to the extent of the observed behavior (Bandura, 1978). Similarly, it can be said in case of siblings, a child may observe criminal behavior of his or her sibling(s), learn from it, and eventually show criminal behavior himself or herself. They follow their siblings when they see their sibling's behavior as a successful way of attaining a goal, for example, to gain popularity among friends. Genetic traits too can play an important role in explaining the similarity in offending behavior by siblings than between unrelated persons (Beaver, 2013 and Farrington et.al, 2001).

12) Role of Gender in Aggression

Gender refers to socially constructed roles of men and women. These roles are predetermined before the birth of the individual, and it is expected out of them to behave accordingly. Many studies have evaluated the role of gender in aggression. According to them, both boys and girls are equally verbally aggressive. Girls use indirect ways to show their aggression. This might be since they have close relations with people with whom they can share things.

On the other hand, men react physically in anger. Some believe this is due to the physical strength and have small peer groups. This is the only difference that lies between the two. It is a myth that women cannot be aggressive but recent studies have totally disregarded this. Researchers have shown that the difference lies in the perspective. Since both have different perspectives due to the different evolution criteria, they hold different viewpoints.

2. Literature Review

1) Risk Factors in Childhood

The first decade of an individual's life is a vast period of human development. Infants develop form attachments to parents or other loving adults and begin to become aware of themselves as separate beings. As toddlers, they begin to talk, to stress themselves, to explore the world around them, and to extend their emotional and social bonds to people other than their parents.

The start of school is a milestone in a child's continuing social and intellectual development. Other children start to turn out to be more important in their lives, though still not as important as family members. They begin to empathize with others and hone their sense of right and wrong. As they progress through elementary school, children gain valuable reasoning to situations and problem-solving skills as well as social skills.

Exposure to violence or involvement in any form of violence can disrupt normal development of both children and adolescents. Which can have profound effects on their mental, physical as well as emotional health. In addition, exposure to violence affects children and adolescents differently at different stages of development (Marans & Adelman, 1997). Young children who are exposed to violence may have nightmares or be afraid to go to sleep, fear being left alone, or regress to earlier behavior, such as baby talk or bed-wetting. They may exhibit excessive irritability or excitability. Violence in the family, especially, may inhibit young children's ability to form trusting relationships and develop independence. Elementary school children who live in violent neighborhoods can experience

sleep disturbances and be less likely to explore their environment. In addition to this, they can become frightened, anxious, depressed, and aggressive. They may also have trouble concentrating in school. As they understand that violence is intentional, they may constantly think about what they could have done to prevent or stop it (Osofsky, 1999).

Violence affects the parents as well. Adults living in violent households or neighborhoods may not be able to keep their children safe or to protect them from harmful influences. Some parents living in unsafe neighborhoods do not let their children play outside to prevent their children from witnessing or getting hurt by the violence. While this solution may safeguard children temporarily, it can also impede healthy development of the child. Parents in these situations understandably feel helpless and hopeless. Those who have been traumatized by violence themselves may, like their children, become anxious, withdrawn, or depressed. Under such circumstances, parents cannot respond spontaneously and joyously to their children, making it difficult for children to develop strong, secure attachments to their parents. Forming a bond with a loving, responsive parent or other adult caregiver is an essential factor in healthy development children and families exposed to or involved in violence may want to seek professional advice in addressing their mental, physical, and emotional health concerns. (Furstenberg et al., 1999; Osofsky, 1999; Patterson & Yerger, 1997).

2) Risk Factor Domain

A few risk factors for youth violence occur before birth. Others come into play as the child develops in response to his or her family and surroundings. Thus, most of the risk factors that exert an effect before puberty are found in the individual and family domains rather than in the larger world, a situation that changes dramatically in adolescence. The risk factors by domain are:

3) Risk factors by Individual

The most powerful early risk factors for violence at age 15 to 18 are involvement in general offenses and substance use before age 12. General offenses include serious, but not necessarily violent acts, such as burglary, grand theft, extortion, and conviction for a felony. Children engaging in such crimes often come to the attention of the police and juvenile justice system. Numerous studies have documented the overlap between serious nonviolent and violent offenses in adolescence, so early involvement in serious offenses carries a substantial risk for violence later.

Experimentation with drugs, alcohol, tobacco, or some combination of these substances is not particularly unusual by age 18 but use of these substances by children under the age of 12 is. Not only are these substances harmful to health, but they are also illegal. Thus, use of these substances signals antisocial attitudes and early involvement in a delinquent lifestyle that often comes to include violent behavior in adolescence (Fagan, 1993). Two moderate risk factors emerge in childhood, being male and aggression. Boys (and young men) are far more likely than girls to be violent, yet some researchers have suggested that sex is a risk marker rather than a risk factor (Earls, 1994; Hawkins et al., 1998a; Kraemer et al., 1997). A risk marker is a

characteristic or condition that is associated with known risk factors but exerts no causal influence of its own (Earls, 1994; Patterson & Yoerger, 1997). For example, many more boys than girls are hyperactive; a risk factor with a small effect size, so some of the predictive power of being male may actually be the influence of hyperactivity. Moreover, boys have traditionally been exposed to more violence than girls, and socially approved male role models are more aggressive, suggesting that social learning plays a role in this risk factor. However, research indicates that being male confers risk even after accounting for other known risk factors. This suggests that being male is a risk factor rather than a risk marker, perhaps with some biological or biological-environmental interaction as the causal mechanism.

The remaining individual risk factors have relatively small effect sizes. Various psychological conditions, such as hyperactivity, impulsiveness, daring, and short attention span, pose a small risk for violence. A consistent individual predictor is hyperactivity/low attention, the central components of attention-deficit/hyperactivity disorder (ADHD), a cognitive disorder that may be genetically influenced in some way (Hawkins et al., 1998a). ADHD is characterized by restlessness, excessive activity, and difficulty paying attention, traits that may also contribute to low academic performance, a risk factor in school. Hyperactivity is often found in combination with physical aggression, another risk factor. Some researchers question the independent effect of hyperactivity on later violence, suggesting that the effect is physical aggression (and perhaps low academic performance) that was not controlled for in earlier studies of hyperactivity (Nagin & Tremblay, 1999). There is little agreement about the mechanism linking hyperactivity to violence.

The effects of children's exposure to television and film violence have been studied extensively about aggression, but there is relatively little research regarding the effects on more serious forms of violent behavior. Experimental studies have found that exposure to media violence has a small average effect size (.13) on serious forms of violence (Paik & Comstock, 1994); the average effect size in cross-sectional survey studies was very small (.06). Two frequently cited longitudinal studies have examined the effects that exposure to television violence in childhood produces on violent behavior during adolescence or early adulthood. One, in which participants reported having punched, beaten, or choked someone as young adults, found a significant predictive effect for women (.22) but no significant effect for men (Huesmann et al., (submitted)). The other study, in which teenage males reported being involved in a knife fight, car theft, mugging, gang fight, or similar delinquent behavior, found a statistically significant predictive effect in only one of nine tests (Milavsky et al., 1982). Exposure to violence appears to have a weak predictive effect on relatively immediate violence in experimental studies, but there is little consistent evidence to date for a long-term predictive effect. Little research has been done on violence in other media video games, music videos, and the Internet. A recent meta-analysis by Anderson and Bushman (in press) reports that video game violence has a small

average effect size (.19) on physical aggression in experimental and cross-sectional studies. Theoretically, the influence of these interactive media might well be greater than that of television and films, which present a passive form of exposure, but there are no studies to date of the effects of exposure to these types of media violence and violent behavior. Problem behavior, another risk factor with a small effect size, refers to relatively minor problem behaviors such as stealing, truancy, disobedience, and temper tantrums. While not serious in themselves, antisocial behaviors may set the stage for more serious nonviolent or violent behavior later.

The medical or physical risk factor includes several conditions that as a group are somewhat predictive of violence. Prenatal and early postnatal complications, a more specific set of medical conditions, have been found to have inconsistent effects across several studies (Hawkins et al., 1998c). These complications encompass a broad group of genetic conditions or physical injuries to the brain and nervous system that interfere with normal development, including low birth weight, oxygen deprivation, and exposure to toxins such as lead, alcohol, or drugs (Hawkins et al., 1998b). Low resting heart rate, a condition that has been studied primarily in boys, is associated with fearlessness or stimulation seeking, both characteristics that may predispose them to aggression and violence (Raine et al., 1997; Hawkins et al., 1998c), but there is not enough evidence to establish this condition as a risk factor for violence. Some studies have even questioned its effects on aggression (Van Hulle et al., 2000; Wadsworth, 1976; Kindlon et al., 1995.

Low IQ, or low intelligence, includes learning problems and poor language ability. This risk factor has a small effect size and is often accompanied by other risk factors with small effect sizes, such as hyperactivity/low attention and poor performance in school. Antisocial beliefs and attitudes, including dishonesty, rule-breaking, hostility to police, and a generally favorable attitude toward violence, usually constitute a risk factor in adolescence, not childhood (Hawkins et al., 1998c). Only dishonesty in childhood is predictive of later violence or delinquency, and its effect is small.

Psychological conditions, notably restlessness, difficulty concentrating, and risk taking, have small effect sizes in adolescence. Restlessness and difficulty concentrating can affect performance in school, a risk factor whose importance increases slightly in adolescence. Risk taking gains predictive power in early adolescence, particularly in combination with other factors, a reckless youth who sees violence as an acceptable means of expression, for example, is more likely to engage in violent behavior. Aggressiveness exerts a small effect on later violence among adolescent males, as does simply being male. While aggressiveness is unusual in children between the ages of about 6 and 10, it is not terribly unusual in adolescence. Similarly, physical violence and crimes against persons in early adolescence have a small effect on the likelihood of violence at ages 15 to 18.

Antisocial attitudes and beliefs, including hostility toward police and a positive attitude toward violence, are more important predictors among adolescent boys than they are

among children, but their effect sizes remain small. Antisocial behavior and low IQ continue to have small effect sizes in adolescence. Substance use, which was a strong predictor of later violence for children, poses a small risk of later violence for adolescents. The question as to whether drug use causes young people to become violent is complex and has been widely studied (see Miczek et al., 1994 for a review), but there is little compelling pharmacological evidence linking illicit drug use and violence. In one large study, youths reported that over 80 percent of the violent incidents they initiated had not been preceded by drug use, including alcohol use (Huizinga et al., 1995). Thus, the risk may lie more in the characteristics of the social settings in which drug use and violence are likely to occur than in any effect of drugs on behavior (Parker & Auerhahn, 1998; Reiss & Roth, 1993).

The majority of violent adolescent offenders use alcohol and illicit drugs. Illicit drug use tends to begin after the onset of violence and to be associated with more frequent violent behavior and a longer criminal career (Elliott et al., 1989). This finding suggests that drug use may contribute to continued violence rather than to the onset of violence, but it is far from conclusive. Evidence shows that some violent behavior stems from robberies or other attempts to get money to support a drug habit but also that this link is relatively rare. If any substance can be said to cause youth violence, that substance is alcohol (APA, 1993; Parker & Auerhahn, 1998); however, this causal link is inconclusive because adolescent drinking is dependent to a large degree on the situation and social context in which it takes place (for reviews, see Parker & Auerhahn, 1998; Pernanen, 1991; Reiss & Roth, 1993; Roizen, 1993).

4) Risk factors in Family

There are no known strong risk factors for youth violence in the family domain, but low socioeconomic status/poverty and having antisocial parents are moderate factors. Socioeconomic status generally refers to parents' education and occupation as well as their income. Poorly educated parents may be unable to help their children with schoolwork, for example, and children living in poor neighborhoods generally have less access to recreational and cultural opportunities. In addition, many poor families live in violent neighborhoods, and exposure to violence can adversely affect both parents and children, as described above. Limited social and economic resources contribute to parental stress, child abuse and neglect, damaged parent-child relations, and family breakup are all risk factors with small effects in childhood.

Studies suggest that antisocial parent, violent, criminal parents who represent an environmental rather than a genetic risk factor (Moffitt, 1987). In other words, children learn violent behavior by observing their parents rather than by inheriting a propensity for violence. In fact, attachment to parents, a possible protective factor, can have the opposite effect if the parents are violent (Hawkins et al., 1998c). Among the early risk factors with small effect sizes on youth violence is poor parent-child relations. One specific risk factor in this class is harsh, lax, or inconsistent discipline is also somewhat predictive of later violence (Hawkins et al., 1998c). Children need reasonable, consistent discipline to establish the

boundaries of acceptable and unacceptable behavior. Children who are treated harshly may view rough treatment as acceptable, those who are given no guidance may engage in whatever behavior gets them what they want, and children who receive mixed signals are completely at sea regarding appropriate behavior. Other family conditions, such as high stress, large size, and marital discord, also exert a small effect on later violence. Another childhood predictor with a small effect size is broken homes, a category that includes divorced, separated, or never-married parents and a child's separation from parents before age 16. Separation from parents also operates as a distinct risk factor, again with a small effect size.

Abusive parenting in general and neglect in particular are predictors of later violence, but they have very small effect sizes. Neglect operates as a distinct risk factor, possibly because neglected children are less likely to be supervised or taught appropriate behavior. This is not to imply that child abuse and neglect do not cause serious problems in adolescence: Indeed, they have large effects on mental health problems, substance abuse, and poor school performance (Belsky & Vondra, 1987; Cicchetti & Toth, 1995; Dembo et al., 1992; Esbensen & Huizinga, 1991; Silverman, et al., 1996; Smith & Thornberry, 1995). This finding is discussed in more detail below, in the section on unexpected findings and effects.

Parents' direct influence on behavior is largely eclipsed by peer influence during adolescence. Not surprisingly, therefore, most family risk factors diminish in importance, including the influence of antisocial parents and low socioeconomic status, the most powerful early risk factors.

Poor parent-child relations continue to have a small effect size, but for adolescents this category includes inadequate supervision and monitoring of young people's activities and low parental involvement, in addition to inappropriate discipline (Elliott et al., 1985; Hawkins et al., 1998a; Patterson & Yoerger, 1997; Roitberg & Menard, 1995). Broken homes and parental abuse also exert small effects. Other adverse family conditions present a risk factor; for example, some studies have found that family conflict is a risk factor for violence among adolescent males. Although parents can and do influence their adolescents' behavior, they do so largely indirectly. The kind of peers chosen by young people, for example, is related to the relationship they have with their parents (Elliott et al., 1989; Hill et al., 1999; Patterson & Yoerger, 1997; Simons et al., 1994).

5) Risk factors in School

The only early risk factor in the school domain is poor attitude toward and performance in school, and its effects are small. Numerous individual and family factors may contribute to poor performance, making it a fairly broad measure. For example, a child who is physically aggressive and is rejected by peers or who has difficulty concentrating or sitting still in class may understandably have difficulty performing academic tasks. Children who have been exposed to violence, as noted earlier, may also have trouble concentrating in school. Research on school violence indicates that a culture of violence has arisen in some schools, adversely affecting not just students but teachers and administrators as well (Gottfredson et al., in press; Lorion, 1998). Students exposed to violence at school may react by

staying home to avoid the threat or by taking weapons to school in order to defend themselves (Brener et al., 1999). For their part, teachers may burn out after years of dealing with discipline problems and threats of violence.

Schools located in socially disorganized neighborhoods are more likely to have a high rate of violence than schools in other neighborhoods (Laub & Lauritsen, 1998). At the same time, however, researchers emphasize that most of the violence to which young people are exposed takes place in their home neighborhood or the neighborhood surrounding the school, not in the school itself (Laub & Lauritsen, 1998). Individual schools, like individual students, do not necessarily reflect the characteristics of the surrounding neighborhood. A stable, well-administered school in a violent neighborhood may function as a safe haven for students.

Some gang activity takes place in schools, but school gangs are generally younger and less violent than street gangs, which form in neighborhoods (Laub & Lauritsen, 1998). Gangs in schools increased dramatically (by 87 percent) between 1989 and 1995 but have recently declined. The chances of becoming a victim of violence are more than two and one-half times as great in schools where gangs are reported, and these schools are disproportionately located in disadvantaged, disorganized neighborhoods (MetLife, 1993; Snyder & Sickmund, 1999).

Peer groups complicate the picture further. They operate both in neighborhoods and in schools, but the concentration of young people in schools may intensify the influence of these groups. One large study of adolescent males found that some schools have dominant peer groups that value academic achievement and disapprove of violence, while others have groups that approve of the use of violence (Felson et al., 1994). This study found that the risk of becoming involved in violence varied depending on the dominant peer culture in their school, regardless of their own views about the use of violence.

6) Risk factors in Peer Group

Young children do not socialize extensively with other children and are not strongly influenced by peers. Peers become more important as children progress through elementary school, although school-age children still look primarily to parents for cues on how to behave. Nonetheless, weak social ties to conventional peers and associating with antisocial peers both exert small effects in childhood.

Children with weak social ties are those who attend few social activities and have low popularity with conventional peers. School-age children often reject physically aggressive children because of their inappropriate behavior (Hann & Borek, in press; Reiss & Roth, 1993). The combination of rejection and aggressiveness exacerbates behavior problems, making it more difficult for aggressive children to form positive relationships with other children. Indeed, recent research indicates that, children who are both aggressive, and rejected show poorer adjustment in elementary school than children who are aggressive, rejected, or neither (Hann & Borek, in press). Being drawn to antisocial peers may introduce or reinforce antisocial attitudes and behavior in children. Indeed, aggressive children tend to seek each other out (Hann & Borek, in press). Social isolation, having neither conventional nor antisocial

friends is not a risk factor for violence, however (Cairns & Cairns, 1991; Elliott & Menard, 1996; Fergusson & Lynskey, 1996; Patterson & Yoerger, 1997). A third risk factor with a large effect size on violence is belonging to a gang. Gang membership increases the risk of violence above and beyond the risk posed by having delinquent peers (Thornberry, 1998). These three peer group factors appear to have independent effects, they sometimes cluster together, and they are all powerful late predictors of violence in adolescence.

Researchers who have studied what causes young people to join gangs have found that the risk factors for gang membership are virtually the same as those for violence generally (Hill et al., 1999). The notion that gangs act as surrogate families for children who do not have close ties to their own families is not borne out by recent data (Hill et al., 1999), but gangs do strengthen young people's sense of belonging, their independence from parents, and their self-esteem. Estimates from law enforcement agencies indicate that gang members are overwhelmingly male, and the great majority (almost 80 percent) are African American or Hispanic (Snyder & Sickmund, 1999). But surveys in which young people identify themselves as gang members suggest that there are substantially larger proportions of white and female gang members. In a survey of nearly 6,000 8th graders in 1995, 25 percent of white students and 38 percent of female students reported they were gang members (Esbensen & Osgood, 1997). Lacking comparisons within ethnic groups, it is difficult to tell whether ethnicity per se is a risk factor in gang membership.

B. Risk factors in Community

Community risk factors, such as living in socially disorganized neighborhoods or neighborhoods with high rates of crime, violence, and drugs, are not powerful individual-level predictors in childhood because these external influences have less direct impact on children than on adolescents. They may exert indirect influences through poor parenting practices, lack of family resources, and parent criminality or antisocial behavior.

Increasing involvement in the community is a healthy part of adolescent development unless the community itself poses a threat to health and safety. Social disorganization and the presence of crime and drugs in the neighborhood pose a small risk of violence when measured on an individual level, as they are in. As noted in the table, however, both risk factors have a substantially greater effect on the neighborhood level, where they measure the average rate of violent offending by youths living in the neighborhood or community.

Socially disorganized communities are characterized in part by economic and social flux, high turnover of residents, and a large proportion of disrupted or single-parent families, all of which lessen the likelihood that adults will be involved in informal networks of social control. As a result, there is generally little adult knowledge or supervision of the activities of teenagers and a high rate of crime. Moreover, in areas experiencing economic decline, there are likely to be few neighborhood businesses. In such an environment, it is hard for young people to avoid being drawn into violence. Not only are

they on their own after school, but they are also exposed to violent adults and youth gangs, they have few part-time job opportunities, and their neighborhood is not likely to offer many after-school activities such as sports or youth groups (Bursik & Grasmick, 1993; Sampson et al., 1997; Wilson, 1987).

Social disorganization is also a risk factor for violence in rural areas. One study of rural communities found that poverty plays a less important role in predicting violence than residential instability, broken homes, and other indicators of social disorganization (Osgood & Chambers, 2000). In fact, extremely poor areas were not characterized by high residential instability or a large proportion of broken homes. In cities, however, the combination of poverty with instability and family disruption is predictive of violence (Bursik & Grasmick, 1993; Elliott et al., 1996).

Adolescents who are exposed to violence in their neighborhood feel vulnerable and unable to control their lives. These feelings can lead to helplessness and hopelessness. Such young people may turn to violence as a way of asserting control over their surroundings. They may arm themselves or even join a gang for protection. Studies have shown that adolescents exposed to violence are more likely to engage in violent acts, often as preemptive strikes in the face of a perceived threat (Singer et al., 1994, 1995).

Neighborhood adults who are involved in crime pose a risk because young people may emulate them. Easily available drugs add to the risk of violence. As noted earlier, drug use is associated with both a higher rate of offending and a longer criminal career (Elliott et al., 1989). More importantly, ready availability of drugs indicates that considerable drug trafficking is taking place in the neighborhood and drug trafficking is dangerous for buyers and sellers alike.

C. Risk Factors in Adolescence

Violence increases dramatically in the second decade of life, peaking during late adolescence at 12 to 20 percent of all young people and dropping off again sharply by the early twenties. Some of these youths followed the childhood-onset trajectory, becoming violent before puberty and escalating their rate of offending during adolescence. But over half of all violent youths begin their violent behavior in mid- to late adolescence. These youths gave little indication of problem behavior in childhood and did not have poor relations with their parents.

There are numerous theories about why violence begins in adolescence, but a few themes run through most of them (Elliott & Tolan, 1999; Pepler & Slaby, 1994). Developmentally, puberty is accompanied by major physical and emotional changes that alter a young person's relationships and patterns of interaction with others. The transition into adolescence begins the move toward independence from parents and the need to establish one's own values, personal and sexual identity, and the skills and competencies needed to compete in adult society. Independence requires young people to renegotiate family rules and degree of supervision by parents, a process that can generate conflict and withdrawal from parents. At the same time, social networks expand, and relationships with peers and

adults in new social contexts equal or exceed in importance the relationships with parents. The criteria for success and acceptance among peers and adult's change.

Adapting to all of these changes in relationships, social contexts, status, and performance criteria can generate great stress, feelings of rejection, and anger at perceived or real failure. Young people may be attracted to violent behavior as a way of asserting their independence of the adult world and its rules, as a way of gaining the attention and respect of peers, as a way of compensating for limited personal competencies, or as a response to restricted opportunities for success at school or in the community. Good relationships with parents during childhood will help in a successful transition to adolescence, but they do not guarantee it.

Adolescents exposed to violence at home may experience some of the same emotions and difficulties as younger school-age children, for example, fear, guilt, anxiety, depression, and trouble concentrating in school. In addition, adolescents may feel more vulnerable to violence from peers at school or gangs in their neighborhood and hopeless about their lives and their odds of surviving to adulthood. These young people may not experience the growing feelings of competence that are important at their stage of development. Ultimately, their exposure to violence may lead them to become violent themselves. Studies have shown that adolescents exposed to violence are more likely to engage in violent acts, often as preemptive strikes in the face of a perceived threat (Fagan & Wilkinson, 1998; Loeber et al., 1998; Singer et al., 1994, 1995).

3. Methodology

1) Aim

The current literature review was done to survey about Youth Violence and its prevention. The main purpose was to weave theories and results from maximum studies to get the best view of research done into this field.

The purpose for conducting this literature view was to:
1. Describe and understand studies specific to risk factors contributing to youth violence.
2. To enumerate studies based on their effectiveness in prevention and cure.

In order to fulfill the goal of the study a preliminary research was done online reading and understanding the topic in detail. The articles with Youth and violence such as Family, peers, school etc were selected on the major elements associated. The idea behind referring to this sub theme was that every human being is closely associated with more than one social relationship which thus effects on shaping the behaviors, values, attitudes, roles etc within the individual. These parameters and their effects were studied and evaluated. The goal of the study did not end with the part of identifying the interventions instead it involved the careful selection based on effectiveness they served in the practical life of individuals. And finally, a summary of each possible, workable, and effective intervention for Youth Violence was made.

2) Rationale

Youth are a major concern of our population in India. The grounds of this review were to identify the effective interventions for Youth Violence. The term intervention pertains to the ways by which one can overcome the problem of violence among youths at a large scale. It is the major problem addressed by multiple studies worldwide. Events like stone pelting, mobbing, attacking against a particular group of individuals are regularly addressed by the media.

3) Inclusion Criteria

The study incorporated as:
- Youth is the targeted population.
- The study was a review article based on studies.
- Focused on the latest studies.
- The research article was written in English.

4) Exclusion Criteria

The study separated from:
- Population other than youth was neglected.
- The study was not totally based with statistical evaluation.
- Old studies were not referred for better precision.
- The research article was not written other than English.

4. Discussion

Child maltreatment is linked to other forms of violence – including intimate partner violence, community violence involving young people, and suicide – both causally and preventing child maltreatment: a guide to taking action and generating evidence through shared underlying risk factors. It is therefore useful to view child maltreatment within a wider categorization of violence. Following the typology presented in the World report on violence and health, violence can be divided into three broad categories, according to the context in which it is committed.

- Self-directed violence refers to violence where the perpetrator and the victim are the same person. It is subdivided into self-abuse and suicide.
- Interpersonal violence refers to violence between individuals. The category is subdivided into family and intimate partner violence, and community violence. The former includes child maltreatment, intimate partner violence and elder abuse. Community violence is broken down into violence by acquaintances by strangers. It covers youth violence, assault by strangers, violence related to property crimes, and violence in workplaces and other institutions.
- Collective violence refers to violence committed by larger groups of people and can be subdivided into social, political, and economic violence. Cross-cutting each of these categories is the nature of violent acts. The nature of acts can be physical, sexual, emotional, or psychological, or one of neglect. The classification of violence according to both type and nature of the violent act, as shown in provides a useful framework for understanding the place of child maltreatment within the complex patterns of violence. Child maltreatment often occurs alongside other types of violence. For instance, child maltreatment by adults within the family is frequently found in the same

settings as intimate partner violence. Maltreated children are themselves at increased risk in later life of either perpetrating or becoming the victims of multiple types of violence including suicide, sexual violence, youth violence, intimate partner violence and child maltreatment. The same set of factors such as harmful levels of alcohol use, family isolation and social exclusion, high unemployment, and economic inequalities have been shown to underlie different types of violence. Strategies that prevent one type of violence and that address shared underlying factors therefore have the potential to prevent a number of different types of violence. Conceptual definitions of child maltreatment Child maltreatment Child maltreatment are defined as: all forms of physical and/or emotional ill-treatment, sexual abuse, neglect, or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development, or dignity in the context of a relationship of responsibility, trust, or power.

As already stated, the World report on violence and health and the 1999 WHO Consultation on Child Abuse Prevention distinguish four types of child maltreatment: physical abuse, sexual abuse emotional and psychological abuse & neglect. Physical Abuse: Physical abuse of a child is defined as the intentional use of physical force against a child that results in – or has a high likelihood of resulting in – harm for the child's health, survival, development, or dignity. This includes hitting, beating, kicking, shaking, biting, strangling, scalding, burning, poisoning, and suffocating. Much physical violence against children in the home is inflicted with the object of punishing.

1) Sexual Abuse

Sexual abuse is defined as the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared, or else that violates the laws or social taboos of society. Children can be sexually abused by both adults and other children who are – by virtue of their age or stage of development – in a position of responsibility, trust, or power over the victim.

2) Emotional and psychological abuse

Emotional and psychological abuse involves both isolated incidents, as well as a pattern of failure over time on the part of a parent or caregiver to provide a developmentally appropriate and supportive environment. Acts in this category may have a high probability of damaging the child's physical or mental health, or its physical, mental, spiritual, moral, or social development. Abuse of this type includes: the restriction of movement; patterns of belittling, blaming, threatening, frightening, discriminating against or ridiculing; and other non-physical forms of rejection or hostile treatment.

3) Neglect

Neglect includes both isolated incidents, as well as a pattern of failure over time on the part of a parent or other family member to provide for the development and well-being of the child – where the parent is in a position to do so – in one or more of the following areas: Health, education, emotional development, nutrition., shelter and safe living conditions. The parents of neglected children are not necessarily poor. They may equally be financially well-off.

4) The Scale of the Problem

According to WHO, in the year 2002 an estimated 31 000 deaths were attributed to homicide among children less than 15 years of age. It is possible for child deaths due to maltreatment to be missed even in those few high-income countries that track such deaths, and for this reason these estimates underestimate the true number of deaths from child maltreatment. Global estimates of child homicide suggest that infants and incredibly young children are at greatest risk, with rates for the 0–4-year age group more than double those for 5–14-year-olds. Infants and preschool children are at the greatest risk of fatal maltreatment as a result of their dependency, vulnerability, and relative social invisibility. Their cases are least likely to come to the attention of those who are in a position to monitor their care and safety and who are not family members or caregivers. The risk of fatal abuse is two to three times higher in low-income and middle-income countries than it is in high income countries. It is also greater in societies with large economic inequalities than in those where wealth is more evenly distributed. The most common cause of death is head injury, followed by abdominal injuries and intentional suffocation. While it is not possible to specify the proportion of child homicides that are committed by parents and other family members, special studies conducted in mainly high-income countries suggest that members of the family are responsible for the majority of homicides in children aged 0–14 years. Deaths represent only a small fraction of the problem of child maltreatment. Every year millions of children are victims of non-fatal abuse and neglect. Some international studies have shown that, depending on the country, between a quarter and a half of all children report severe and frequent physical abuse, which includes being beaten, kicked, or tied up by parents. Much physical violence against children is inflicted as a punishment and is accepted by parents, prevailing social norms and even often by law as a correct means of discipline Studies from around the world also show that approximately 20% of women and 5%–10% of men report having been sexually abused as children. Many children are subjected to psychological and emotional abuse as well as to neglect, though the extent of these phenomena worldwide is unknown. In some countries, neglect constitutes the largest proportion of reported child maltreatment cases. In general, girls are more at risk of sexual abuse and boys are at greater risk of harsh physical punishment. In some regions, gender inequality and discrimination place girls at increased risk of death stemming from maltreatment. The practices here include female infanticide, so-called "honour killings", and neglect arising from the child's gender.

5) Prevention Strategies

According to Buka and Earls (1993) violence prevention strategies are like immunization, which are vaccinated at the early onset of the problem and are followed by the booster sessions from childhood to adolescence. When we talk of an individual, we cannot ignore her/his immediate environment. In the same way to identify the intervention strategies we need to

look into the factors that contribute to the environment of an individual. These are depicted through this diagram:
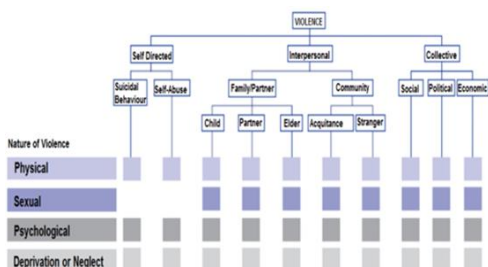

Fig. 1. Nature of violence in different environments

And in this way an individual can be provided corrective measures by integrating each of the factors into the programs. Thus, the intervention programs are laid at the following levels: Individual Level, Family Level, Peer Level, and School Level & Community Level.
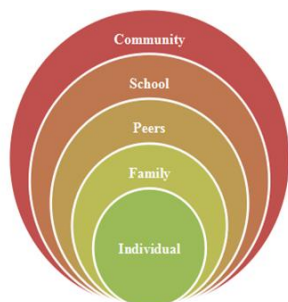

Fig. 2. Intervention programs at different levels

B. At the Individual Level

Many researchers believe that in order to correct faulty behaviors of aggression and violence the target should be the individual himself/herself. This does not mean other factors are ignored while working at this level rather all management strategies go hand in hand. Some of effective strategies are listed below:

The Surgeon General Report (2001) analyzed the causes and prevention strategies prevailing for youth violence. The promising strategies stated were based on Skill and Competency building programs, Training programs for parents, Capacity building plan, teaching strategies and community-based programs. These programs were made to prevent the onset of youth violence thus targeting children from the age group of nursery to grade 7. Thus, these programs cater to the wide population for violence prevention.

Barry Glick and Arnold Goldstein (2001) gave the Aggression Replacement Training (ART) program. It is an effective Cognitive behavioral intervention. It focuses on minimizing violent behaviors in adolescent and youth. This intervention is widely utilized in many countries. The ART program has three components, they are:

- *Social Skill training:* It helps the individuals to communicate in social surroundings and encourage them to replace anti-social behavior with socially accepted behavior.
- *Anger control:* This technique helps them to respond

to situations without getting angry.
- *Moral reasoning:* This technique focuses on sensitizing the individuals with right and wrong.

The Student Created Aggression Replacement Training (SCARE) program was developed in 1994. The program is based on management of anger in adolescents by making good decisions instead of being violent. It actually teaches skills to manage anger and aggression. The primary objective includes:

1. Teaching young people about emotions, including anger and aggression.
2. Helping young people recognize alternatives to violent behaviors and aggressive responses.
3. Encouraging young people to make good decisions in response to proactive situations.

The program includes 15 sessions to resolve conflicts. Cognitive Behavioral Therapy is most widely used for the treatment of aggressive and violent behaviors. It helps in focusing on coping with life situations, resolving problems with alternative solutions, awareness of thoughts and relearning of positive behaviors. It helps the individual to disrupt anger either by avoiding it or removing it. The therapy teaches relaxation skills like deep breathing, slowly repeating a calming word or phrase etc. to handle triggers of anger.

The results of the therapy show positive social competence and decreased aggressive behaviors.

The Student Created Aggression Replacement Training (SCARE) program is based on management of anger in adolescents by taking good decisions instead of being violent. It actually teaches skills to manage anger and aggression. The primary objectives include:

a) Teaching young people about emotions, including anger and aggression.
b) Helping young people to recognize alternatives to violent behaviors and aggressive responses.
c) Encouraging young people to make good decisions in response to provocative situations.

The program includes 15 sessions to resolve conflicts. The program is exclusively designed for adolescents as it is the critical stage of development of an individual. It is referred to as one of the promising strategies of management of aggression.

C. At the Family Level

Family is the foremost social structure of a human being and is thus the most close to a person. It teaches the individual to interact in the society. Family intervention strategies focus on the root cause of violence and developing a positive home environment. They are milestones in betterment of the lifestyle of the individuals.

These are parent/family-based initiatives that take steps to raise an individual in a sound environment. According to Alexander et al (1998) Family Functional therapy is an intervention program that targets youth of 11 to 18 years of age from all cultures. It is based on a family-based program for adolescent delinquent and criminal behavior. It is conducted in three phases: first engagement and motivation, aims to develop better communication between the family, increases motivation for change etc. Second Behavior change, which targets the

individual behavior plans including techniques like teaching parenting skills etc. Third Generalization focuses on maintaining changes and helping in providing resources for change. Multi Systemic Therapy (MST) is tailored to fit the needs of each family of aggressive youth. It is focused to lessen the behaviors that evoke aggressive reactions among the individuals. It helps youth to make appropriate choices, develop communication skills, monitoring activities for parents, etc. It is designed to encourage prosocial behaviors thereby facilitating change in overall functioning of the individual. It also helps the individual to cope better in her/ his surroundings. The therapy has shown effective outcomes in regard to violent youths.

Brief Strategic Family Therapy is a short-term therapy. It aims to remove behavioral problems in youths. Its main objective involves the family of the individual by giving training in parenting. The counselor diagnoses the problem areas and prepares strategies to form therapeutic alliances with family members of the individual. Then the strengths are utilized for overcoming problems through a well directional and planned form. And finally, the plan is implemented. Family is trained in developing skills for parenting, conflict resolution, enhanced/better communication etc.

So far, the therapy has been a fruitful program for more than 50% of the families. Positive Family Support Program is a family-based intervention program. It was earlier known as the Adolescent Transitions Program (ATP). It is used for children with behavioral problems. It is designed to enhance parent communication and management skills, thus by decreasing the growth of antisocial behaviors. Skills like reinforcement, problem solving, active listening, setting rules, ascertaining consequences for rule breaking etc. are included for management of behaviors.

To ensure goals and objectives are met; the plan is selected by the individual and the family.

D. At the Peer Level

Peer refers to the age mates of the individual. They are considered to be the most influential people of an individual's life. A good peer group can help an individual to have a better sight of life while a bad one can worsen the life of an individual. In order to correct the faulty behaviors, we need to implement some peer-based interventions which are: The Peer Coping Skill: Training program is tailored to improve relationships with peers. The program is designed in five parts: group rules, reunion, group activity etc. It promotes positive coping skills such as management of behaviors and problem solving. Besides this due to faulty conduct behaviors there is lack of social competence, the program ensures an aided network of peer groups. In this way the individual gains confidence and tries her/his level best to combat the problem.

As a result, the individuals interact better with their peers and on the other hand cope with aggressive behaviors. The data has shown that individuals received acceptance among their peers and had better rapport with them. Mentoring is another effective and widely used technique for youth violence prevention. Good mentoring relationships can help evade aggressive and violent behaviors, and also replace them with positive development. They help the individual facing issues in academics, distorted relationships with parents, poor social skills etc. Mentors not only guide, but they also help them to find workable solutions to problems and develop quality relationships in the family, among peers, neighborhood etc. It can make individuals more positive, self-reliant, and self-confident, have enhanced self-control, deal with stress, manage things etc. Training Students to be Peacemakers is a peer mediation program. It aims to teach students to be peacemakers. It helps to supplement learning in school, learning alternatives to problems and improving quality school life. The students are taught to settle quarrels among other classmates by becoming mediators and negotiating the quarrel. The program has six steps: creating cooperative context, teaching students to recognize when a conflict is and when it is not occurring, teaching students' concrete and specific procedures for negotiating agreements etc. Overall, it enhances learning of nonviolent ways to resolve problems in classroom settings. According to the data collected, trained students had optimistic attitudes to solve conflicts and the teachers also reported these changes.

E. At the School Level

The school is the second socializing agent for an individual. It helps the individual to learn systems of the society and prepares them to face hurdles in life. School as an agent to prevent violence and aggression can act as in many forms like make curriculum reforms, counsel students, establish mentoring programs etc. But many of these prove to be ineffective, and some of the effective ones are described below: Promoting Alternative Thinking Strategies (PATHS) is a school/ classroom-based program for aggressive and violent youth. It is designed to enhance social and emotional competencies of the individual. It is considered, to be a promising program for preventing youth violence.

The program is tailored into the curriculum for enhancing the educational process and promoting peaceful school environments. It focuses on five domains mainly:
a) Emotional understanding
b) Positive self esteem
c) Building relationships
d) Interpersonal problem-solving skills

Thus, ensuring decreased rate of conduct problems, aggression, better relationships, better concentration, understanding of emotions, self-control etc. Anger Coping Program is a school-based intervention technique for aggressive children. It targets risk factors engaged with aggressive behavior as it assumes that these individuals have impaired cognitive problem-solving skills. The program consists of sessions divided into 12weeks. It focuses on self-control, social skills strategies for problem solving, acceptance among peers, resolving interpersonal conflicts, dealing effectively with negative feelings etc.

They are instructed through role plays and activities for effective implementation. Time and again feedback is given in order to encourage and monitor the learning. Overall, the program is effective in making short-term improvements for

child's faulty behaviors.

F. At the Community level

Community refers to a group of people sharing the same neighborhood. In order to solve the problem of aggression and violence community should identify the individuals at risk and try to give them solutions in order to make a peaceful place for every member of the community to live-in. Some of the effective interventions are: The Street Outreach model includes multiple dimensions where community and others mentor violent youths. The volunteers build up close relationships with the youths and try to help them by identifying situations of crisis. They also provide services to refer to authorities or agencies for expert opinions on different cases. Its core components are mentoring, conflict resolution skills, mediation opportunities and support on crisis intervention. The worker gets referrals from schools, parents, police, and other youth too.

They not only counsel the individuals rather they guide them to choose ways other than violence. In this way individuals gain confidence in dealing with stressful situations in life and respond accordingly. The program provides a proactive approach to preventing community violence. Mentoring is an effective strategy when dealing with violent youth. A mentor is a guide who has an experience of providing solutions and is trustworthy, loyal, respectful, and empathetic. He/she spends time with the individual personally and listens to all the problems. It can develop social and emotional competencies as well as build self –esteem and self-confidence.

Many communities have identified this technique as a positive one. As it has shown better results in individual's personal as well as school life. The communities should train volunteers, in order to have long term benefits for the youth. The above listed literature review is an amalgamation of strategies that help to curtail youth violence. But all of them cannot be applied, in order to see meaningful results, so following are the common strategies that were mostly discussed in the review of literature:

4.3. Conflict resolution skills

It refers to technique that helps the individual to handle problems in a pleasant and harmonious manner. It is the most common strategy
Where the literature of youth violence revolves.

According to Skiba and Peterson- this technique resolves interpersonal and personal problems. It focuses on understanding the conflicts and learning responses that are based on negotiations to the situations relating to conflicts. The students are motivated to inspect their reactions and are provided with situations where they can learn alternative skills and behaviors. According to Howell – This type of curricular are made to improve social, problem solving and anger management skills. These curriculums are designed into academic lessons to use this knowledge for interpersonal conflicts.

G. Problem Solving Skills

This technique is widely used owing to its effectiveness and success rates. Problem refers to a hurdle which is meant to be solved. Every individual has skills to overcome troubles in their life. Problem solving is a process by which we reach a concrete solution.

It is a cognitive ability which directs us to an effective solution. In the same way, in order to correct faulty behaviors of violent youth her/his problem-solving skills are to be enhanced. Some important problem-solving skills are:
   a)   Communication
   b)   Decision making
   c)   Creativity
   d)   Analysis

H. Social competence/ Social Skill Training

It is one of the important techniques of dealing with individuals with problems of aggression. Human beings are social animals. We are bound to interact with our surroundings. In absence of contact with society we land up into isolation. These are social skills i.e., our ability to interact with other people effectively. Some of the social skills are:
   a)   Making eye contact in a conversation.
   b)   Understanding emotional responses
Using right pitch and tone while talking to someone. These skills are firstly modeled by a therapist/counselor/parent, in order to be seen in the behaviors of the individual. Then the individual is asked to role play the specific skill. In this way slowly and steadily the individual gains confidence to interact to people around him/her are able to communicate freely.

I. Parenting Skills Training

Healthy relations between a parent and child can have fruitful effects in the latter's developing years. This directs parents to adopt alternatives other than punishing, enforcing rules etc. Selecting and implementing alternatives to nurture children with love and care are best suited. These help in overall development, better relationships, increased self-confidence, better understanding of the world etc. In order to train families, in parenting, the therapist/counselors ascertain the history of the child so as to determine the faulty areas of behavior development. After this the parents are counseled how to make small changes like developing a habit of talking for some time to their child, monitoring activities, observing, and reporting minute changes in behavior, faulty relationships with peers etc.

J. Teaching pro social strategies

The term pro-social refers to behaviors by which we help someone in some way. For teaching this strategy the parents, school and community needs to join hands. And for this they need to be made aware of the importance of prosocial behaviors. The three participants (parents, school, and community) need to be a good role model in order to see reflection in behaviors of the child. They themselves have to do, good deeds. Secondly his best procedure is to reinforce them, every time they cooperate and share things. Reinforcement not only means positive ways, but when the child behaves negatively, they need to be counseled. In this way slowly and steadily they will form a habit to adopt these strategies.

5. Conclusion

The purpose of this review was to identify the effective interventions for Youth Violence. The term intervention pertains to the ways by which we can overcome the problem of violence among youths. It is the major problem addressed by multiple studies worldwide. Youth are a major part of our population in India. Events like stone pelting, mobbing against a particular group of individuals are regularly addressed by the media. In order to understand the root cause of the issue the study was conducted on the factors that make an individual violent and aggressive. They include individual factors (psychological factors), family influences, peer influences, school, community, political influence and so on. These factors catered the basis of this research. And thus, interventions were selected so as to correct every aspect of aggression and violence in the individual. This will serve as the background for further research in implementing and ascertaining the change in the individual.

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