

## ***Exploring Local Perceptions of and Responses to Urban Youth Violence***

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**Objective:** *Despite widespread prevention efforts, youth violence persists in many urban communities. This investigation explores the unique perspectives and local capacities to address urban youth violence. Method:* *Qualitative in-depth interviews were conducted with prominent neighborhood individuals (PNIs) from low-wealth neighborhoods that varied by risk for youth violence. Findings:* *Findings reveal examples of increased levels of social action in the designated low risk for youth violence neighborhoods. Similar activities were also present, but to a lesser extent, within the high-risk neighborhoods. Results illustrate how PNIs formally and informally share information and take action to address youth violence.*

**Conclusion:** *PNIs are an often-overlooked resource in gaining local insight for addressing health issues, such as youth violence. The efforts identified exhibit expertise and culturally sensitive opportunities for working together to address youth violence. Understanding such dynamics is essential for informing the development of locally endorsed violence-prevention interventions.*

**Keywords:** *youth; violence; prevention; social dynamics; community capacity; participatory research*

In the United States, violence is a serious public health problem impacting the lives and experiences of young people and communities, especially those living within low-income urban neighborhoods (Satcher, 2001). Despite widespread violence prevention efforts, the

homicide rate for young men in the United States is the highest in the world (Gelles, 1998; Richters, 1993). Homicide remains the leading cause of death among 15 to 24-year-old African American males and the second leading cause of death for African American females in the United States (Centers for Disease Control and Prevention [CDC], 2006). Focusing on homicides alone though greatly underestimates the true magnitude of this public health epidemic. Recent research indicates that the ratio of non-fatal intentional injuries to homicides is 94 to 1, suggesting the health impact of youth violence is far more extensive and devastating (CDC, 2002).

To work effectively within communities to reduce youth violence, it is essential to understand and appreciate the local dynamics of violence and violence prevention efforts. Previous investigations have shown that because of a variety of social, environmental, and economic reasons (i.e., poverty, racial and ethnic exclusion, poor housing quality, unemployment, crime, history of violence in the community, and drug use), young people living in low-income urban neighborhoods are at increased risk for experiencing violence (Anderson, 1999; Devuyt, Hens, & De Lannoy, 2001; Earls, 1994; Sampson, Raudenbush, & Earls, 1997; Shaw & McKay, 1942). Low socioeconomic status (SES) and related contextual factors have consistently been found to be associated with delinquent and violent behavior among adolescents (Beyers, Loeber, Wikström, & Stouthamer-Loeber, 2001; Sampson et al., 1997). However, despite chronic poverty and urban decay, there are many such neighborhoods that experience less violence, which is attributed by some, to the local social dynamics and internal community capacity to address factors associated with youth violence (Prothrow-Stith & Spivak, 2004; Sabol, Coulton, & Korbin, 2004; Sampson et al., 1997). Social dynamics is a broad concept that has been described in different ways. For example, the presence of local-level social

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networks and the development of a stable coalition of community residents are critical elements of a social dynamic that may effectively prevent youth violence (Prothrow-Stith & Spivak, 2004). Others have found that collective efficacy, the social cohesion among neighbors combined with their willingness to intervene on behalf of the common good of the community, is a social dynamic responsible for such differences (Sampson et al., 1997). The concept of collective efficacy goes beyond the existence of individual actions and focuses more on the presence of shared expectations within a community among neighbors who envision and support broader social control. In addition, others have found that such social dynamics represent a "community's capacity," that is, an ability of individuals to collectively identify, mobilize, and address social and public health problems (Goodman et al., 1998; Sutton & Kemp, 2006). Although there is a great deal of empirical evidence for the role of collective efficacy in preventing violence within communities, little is known about *how* this concept, and other forms of social interactions, foster the conditions for increased capacity and action in local neighborhoods to prevent violence (Sabot et al., 2004). Attaining and exploring the perspective of community "experts" involved in such youth violence prevention activities is essential to understand the social dynamics at play. Addressing such perspectives in a systematic, time sensitive, and participatory manner is necessary for the success of culturally relevant, sustained, and effective local youth violence prevention efforts.

To acquire a better understanding of the neighborhood activities associated with addressing youth violence, this

investigation utilized qualitative data collection methods in urban Baltimore City, Maryland. Drawing on the expertise of neighborhood individuals, we examine the following questions: (a) What are local neighborhood perceptions regarding youth violence? (b) What social dynamics exist in the neighborhoods with regard to youth violence? (c) Do perceptions and social dynamics for addressing youth violence vary by neighborhoods at high or low risk for youth violence status?

## **METHOD**

### **Identification of Study Neighborhoods**

For this investigation, neighborhood designations were operationalized as census block groups. Census block groups are confined to "walkable" areas of city blocks. Census block group characteristics, rather than zip codes or census tracts, have been found to be an appropriate proxy for identifying immediate influences on the lives and experiences of local individuals, including young people (Coulton, Korbin, & Su, 1996).

To identify neighborhoods for inclusion in this study, we began by limiting our selection process to all neighborhoods falling within the lowest quartile of wealth, as an assessment of low SES in Baltimore City (O'Campo, Caughy, Aronson, & Xue, 1997). Of the 711 census block groups in Baltimore in the 2000 census, 178 fell into the lowest quartile of wealth. On further inspection, 20 of these neighborhoods were removed from the database because of their nonresidential status (industrial or municipal status such as cemetery, industrial park, train station), leaving 158 residential neighborhoods for inclusion in this study.

Focusing on this subset of residential neighborhoods, a combination of demographic, economic, and violence-related data were used to sort neighborhoods based on their "risk" for youth violence. There were two primary reasons underlying our decision to use multiple variables rather than relying on violence-related data. First, the majority of aggravated assaults, robberies, and rapes are never reported to law enforcement officials and when they are, arrests are made in less than 50% of these crimes (Cook & Laub, 1998; Snyder & Sickmund, 1999). Second, most young people involved in violence and violent crimes are rarely arrested for a violent crime (Elliott, Huizinga, & Menard, 1989; Huizinga, Loeber, & Thornberry, 1995). Given the inconsistent nature of law enforcement violence-related data available, it was deemed appropriate to use a combination of variables in the process for identifying potential study neighborhoods. In short, we utilized a multivariable principle components analytical approach to explore the relationships among 17 neighborhood-level variables previously found to be associated with youth

violence (i.e., female headed households, per capita income, education, vacant housing units, neighborhood unemployment rate, juvenile total assault rate per 10,000, and adult aggravated assault rate per 10,000). (Duntman, 1989). The results reduced the original 17 variables into five new indices that became new variables; (a) juvenile violence, (b) adult violence, (c) low education, (d) high income or high employment, and (e) home ownership or wealth. Chronbach's alphas for these five scales were .91, .98, .73, .86, .66, respectively. Each census block group neighborhood was then assigned a score based on the principle components factor loading on each of the five new index variables. The factor loading scores for each of the five new indices were then categorized into quartiles. All quantitative data analysis was conducted using the statistical software package SPSS (SPSS Version 10.0, 2001)

Census block group neighborhoods were then ranked based on the neighborhood "risk" profiles for youth violence, according to which quartile the neighborhood fell within each of the five indices. For example, the low risk for youth violence neighborhoods were very low in "juvenile violence" and "low education" indices, and high in "high income or high employment" index. For the high risk for youth violence neighborhoods, each study neighborhood was very high in "juvenile violence," high in "low education," and low in "home ownership or wealth" indices. For the neighborhoods that did not fall precisely within the highest or lowest quartiles across the new indices, priority ranking was given to those neighborhoods based on their quartile rankings starting with "juvenile violence," followed by "education," "income or employment" and "home ownership or wealth."

Potential study neighborhoods were on a census block group map of Baltimore City and labeled according to their risk status to visually explore the presence of any geographic trends. Four neighborhood clusters, each with contiguous high and low risk for youth violence profile neighborhoods were identified. Two such clusters, one in East Baltimore and one in West Baltimore, were selected for inclusion in this study for a total of four neighborhoods. Selecting neighborhoods from different sections of the city was designed to explore potential regional variation. Confirmation of the exogenous neighborhood risk for youth violence categorizations was obtained by comparing 5 consecutive years of raw violent assault data obtained from the Baltimore City Police Department from years 1997 to 2001 (Figure 1).

### Participants

The neighborhood engagement process was essential to the recruitment of participants for this study. Walking,

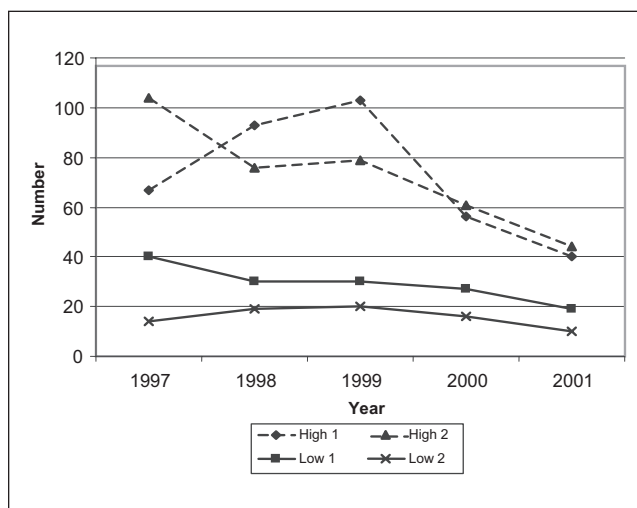


FIGURE 1 Confirmation of Differences of Violence, Measured by Felony Category Assaults, for Target Neighborhood Clusters

and not driving, into and through the two clusters (each cluster composed of one high and one low contiguous risk for youth violence neighborhoods) was a critical component of this research effort because it increased community visibility and recognition of the researcher, facilitated interactions with local residents, and provided a first-hand familiarity with neighborhood dynamics, structure, and culture. During neighborhood walkthroughs, contact was made with more than 60 adult neighborhood members from the study neighborhoods. The study participants, prominent neighborhood individuals, were individuals who were identified by their neighbors as being particularly aware and actively involved in addressing youth violence. These neighborhood experts were perceived as key informants and gatekeepers to understanding the elements of neighborhood efforts to address violence given their high visibility and acknowledged activity to prevent youth violence within the community. The process of triangulation involved obtaining a type of neighborhood consensus as measured by three to five neighbor references, in addition to the individual usually, but not always self identifying as a prominent neighborhood figure.

A total of 16 prominent neighborhood individuals were invited to participate, and all agreed to participate in in-depth interviews. A majority of these experts were either current ( $n = 9$ ) or past residents ( $n = 4$ ), and those who were past residents had come back to work in the study neighborhoods. All of the participants were actively involved in study neighborhoods (e.g., program coordinators, pastors, parents, residents, local illicit drug dealers). The three individuals who were not current or past residents were long-term coordinators of local programs

serving youth and families or pastors of churches located within the study neighborhoods. Ten of the prominent neighborhood individuals were men and six were women. The prominent neighborhood individuals ranged in age from 32 to 77 years old, with an average age of 49. Neighborhood walkthroughs, initial contact, and in-depth interviews were conducted over a 16-week period of time (April to July 2003).

### **Data Collection**

Qualitative data regarding the perceptions of local social networks and local level efforts to address youth violence were collected through the use of in-depth interviews with prominent neighborhood individuals. A field guide composed of semistructured and open-ended questions was used during in-depth interviews with each participant asked to reflect on the local environment, violence, social dynamics, and local activities to address youth violence. Sample field guide questions include (a) “Is violence involving young people an issue in your neighborhood?” (b) “How have those living in (your neighborhood) responded to the issue of youth violence?” and (c) “Who would you say are the people most influential in addressing youth violence?”

To ensure a shared understanding, a common definition of youth violence (i.e., physical or emotional acts involving young people that cause harm, pain, or injury of any sort) was introduced at the start of each in-depth interview (National Center for Injury and Prevention Control, 2003). The interviews lasted approximately 60 minutes each and were conducted by the lead author, a researcher trained in qualitative data collection methods (M.Y.). The majority of the interviews took place in or around the participant’s home and all were conducted within the study neighborhoods. Participants were reimbursed \$20 for sharing their expertise. The interviews were tape recorded after receiving approval from the participant. All procedures were approved by the institutional review board, the committee on human subjects research for the Johns Hopkins Bloomberg School of Public Health.

### **Data Analysis**

Analyses proceeded according to established standards for qualitative data (Bernard, 2000). The audio-taped interviews were transcribed verbatim and reviewed for accuracy. All prominent neighborhood individuals were provided a copy of their transcribed interview and were given an opportunity to further illustrate concepts we explored during the initial interview. No changes or edits were requested by our study participants.

Two of the project investigators, authors of this article, analyzed the transcripts (M.Y. and J.B.). Thematic codes were developed, iteratively reviewed, and applied to relevant segments of text. For example, all text segments that addressed how neighborhood individuals shared information related to youth violence were identified using a code called “communication.” The thematic coding structures applied by each investigator were highly consistent. Issues associated with data coding, analytic procedures, and any related concerns were addressed at biweekly research team meetings. A number of analytic methods were applied to assess intercoder reliability. In the early phases, double coding (e.g., having the same randomly selected transcript or transcripts read and coded by two different reviewers and then compared for agreement) was used. Later, by spot-check coding (e.g., a selection of previously coded text checked for accuracy and agreement) was utilized. Although rare, any coding discrepancies were resolved through review and discussion with the entire investigative team. The coded interviews were entered into QSR NVIVO, a qualitative data-management software program (Fraser, 2000). Consistent with Spradely’s (1979) guidelines for conducting qualitative data analysis, as additional data were gathered, segments of the text were consistently reviewed for recurring themes. The results presented here are the most frequently mentioned factors presented by the prominent neighborhood individuals related to the social interactions and local efforts to address youth violence during the interview process. In addition, data collected within the high and low risk for youth violence neighborhoods were compared to explore potential differences in the perceived local-level capacity to address youth violence. Through thematic analyses, several dimensions of social dynamics emerged and are summarized here—informal and formal prevention activities, information sharing, and neighborhood social support.

## **► FINDINGS**

The following section presents findings related to local perceptions and impact of youth violence on the study neighborhoods, and then illustrates the types of local social dynamics (i.e., local activities, information sharing, and social support) utilized to address youth violence. Specific attention is paid to comparing the results from high and low risk for youth violence neighborhoods. No apparent regional differences with regard to the social dynamics and action within high and low risk for youth violence neighborhoods were observed.

### **Youth Violence as an Issue**

All prominent neighborhood individuals, in both the high and low-risk neighborhoods, reported that youth

violence was an important issue impacting various dynamics of living in their neighborhood. The severity of violence overall though was perceived as more common and brutal in the two high-risk versus the lower risk for youth violence neighborhoods. One prominent neighborhood individual, a pastor, stated,

We have a different breed of youth today that have NO respect for human life . . . [it is] rampant and raging . . . The open-air drug markets . . . and it's a strong pull . . . ah . . . to the street [for youth] and survival of the street . . . . You know the rules . . . if you weak you get taken and if you tough you get tried . . . so there's NO just getting along!

This individual, like so many others, expressed his frustration with the culture of violence in his neighborhood and how the “Dodge City–like” mind-set had only increased in recent years, “especially given the increased access that young people have to weapons such as handguns and semiautomatic weapons . . . . It's just the feeling or belief over here . . . that they all got to be armed.”

### ***The Perceived Impact of Youth Violence***

The majority of individuals interviewed in the high and low-risk neighborhoods felt that youth violence has a serious impact on their neighborhood as a whole. The most commonly described impact of violence was a tremendous and overwhelming sense of fear, anger, and isolation among neighborhood residents and many individuals mentioned having lost children, loved ones, and friends. One prominent neighborhood individual from a low risk for youth violence neighborhood shared,

I watch a lot of parents cry over their kids, stand over their kids and go through what I had to go through. A lot of kids' lives have been lost in this community so fast and the year it happened to my son . . . . It was five or six homicides. I mean you talking about 13-year-olds, 12-year-olds who can get their hands on a gun. That's bull . . . if you are allowing it, you are part of the problem and not part of the solution . . . . It's wrong . . . just wrong.

Another participant stated that

there is a quiet fear . . . . They [parents] don't want their children to go down to the corner . . . relegated to the basement, things of that nature. So yeah, it increases the fear factor and a sense of um, I think a lot of times hope, hope, hopelessness.

Prominent neighborhood individuals shared that people were being forced to avoid gathering or meeting

in public areas or were unable to access necessary services such as bus stops, corner stores, and public transportation for fear of being harassed, assaulted, or injured. They described that many young people and children in their neighborhoods were not allowed to play outside—confined to a safe window-free room inside their home or apartment. Illustrating this perception, another participant shared that “many people are held hostage in their homes and in their community as a whole . . . . It's really . . . really pathetic.”

### ***Social Dynamics Addressing Youth Violence***

In-depth interview data also shed light on the nature of the local social dynamics related to youth violence including organizing local activities, sharing information, and providing social support to one another with the specific intention of addressing and preventing youth violence.

*Local prevention activities related to youth violence.* The majority of prominent neighborhood individuals interviewed from the low-risk neighborhoods reported that people in their neighborhood were responsive to issues perceived as related to youth violence. On the other hand, only one prominent neighborhood individual from the high risk for youth violence neighborhoods reported being involved in local activities with other neighborhood individuals to address factors related to youth violence.

Individuals interviewed from the low-risk neighborhoods reported being involved in locally organized efforts to address youth violence such as neighborhood “speak outs” against violence as an

opportunity to speak about the violence and deaths. We also gave them [youth] the opportunity to make better choices for younger youths who were looking up to them, you know . . . they swept the streets where they were throwing the trash, you know clean up . . . . You make them a part [of it] . . . the opportunity to make them do something different.

This local collaborative effort was organized by a group called

Women Against Violence . . . it's a group of mothers who got together and are tired of people being murdered in the community. We're sick of it and we were sick of people not doing anything about and we were sick about people not saying anything about it. That was my main goal. My role was I want to open my mouth and scream it out to the whole community and anybody else who would listen . . . and if you don't like it, I'm sorry!

Another prominent neighborhood individual from one of the low-risk neighborhoods described her efforts collaborating with another neighborhood individual and a local police officer to monitor and address open-air drug selling and loitering, describing,

I had a detective come into my house [laughing] and he even brought a briefcase and a Bible so you know . . . so they thought [pointing to the boys on the corner] he wasn't the police [laughing]. For them [the police] to come and see and know how the traffic runs . . . . We got codes now . . . since we block watchers! We have a code number that gives them [the police] what they need and they come right away!

There were few similar efforts of collective social action and cooperation observed in the high-risk neighborhoods. Overwhelmed by fear, isolation, negative experiences, high-risk neighborhood individuals were much less likely to be engaged in neighborhood-level violence prevention efforts, and more likely to describe efforts such as calling the police as futile efforts and that addressing the young people directly was seen as "taking their chances" at possibly being the target of retribution and attacked themselves. One high-risk neighborhood prominent neighborhood individual stated,

Yeah because they know I'll call the police and I'll get cussed out . . . cause I don't care because it's mine and I don't want the drugs. If you want to do it down there, you do it but not right in my domain . . . . I'm 60 and I mean you talking about people older than me and they not gonna say nothing cause they scared! We can't do anything because our hands are tied . . . . If we keep calling the police for them to fix this problem . . . they don't do it so who do we go to next?

*Information sharing related to youth violence.* Although the more formal local neighborhood-level prevention activities varied, sharing information related to youth violence was present in both the high and low-risk neighborhoods. The most common mode for such communication was informal, by word of mouth. For example, one respondent stated while pointing in many different directions that "well . . . Molly, me, Shirley, and Lillie Mae and Wanda, we talk!" Another prominent neighborhood individual stated as well that "the way we do it . . . I just go out there and tell them . . . word of mouth. And it takes a lot of people to do that . . . on our own, [but] we have to do it on our own. Lord knows I've talked to plenty!" Examples of types of information that individuals shared were related to planning community events to prevent violence also in addition to more spontaneous

efforts to verbally confronting youth to stop selling drugs on their corners, to organize and advocate with neighbors for lighting improvements in alleys, and increased law enforcement support.

Another example of this was described by one prominent neighborhood individual from a low-risk neighborhood: "One medium [for sharing information] is through speaking engagements, they give cookouts and when they have these vigils the corners are PACKED!" These events were organized by the Women Against Violence group described earlier and highlighted by other local prominent neighborhood individuals as an ideal example of how neighborhood individuals, old and young, have come together to address youth violence. These events were designed by local prominent neighborhood individuals to "give them [youth] the opportunity to speak out about the violence and the deaths. We also gave them the opportunity to make better choices for younger youth who were looking up to them." Another prominent neighborhood individual from the other low-risk neighborhood described an innovative collaboration that she developed with other individuals on her block to address issues such as drug selling and violence. She stated that she

used to have somebody else around here to help me to help [watch the neighborhood] . . . . He would be there while I was working to watch out and help . . . a lot of times . . . he can write it [drug dealing or other illegal activities] on paper and then he gives it to me to pass on . . . to the police.

*Support of neighborhood individuals.* The level of social support reported by the prominent neighborhood individuals varied as well between the high and low-risk neighborhoods. In the high-risk neighborhoods, prominent neighborhood individuals reported feeling little support and friendliness among neighborhood individuals as a result of the extreme sense of fear and isolation they felt, which was a product of the violence, public harassment, and multitude of well established and active open-air neighborhood drug markets. One prominent neighborhood individual from a high-risk neighborhood said,

Like I said, because all the old people where everybody knew everybody, most of 'em is dead . . . . The ones here now . . . they don't care, you know . . . they don't have the personal contact or personal history . . . with the neighborhood.

Individuals in the low-risk neighborhoods were more likely to describe a level of friendliness or openness among individuals in their neighborhood that was very different. Smaller groups of supportive networks

of prominent neighborhood individuals were identified that worked together to address a variety of neighborhood issues and there appeared to be a greater sense of neighborhood identity with regard to the block they lived on. A number of individuals commented that their neighborhood is their block and street name, for example, "I live in the 400 block of Southway! And it's the best block of Southway!"<sup>1</sup> One prominent neighborhood individual from one of the low-risk neighborhoods commented that in her neighborhood

they're more friendly here . . . and they talk more to each other here . . . even if it's negative sometimes at least it is still getting out there you know what I'm sayin' . . . they [the youth] organize themselves and go to the families [of youth who have been killed] and give them support.

## ► IMPLICATIONS FOR PRACTITIONERS

To effectively address complex public health issues such as youth violence, public health practitioners and researchers are increasingly recognizing the need to understand local neighborhood perceptions, behavior, and culture (Stecklar, 2005, cited in Ulin, Robinson, & Tolley, 2005). By engaging neighborhood experts, this investigation provides unique insight and an in-depth understanding of the perceptions and dynamics associated with local violence prevention efforts. Findings provide insight into the existing yet often overlooked capacity present in neighborhoods, such as innovative collaborations with neighbors and law enforcement to address illicit drug sales and violence and organized public campaigns to engage neighborhood youth that provide a public forum for addressing and preventing violence. Case examples of activities within the study neighborhoods illustrate the subtle yet significant differences among these settings. This report is intended to encourage violence prevention practitioners and researchers appreciation of such efforts, to cultivate opportunities for collaboration, and facilitate the identification and dissemination of effective practices across neighborhoods.

It was clear from the responses of all the prominent neighborhood individuals that youth violence was a high priority issue impacting their neighborhoods regardless of our study neighborhood risk classification. This local perception is therefore juxtaposed with the exogenous classification system used to identify the low-risk study neighborhoods themselves. It is likely that these perceptions, the existing social networks, and increased neighborhood activities aimed at addressing factors associated with violence described in the low-risk neighborhoods led to the documented local decreases in violence.

Individuals in the low risk for youth violence neighborhoods provided various concrete examples of sustained collaborations designed to address neighborhood youth violence. The social dynamics and actions illustrated here offer an important compliment to previous findings, most often empirical, used to characterize a community with capacity, or competence, or collective efficacy (Eng & Parker, 1994; Iscoe, 1974; Sampson et al., 1997; Sutton & Kemp, 2006; Yoo et al., 2004). The efforts illustrated here were initiated and organized by a few individuals who creatively accessed and utilized local resources recognizing the need to engage and involve others of all ages to increase awareness and prevent violence.

Although elements of community capacity were also described by the prominent neighborhood individuals in the high-risk neighborhoods, they were more limited in scope and most often involved the sustained and committed efforts of a select few. Prominent neighborhood individuals from the high-risk neighborhoods expressed their consistent inability to effectively address the violence in their neighborhood without the sustained support of other residents or outside resources, such as the police. There appeared to be a greater sense of frustration and despair among those individuals interviewed in the high-risk designated neighborhoods, a characteristic of neighborhoods which lack such capacity, despite the inspired efforts of a few individuals (Iscoe, 1974). Nonetheless, these prominent neighborhood individuals represented a dedicated group, similar to those in the low-risk neighborhoods, committed to their neighborhoods' safety and future.

Although the social dynamics and activities varied among the risk for youth violence neighborhoods, elements of an action-oriented infrastructure for addressing youth violence was in some form present within all of the study neighborhoods. Public health practitioners and researchers must invest in efforts to respectfully engage neighborhood individuals and build on existing social networks and resources. Intervention opportunities based on these findings include connecting individuals from other neighborhoods to coordinate their local efforts in addition to organizing with resources, such as local organizations, academics, health professionals, and law enforcement. To understand and appreciate such contextual issues, it is essential to work together with neighborhood individuals, sharing expertise, experience, and skills necessary for informing, designing, or translating research for promoting health and violence prevention at the community level (Israel, Eng, Schulz, & Parker, 2005). In addition, intervention efforts might include channeling the collective knowledge and experience of such collaborations to exploring and informing local violence prevention related policies, at many levels.

## ► LIMITATIONS AND STRENGTHS

The use of qualitative methods produces an in-depth understanding of the dynamics of youth violence that may be limited and relevant to the study neighborhoods alone. However, this process provided an opportunity to explore and illustrate the intricacies of social action at the neighborhood level that would have likely been missed had we utilized quantitative methods alone. Although we encourage thoughtful consideration of our findings when working in similar urban settings, caution should be taken to generalizing our findings. Although generalizability is often the goal of research, understanding local perceptions and capacity is a critical step toward appreciating norms and the cultural context, necessary for preventing youth violence (Israel et al., 2005; Prothrow-Stith & Spivak, 2004).

In addition, the selection of the participating prominent neighborhood individuals could present a perspective not necessarily representative of those in the study neighborhoods, as a whole. The strength of the systematic and triangulated identification of prominent neighborhood individuals though provided rich, contextually unique, and insightful information—an ideal starting point for enhancing understanding of social dynamics in general and for developing interventions within such neighborhoods. This culturally sensitive and relevant insight is critical to sustaining such prevention efforts, for increasing capacity at the local level as it provides a micro-level perspective to inform, frame, and tailor decisions that are most often made at the macro (policy and intervention programmatic) level.

These findings also provide useful methodological insight into the development and application of how a swift participatory research approach may be implemented for gaining entrée and engaging communities. Such an approach is ultimately necessary for gaining a culturally sensitive understanding of factors associated with youth violence while facilitating the development of relationships among community, practice, and academic experts. As in this study, respectfully engaging and giving voice to neighborhood individuals as valuable assets demonstrates the ability and importance of public health practitioners to develop cohesive collaborations, grounded in transparency and respect, with local individuals that honor the culture and dynamics of each specific neighborhood.

## ► CONCLUSIONS

To effectively address public health issues at the neighborhood level, it is essential to gain an understanding of how local individuals, the neighborhood

experts, interpret and engage each other and such issues. In this study, high and low risk for youth violence neighborhoods exhibit a limited, but discernable community problem solving capacity that is inversely associated with their risk status for youth violence. These findings suggest and advocate for the need of public health researchers and practitioners to engage neighborhood individuals as partners in efforts to address and prevent urban youth violence.

## NOTE

1. The term *Southway* is a fictitious name of the true street name used by the study participant.

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