



Why and how should we practice prevention?

Like many programs, domestic violence shelters and rape crisis centers work with limited funding and resources. The need for their services is much larger than what the programs are realistically able to provide. Scarce resources force domestic violence shelters and rape crisis centers to make difficult decisions about which programs to implement within their communities. Priority is often given to secondary and tertiary approaches to violence prevention, meaning after a violent incident has already occurred (such as providing much needed services to victims or holding perpetrators accountable).[i]

This seems reasonable for a number of reasons. First, it can be difficult to conceptualize what prevention looks like when the need for services is clear. Second, it can be more difficult to measure the impact of primary prevention versus the services domestic violence shelters and rape crisis centers provide.

However, we can see the impact of prevention at a population level and we are learning more and more each day on what ‘works’ in the intimate partner violence and sexual violence prevention fields, or in other words what prevention should look like.

- Research has identified primary prevention as the most effective level of prevention.[ii]
- Research shows that pre-school and school-aged children can learn preventive skills.[iii]
- Children learn best when prevention programs use active learning strategies, teach behavioral skills, and allow opportunities for practice through the program.[iv]
- Pre-school children are more likely to learn preventive skills when they have opportunities to practice the skills at school and home, and to repeatedly rehearse the skills through role plays of different scenarios.[v]
- Child abuse prevention programs are also effective at prompting abuse disclosures of abuse.[vi]
- Child abuse prevention programs cost one-tenth of the amount spent for child abuse interventions.[vii]
- Regardless of which prevention model you employ, fidelity to the model – that is, how closely you follow the model – is key. High fidelity increases effectiveness, whereas low fidelity decreases effectiveness.[viii]
- There is a delicate balance between having fidelity to a program and making minor alterations to a program to ensure it is developmentally and culturally appropriate for participants. Research indicates that prevention programs work best when tailored specifically towards the target audience.[ix]
- Tailoring a prevention program to improve its fit with a particular audience can gain community buy-in, raise participants’ perceptions of the information’s relevance to their lives, and increase the likelihood of sustainability.[x]
- Prevention programs that use modeling and rehearsal are more effective than those that rely on individual study or more passive exposure.[xi]

- Programs that provide repeated exposure to material are more effective than those taught on just one occasion.[xii]
- Seven to nine “doses” of information are needed to change attitudes and behaviors.[xiii]
- Many experts believe that providing primary prevention programming to single-sex audiences is more appropriate and effective than providing primary prevention programming to mixed-sex audiences.[xiv]
- Experts who advocate single-sex prevention programs encourage organizations to offer men’s and women’s prevention programs concurrently within the same organization.[xv]
- Prevention efforts are more likely to be effective and foster long-lasting results when they address individual, relationship, community, *and* society factors.[xvi]
- Public education and awareness messages via media outlets can complement educational prevention programs and has been regarded as a useful tool in prevention.[xvii]
- Incorporating social marketing and social norms into our prevention efforts could result in more effective programs.[xviii]

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