

COCHRANE CORNER.....

School based programs for prevention of violence: do they work?

Violence is recognized as being a major public health problem worldwide. As one of the leading causes of death for people aged 15–44 years, violence accounts for about 14% of deaths among males and 7% of deaths among females worldwide.¹ However, despite a growing number of intervention activities in many different settings worldwide, there remain large gaps in our knowledge about the effectiveness of many prevention programs and there is a clear need for better documentation and evaluation.²

Early aggressive behavior has been identified as a risk factor for later youth and adult violence, and many violence prevention programs therefore target children and adolescents. Given the investment by governments and other agencies in this area, it is important that the most effective programs can be identified.

A review published on the latest version of the Cochrane Library examines secondary prevention interventions designed to reduce aggressive behavior in children identified as being at risk for such behavior.³ A secondary intervention is defined as one that targets children identified as aggressive or at risk of being aggressive.

The review, which included 56 randomized trials, concluded that there is evidence that school based programs aimed at reducing aggressive behavior do appear to produce improvements in behavior. Improvements were evident in both primary and secondary school age groups and in both boy-only and mixed sex groups. There was evidence that interventions designed to improve relationship or social skills may be more effective than interventions designed to teach skills of non-response to provocative situations.

Results from such reviews are important, both in terms of highlighting the effectiveness of interventions, and in terms of establishing directions for future research. On the latter point, this review calls for further research with injury outcomes—all studies included in the review evaluated changes in behavior rather than in violent injuries, and it is unclear to what extent improvement in behavior translates to an actual injury reduction. The authors also concluded that more research is needed into sustainability of the interventions and their cost effectiveness, and highlighted (again!) the generally poor reporting of study design and quality. Nevertheless, it is heartening to see so many randomized trials in the area of violence prevention, and issues to do with study reporting should improve as authors continue to refer to the CONSORT statement or equivalent.⁴ We encourage you to do so!

In other news from the Cochrane Injuries Group, there are two protocols currently under review that examine interventions to prevent occupational injuries. These are *Interventions for preventing injuries in the construction industry* and *Interventions*

for preventing injuries in the agricultural industry. A review from the Cochrane Ear, Nose and Throat Disorders Group, *Interventions to promote the wearing of hearing protection*,⁵ has also recently been published on the Cochrane Library.

A recent *Safety Science* editorial, while highlighting the substantial decreases in occupational injuries attributable to improvements in occupational health and safety management, has called for more Cochrane reviews in the area.⁶ As in the area of violence prevention, a wide variety of interventions of unknown effectiveness have been implemented over time in this field. To ensure that gains in occupational health and safety continue to be made, and that interventions are not in fact doing more harm than good, there is a need to improve the evidence base, with increases in both trials and systematic reviews.

As always, if *Injury Prevention* readers have ideas for systematic reviews they would like to see completed, or are interested in undertaking one themselves, please contact us at cochrane_injuries@lshtm.ac.uk. Training in the review process is available at the many Cochrane centers worldwide, and there are free training resources online at <http://www.cochrane.org>. The Injuries Group (<http://www.cochrane-injuries.lshtm.ac.uk>) also provides assistance with preparation of reviews, including database searches and editorial help.

The 2006 Cochrane Colloquium will be held in Dublin from 23–26 October and there will be an Injuries Group meeting for those interested. Both new and experienced reviewers will be welcome!

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