Understanding School Violence

Fact Sheet 2016

School violence is youth violence that occurs on school property, on the way to or from school or school-sponsored events, or during a school-sponsored event. A young person can be a victim, a perpetrator, or a witness of school violence. School violence may also involve or impact adults.

Youth violence includes various behaviors. Some violent acts—such as bullying, pushing, and shoving—can cause more emotional harm than physical harm. Other forms of violence, such as gang violence and assault (with or without weapons), can lead to serious injury or even death.

To learn more about school violence and youth violence, please visit: www.cdc.gov/violenceprevention.

Why is school violence a public health problem?

School associated violent deaths are rare.¹

- 31 homicides of school-age youth, ages 5 to 18 years, occurred at school during the 2012-2013 school year.
- Of all youth homicides, less than 2.6% occur at school, and this percentage has been relatively stable for the past decade.

In 2014, there were about 486,400 nonfatal violent victimizations at school among students 12 to 18 years of age.¹

Approximately 9% of teachers report that they have been threatened with injury by a student from their school; 5% of school teachers reported that they had been physically attacked by a student from their school.¹

In 2013, 12% of students ages 12–18 reported that gangs were present at their school during the school year.¹

How does school violence affect health?

Deaths resulting from school violence are only part of the problem. Many young people experience nonfatal injuries. Some of these injuries are relatively minor and include cuts, bruises, and broken bones. Other injuries, like gunshot wounds and head trauma, are more serious and can lead to permanent disability.

Not all injuries are visible. Exposure to youth violence and school violence can lead to a wide array of negative health behaviors and outcomes, including alcohol and drug use and suicide. Depression, anxiety, and many other psychological problems, including fear, can result from school violence.

In a 2015 nationally representative sample of youth in grades 9-12:²

- 7.8% reported being in a physical fight on school property in the 12 months before the survey.
- 5.6% reported that they did not go to school on one or more days in the 30 days before the survey because they felt unsafe at school or on their way to or from school.
- 4.1% reported carrying a weapon (gun, knife or club) on school property on one or more days in the 30 days before the survey.
- 6.0% reported being threatened or injured with a weapon on school property one or more times in the 12 months before the survey.
- 20.2% reported being bullied on school property and 15.5% reported being bullied electronically during the 12 months before the survey.

National Center for Injury Prevention and Control
Division of Violence Prevention
A number of factors can increase the risk of a youth engaging in violence at school. However, the presence of these factors does not always mean that a young person will become an offender.

Risk factors for school and youth violence include:
- Prior history of violence
- Drug, alcohol, or tobacco use
- Association with delinquent peers
- Poor family functioning
- Poor grades in school
- Poverty in the community

Note: This is only some information about risk. To learn more, go to www.cdc.gov/violenceprevention/youthviolence/schoolviolence/risk.html.

The goal is to stop school violence from happening in the first place. Several prevention strategies have been identified.

- Universal, school-based prevention programs can significantly lower rates of aggression and violent behavior. These programs are delivered to all students in a school or grade level. They teach about various topics and develop skills, such as emotional self-awareness and control, positive social skills, problem solving, conflict resolution, and teamwork.

- Parent- and family-based programs can improve family relations and lower the risk for violence by children especially when the programs are started early. These programs provide parents with education about child development and teach skills to communicate and solve problems in nonviolent ways.

- Street outreach programs can significantly reduce youth violence. These programs connect trained staff with at-risk youth to conduct conflict mediation, make service referrals, and change beliefs about the acceptability of violence.

CDC uses a four-step approach to address public health problems like school violence:

**Step 1: Define the problem**
Before we can prevent school violence, we need to know how big the problem is, where it is, and who it affects. CDC learns about a problem by gathering and studying data. These data are critical because they help us know where prevention is most needed.

**Step 2: Identify risk and protective factors**
It is not enough to know that school violence affects certain students in certain areas. We also need to know why. CDC conducts and supports research to answer this question. We can then develop programs to reduce or get rid of risk factors and to increase protective factors.

**Step 3: Develop and test prevention strategies**
Using information gathered in research, CDC develops and evaluates strategies to prevent school violence.

**Step 4: Ensure widespread adoption**
In this final step, CDC shares the best prevention strategies. CDC may also provide funding or technical help so communities can adopt these strategies.

The CDC leads many activities that help us to understand and effectively prevent school violence. Some of these activities include:

- **Youth Risk Behavior Surveillance System (YRBSS).**
  The YRBSS monitors health-risk behaviors among youth, including physical fighting, bullying, weapon carrying, and suicide. Data are collected every two years and provide nationally representative information about youth in grades 9-12. www.cdc.gov/healthyyouth/data/yrbs/index.htm
• **School-Associated Violent Death Study.** CDC leads a collaboration with the Departments of Education and Justice to monitor school-associated violent deaths at the national level. 
  
  www.cdc.gov/ViolencePrevention/youthviolence/schoolviolence/SAVD.html

• **School Health Policies and Practices Study (SHPPS).** The SHPPS is a national survey that assesses policies and practices at the state, district, school, and classroom levels. Eight elements of school health are assessed, including approaches to keep a school environment safe and to prevent violence. 
  
  www.cdc.gov/healthyyouth/shpps

• **Health Curriculum Analysis Tool (HECAT).** The HECAT contains guidance, appraisal tools, and resources to help schools conduct an analysis of health education curricula based on the National Health Education Standards and CDC’s Characteristics of an Effective Health Education Curriculum. The results can help schools select or develop curricula to address a number of topics, including violence prevention. 
  
  www.cdc.gov/healthyyouth/hecat/

• **School Health Index (SHI).** The SHI is a self-assessment and planning tool that schools can use to improve their health and safety policies and programs. Five topics are covered, including violence. 
  
  www.cdc.gov/healthyschools/shi/index.htm

• **National Centers for Excellence on Youth Violence Prevention (YVPCs).** Through collaborations between researchers and local organizations (including the local health department), the YVPCs work with high-risk communities to carry out and evaluate a multifaceted, science-based approach for reducing youth violence. 
  
  www.cdc.gov/violenceprevention/ace/

• **Guide to Community Preventive Services.** The Community Guide is a resource for systematic reviews of research and recommendations about what works to improve public health. Examination of youth violence prevention strategies have included firearm laws, therapeutic foster care, universal school-based violence prevention programs, and transfer of juveniles to adult courts. 
  
  www.thecommunityguide.org/

• **Striving To Reduce Youth Violence Everywhere (STRYVE).** CDC’s national STRYVE initiative provides information, training, and tools to help increase public health leadership in preventing youth violence, promote the widespread use of evidence-based prevention strategies, and reduce national rates of youth violence. 
  
  For more information about CDC’s role in preventing youth violence, see www.cdc.gov/violenceprevention/youthviolence/index.html.

---

**Where can I learn more?**

**CDC Division of Violence Prevention**

www.cdc.gov/violenceprevention

**CDC Division of Adolescent and School Health**

www.cdc.gov/healthyyouth/

**STRYVE**

www.cdc.gov/violenceprevention/stryve/

**Stop Bullying**

www.stopbullying.gov

**Surgeon General’s Report on Youth Violence**

http://www.ncbi.nlm.nih.gov/books/NBK44294/

---

**References**


---

1-800-CDC-INFO (232-4636) • www.cdc.gov/violenceprevention