

# A PLACE TO BE SAFE

## PROGRAMS IN ROXBURY AND LOWELL CREATE HEALTHY ALTERNATIVES FOR YOUNG PEOPLE

BY JANET M. CROMER, RN

Citing the fact that violence affects every aspect of physical and mental health for individuals, families, and communities, the Massachusetts Medical Society identifies youth violence as a major public-health issue and calls on healthcare professionals to assume a “critical role” in its prevention. Two programs in Massachusetts, one at Dimock Community Health Center in Roxbury and the other at Lowell Community Health Center, are demonstrating how effective healthcare professionals can be when they take a proactive approach to preventing violence by finding ways to help young people build on their strengths and become valued members of the community.

### A Safe Haven for Exploration and Growth

In 2006, youth violence in Boston rose to its highest level in 10 years. According to Latifah Hasan, MSW, Dimock’s vice president of youth and family development, the rise in the incidence of violence among young people coincides with a rapid increase in aggressive behavior across the country, a steady rise in graphic violence in the media, and the U.S. involvement in a prolonged war. “There’s an urban myth that youth violence happens only among inner-city kids, so it’s only an inner-city problem,” Hasan says. “We look at the symptom, say a fight between gang members, but fail to look beyond it to what’s happening in the city, the state, the world. Youth violence is a mirror of society.” Finding long-term solutions to violence, she says, requires addressing issues that include quality of school sys-

tems, access to healthcare, availability of jobs and housing, exposure to violence in entertainment and media, opportunities for constructive participation in society, and maintaining a level of safety for the individual, the family, and the community.

While no one program can address all those issues, the Dimock Community Health Center’s Teen Center, which opened in 1992 during another period of rampant violence in Boston, aims to provide a safe haven for area youth who want to find a way other than violence for responding to the world in which they live. According to Gayle Crump-Swaby, program manager of both the after-school program and the teen center, a major priority at the Center is safety—creating an environment in which both teens and adults feel comfortable and respected. “Without safety,” Crump-Swaby says, “none of the programs and activities that contribute to stability and growth for those 13 and above could take place.”

If a teen member at the Center behaves in such a way as to disrupt that sense of safety, he or she is brought into “Teen Center Court” and assigned a teen prosecutor and defense attorney. After a hearing, a panel consisting of both adults and teens makes recommendations. The court’s purpose, according to Crump-Swaby, is to show what kind of behavior contributes to a safe society and how wrongdoing is dealt with in the adult world.

Hasan points out that a common element among youth who join gangs or turn to prostitution is a lack of both self-worth and a sense of belonging. Consequently,

**Dimock’s Gail Crump-Swaby (top picture, center) and Latifah Hasan and Laurie Kaslow (L to R, bottom right) are committed to helping teens discover their potential, as are LCHC’s Linda Sou (standing left) and Erica McNamara (seated), seen here with Teen Coalition peer leader Sara Thanonginh.**





**Violence prevention, says LCHC CEO Dorcas Greig-Sato, is one essential step in creating a healthy community.**

the Teen Center is designed to be a strength-based program that helps teen members recognize their own value and strengths and offers them ways to make positive contributions to their community. Toward that end, teens have multiple options for how they spend their time at the Center. They can relax, explore ways to use the Center's computers, get help with homework, or join the karate program. The Red Sox Foundation has partnered with Dimock to expand funding sources and upgrade the facility, which will increase the options teens have. Crump-Swaby promotes intergenerational learning through youth involvement with other programs on the Dimock Community Health Center campus. Middle schoolers, for instance, can read to youngsters enrolled in the Head Start program, and teens can volunteer as tutors or help out in the homeless shelter.

Family outreach and development is a constant focus. Dimock recently received a grant to provide a six-week curriculum for

families to enhance communication, conflict resolution, and anger management at home. Parents were eager to participate, Crump-Swaby says, and a common reaction was, "Thank God you've got someone who can help us talk to our kids." Many participants felt they gained a better understanding of family relationships as well as communication skills that would benefit them in the community.

Teens who come to the Center have the opportunity to participate in twice-weekly "teen talk" discussion groups conducted by peer leaders. Sessions focus on such topics as pregnancy prevention, health concerns, substance abuse, and violence prevention. All groups follow a psychoeducational model, combining the opportunity to express personal experiences and attitudes with the delivery of information and behavioral options.

The staff actively seeks workable ways to provide Teen Center members with mentors, either on a one-to-one basis or in small groups, and they are always looking for volunteer mentors to work with teen visitors. The Center's Summer Work Program is designed to provide teens with mentoring, positive feedback, and a positive work experience. The Teen Center staff arranges internships for 33 youths with Dimock staff in every department. Interns take formal classes in communication, public speaking, résumé writing, college planning, dressing for the work world, communicating with supervisors, CPR, and first aid. Each student leaves with a portfolio containing a completed résumé, letters of recommendation, certificates of training, and awards. One young woman came back to tell Crump-Swaby that the support of staff and the training allowed her to raise her self-esteem and confidence. Another said she finally understood "about the messages you send with your clothes." One participant's mother remarked that she could not believe how one summer could

make such a difference in her son's attitude.

### **Providing Access to Needed Resources**

Another resource for helping teens at Dimock, one used often by Teen Center staff, is the behavioral and mental health services. Laurie Kaslow, LICSW, is director of child and adolescent services in behavioral health. By the time a young person comes to a behavioral-health setting, he or she is apt to be at the end of a long line of failures, including school expulsion, family conflict, and even jail. Even if some may have a loving and involved family, they may still lack the skill set necessary to negotiate everyday challenges because of the environment in which they live.

An important component of intervention that helps to break the cycle of failure and violence is providing role models who can convey to a teen that he or she has options and can attain success. This often starts with a therapist who shares some of the teen's cultural background. Kaslow's main rule is to never underestimate how smart teens are. "They may come to you with their failures highlighted," she says, "but they want to engage, to tell you and show you what they can do." They have tons of feelings, ideas, and opinions and want to be heard, and they want to form fruitful partnerships that make their lives better. "We need to join together to give kids a circle of hope and the opportunity to feel efficacious in their own lives. Once they feel some legitimate power, they take a different path," she says.

As a way of giving hope to many of the families who have been marginalized, Kaslow and the staff at Dimock use an approach that focuses on previous successes and takes what worked before as an approach that can be tried again. Kaslow emphasizes that the work done in therapy, however, cannot be sustained

unless there is an environment where it can be nurtured and allowed to grow. That means it's important to help clients do more than find access to healthcare. To get to the next step, she encourages clients to become involved in Dimock's Teen Center programs, in a faith community, with athletic teams, in after-school programs, or as a member of a youth task force.

### **Providing a Safety Net in the Schools**

Providing more than access to healthcare is also an important operating principle at the Lowell Community Health Center (LCHC). CEO Dorcas Grigg-Saito, PT, MPH, says that in her perspective as a community health provider, community health promotion and prevention efforts — including violence prevention — are essential elements in the building of a healthy community. One way LCHC addresses these priorities is by reaching out to adolescents and their families through the school system.

Lisa Marcotte is a pediatric nurse practitioner in LCHC's school-based clinics, which are located in one middle school and in the 3,600-student high school. She describes her primary responsibility as being highly visible so that all school personnel get into the habit of bringing a student to her for any physical or emotional distress. Many of the students she sees have been exposed to violence in their homes and community, or among friends. They come to Marcotte with concerns about dating, gang violence, weapons in the home, and bullying.

In an effort to address the prevalence of violence, Marcotte works with middle-school students to help them understand what violence is, how violence impacts their physical and emotional health, their academics, and their development. Since dating violence has

become a major issue, Marcotte is working with a teacher to find ways to incorporate the topic of dating violence into the middle-school health curriculum.

Violence associated with dating is also addressed when a girl comes in requesting a pregnancy test. Marcotte takes advantage of the opportunity to ask her whether the sex was consensual, whether she was violated in any way, and whether or not safe sex was practiced. She also provides education and treatment for any sexually transmitted diseases the student might have been exposed to.

In Lowell, girl gangs often partner with male gangs, Marcotte says. Some girls have told her that if they want to belong to a gang, they have to have sex with a number of male members. So Marcotte strives to involve guidance counselors, mental-health providers, and DSS in finding ways to empower girls to be able to say no and stay safe.

Many of the families of the students Marcotte and other school nurses in Lowell see come from such diverse regions as Cambodia, Africa, and Brazil. Marcotte points out that each family brings with it its own set of issues, such as post-traumatic stress disorder stemming from civil-war atrocities in their home country, and then are expected to blend into an inner-city environment where they encounter strangers, money issues, family disruptions, and peer pressure. So it is important, Marcotte says, to help students and their families understand the traumas and stresses they have endured and to let them know how LCHC staff can help.

One day, a man who had just arrived from Kenya came to enroll his sons in school. He asked Marcotte how to obtain health insurance and find a doctor. Marcotte set up a meeting with a staff member at LCHC from Kenya who could

provide a cultural connection and interpreter services while the father applied for Massachusetts health insurance. Within days, he had obtained school physicals and vaccinations for his children at LCHC. Marcotte says, "He just walked into school and found instant health-care access because we were set up to expedite the connection."

### **Finding the Positive**

The schools aren't the only place that LCHC staff are working to help teens find alternatives to violence. Erica McNamara is program manager of the LCHC Teen Coalition, part of the LCHC's Adolescent Health Department. The coalition sponsors programs such as the annual Dance 4 Peace, which, since 1995, has brought together young people from multiple Lowell organizations who participate in skill-building sessions that address issues they have to face in their everyday lives. The event culminates in a large production involving hundreds of teens, featuring multicultural dancers, singers, and teenage fashion designers as well as an art show, games, and skits. The theme for this past year's program was "peaceful solutions," and many of the presentations centered on alternatives to violence. McNamara observes that the show offers Lowell teens a chance to showcase the healthy lifestyle activities they enjoy.

Positive outcomes for youth who have participated in the Teen Coalition, according to McNamara, highlight the benefits of giving teens an opportunity to safely explore the value of their own lives. Several peer leaders have gone into the field of youth development; some have chosen an art career as a force for social justice; others have left gangs or violent relationships. It's like planting seeds, says McNamara, and those seeds can make a difference in a world otherwise consumed by violence. ■