

	Website	Summary of Findings
SFUSD Student Support Services	<a href="http://www.healthiersf.org/cbo/search_criteria.cfm">www.healthiersf.org/cbo/search_criteria.cfm</a>	This website provides a very useful search tool where one can search in alphabetical order all community based organizations that serve children and youth. Once you find an organization, a summary of the services they provide, who they serve, and contact information is provided.
Women's Community Clinic	<a href="http://www.womenscommunityclinic.org">www.womenscommunityclinic.org</a>	The WCC website summarizes the array of free reproductive health services offered by the clinic and how to access them. In addition there are free counseling services being offered and a link to make an appointment to meet with the counselor. They also provide outreach information, education, and harm reduction resources for homeless women and women living in single occupancy hotels. The women's building website offers information ranging from free yoga and meditation classes offered at the center to support groups and women community building events, etc. In addition they offer information to help support the basic needs of women and their families such as job training, a food pantry, and financial literacy
The Women's Building	<a href="http://womensbuilding.org/content">http://womensbuilding.org/content</a>	This website offers listings of available scholarships and funding opportunities for non-profits serving women, etc.
Fund Net Service	<a href="http://www.fundsnet.com/women.htm">http://www.fundsnet.com/women.htm</a>	The resource page of the CYWD's website provides a comprehensive list of services available to young women in the Bay Area community including, contact information and services offered, etc.
The Center for Young Women's Development	<a href="http://www.cywd.org/resources.html">http://www.cywd.org/resources.html</a>	This website provides interactive resources for teens, especially teen girls including; sexual health information, health relationship information, teen rights information, etc.
The Adolescent Health Working Group	<a href="http://www.ahwg.net/knowledgebase/nodes.php?pid=81&amp;tpid=3">http://www.ahwg.net/knowledgebase/nodes.php?pid=81&amp;tpid=3</a>	
Women's Inc. list of bay area services for women	<a href="http://www.womaninbayarea.org/res_otherprograms_sf.html">http://www.womaninbayarea.org/res_otherprograms_sf.html</a>	A list of Women's organizations and other Programs for the Prevention of Domestic Violence in San Francisco The Directory of Social Services for Women in San Francisco, 2010-11 is a comprehensive guide to nonprofit and government services available to residents within the City and County of San Francisco and the Bay Area. The focus of the Directory is on services that are women and girl-specific; that is, services that are designed for and sensitive to the specific needs of women and girls. However, many of the organizations listed also extend their services to both women and men. The Directory is intended to serve as a guide to help members of the community identify resources available to them.
Department of the Status of Women's san francisco social services list	<a href="http://www.sfgov3.org/index.aspx?page=207">http://www.sfgov3.org/index.aspx?page=207</a>	

Name of Report	Name of Agency publishing report	website
Health Inequities in the Bay Area	the Bay Area Regional Health Inequities Initiative	
The Status of Women in San Francisco (2009)	City and County of SF Department on the Status of Women	<a href="http://www.sfgov.org/dosw">www.sfgov.org/dosw</a>
Surgeon General's Workshop on Women's Mental Health		
Women's Mental Health: An Evidence Based Review	World Health Organization	<a href="http://www.who.int/mental_health/resources/gender/en/index.html">http://www.who.int/mental_health/resources/gender/en/index.html</a>

Girls Study Group,  
Understanding and  
Responding to Girls  
Delinquency

Girls' Initiative  
Girls Study  
Group/U.S.  
Department of  
Justice Programs

<http://www.ojp.usdoj.gov/ojjdp>

Trends in Maternal  
Mortality: 1990 to  
2008

World Health  
Organization

[http://whqlibdoc.who.int/publications/2010/9789241500265\\_eng.pdf](http://whqlibdoc.who.int/publications/2010/9789241500265_eng.pdf)

Girls on the Edge: A  
report on girls in the  
juvenile justice  
system

United Way of the  
Bay Area

<http://www.yjinstiute.org/pdf/YJI-Girls-on-the-Edge.pdf>

Addressing The  
Needs Of Women  
and Girls:

Developing Core  
Competencies for  
Mental Health and  
Substance Abuse  
Services  
Professionals

U.S. Department of  
Health and Human  
Services, Substance  
Abuse and Mental  
Health Services  
Administration

[www.samhsa.gov](http://www.samhsa.gov)

Gender  
mainstreaming in  
WHO: Where are  
we now?

World Health  
Organization

[http://www.who.int/gender/documents/gender/gender\\_mainstreaming\\_report/en/index.html](http://www.who.int/gender/documents/gender/gender_mainstreaming_report/en/index.html)

Psychosocial and  
Mental Health  
Aspects of Women's  
Health

World Health  
Organization

[http://www.who.int/mental\\_health/resources/gender/en/index.html](http://www.who.int/mental_health/resources/gender/en/index.html)

A Report on Girls in  
San Francisco:  
Bechmarks for the  
future, Executive  
Summary

San Francisco  
Commission and  
Department on the  
Status of Women

[www.cosw@sfgov.org](mailto:www.cosw@sfgov.org)  
[www.sfgov.org/cosw](http://www.sfgov.org/cosw)

Violent behaviors among adolescent females      The National Survey on Drug Use and Health, The NSDUH Report, December 17th, 2009/ A publication by SAMHSA      <http://www.oas.samhsa.gov/2k9/171/171FemaleViolence.htm>

Female substance abuse treatment admissions aged 12-17      Treatment Episode Data Set, The TEDS Report, published by SAMHSA      <http://www.oas.samhsa.gov/2k9/221/221AdFemTx2k9.htm>

Women's mental health: What it means to you      U.S. Department of Health and Human Services, Office on Women's Health      [www.womenshealth.gov](http://www.womenshealth.gov)

Action Steps for Improving Women's Mental Health      U.S. Department of Health and Human Services, Office on Women's Health      [www.womenshealth.gov](http://www.womenshealth.gov)

## Summary of report

BARHII asserts that it is imperative that we start to look at health from a wider lense and include socioeconomic factors and the physical and social environment's impact on health in shaping our health policies. In the BARHII report they highlight how healthy living is tied to where a person lives, income and wealth status, race/ethnicity, immigration status and education, access to healthy foods and open spaces, exposure to toxics, the presence of fast food restaurants and/or grocery stores selling fresh produce, etc. and therefore many discrepancies exist in health amongst people living in the Bay Area. Because we must widen the lense through which we view health, the authors contend that social, economic, and education policy are all essentially health policy as well and suggest policy initiatives that will be crucial for both reducing disparities among populations and improving our overall health. Startling statistics and data was gathered into useful and clear graphs for this report exposing the equities that exist in the Bay Area and their impact on health. For example, life expectancy was gathered. This report highlighted a significant amount of data regarding the status of women in San Francisco including basic demographics including race, age, income level, level of education, immigration status. In 2006, women made up 49% of the population in SF with 42% White, 34% Asian, 13% Latina, and 7% African American. When looking at poverty, men represent about 51%, however, percentages of female poverty are slightly higher for women at 100-199% of the FPL. This report also shows that women in SF earn 78% of what men earn, and men out earn women at all levels of education. Minority women make even less percentage of what men make. For example, African American women only earn 58% of what men earn whereas white women in SF earn 88% of what men earn. Additionally, there is a discrepancy in the occupations of men and women. Careers in computers, mathematics, architecture and engineering are almost 75% male while personal care and healthcare support are more than 75% female. In SF, more women are going to college than men, and SF boasts one of the most highly educated female populations in the nation, though this is not consistent when This workshop brought together experts from all over to address critical issues affecting the mental health of women and girls and to make recommendations for materials that could be produced to the Surgeon General to advance knowledge, understanding, and behaviors regarding women's mental health issues. Eight different cluster areas were addressed: Biological/Developmental factors, Specific mental disorders, Trauma/Violence/Abuse, Social stress factors & stigma, Treatment access & insurance, Identification/Intervention issues, Health system issues, and Protective factors & Resilience. Each working group was assigned to one of the 8 topics and prioritize the issues associated with that. The overarching themes and messages that resulted from these working groups are: 1) women's mental health is essential to overall health. 2) the disease burden of mental illness is enormous - is second only to CVD in prevalence. 3) mental disorders must be viewed like other chronic medical conditions and are highly treatable. 4) mental health must be addressed across the life span, from early childhood. This report focuses on the determinants of poor mental health of women, specifically, social factors that promote or retard gender development and empowerment. A gendered, social model of health is used to investigate critical determinants of women's mental health with the overall objective of contributing to improved, more effective promotion of women's mental health that is grounded in research evidence. The report is divided into four parts: 1) gender development and health which discusses gender differences in social position, impact of change in economic policies, and human development from a global perspective. 2) social theories of depression in women. 3 & 4) the impacts of poverty and violence as gender specific risk factors on women's mental health. An important concept in this report is that of women's social position and ranking in society. Women are lower on the social totem pole than men and therefore their health outcomes are poorer than that of men. Women are twice as likely to develop depression than men and are more likely to develop comorbid disorders. One

This report focuses on statistics (mostly for the state of Massachusetts) displaying the increase in girls' involvement with the juvenile justice system and the unique causes that has led to this reality versus boys, and a call to action for gender-specific programming and interventions that address high risk girls' specific and different needs. Even though the numbers are still higher for males, females are the fastest growing segment of the juvenile justice system, therefore researchers contend that girls need to become a priority before their numbers match those of male delinquents. The risk and protective factors and developmental pathway profile differs for males and females entering the system. One striking difference are the percentages of girls that report having been sexually abused and raped, which is proven to lead to many other risk factors associated with delinquency and mental health disorders such as; PTSD, low self-esteem, academic failure, substance use, etc. According to statistics, 40% of girls in the system have been raped and 73% have been abused. In addition girls have unique communication styles v

This report estimates maternal mortality in 172 countries. At the 2000 Millennium Summit, there was a deadline created to achieve the Millennium Development Goals (MDG) which would assess progress in improving maternal health. This improvement is assessed through reducing the maternal mortality ratio (MMR) by three quarters between 1990 and 2015, and achieving universal access to reproductive health by 2015. WHO, UNICEF, and UNFPA have previously published internationally comparable estimates of maternal mortality for 1990, 1995, and 2000. The three agencies, along with The World Bank, now present global maternal mortality data for 2008. This report states that an estimated 358,000 maternal deaths occurred worldwide in 2008, a 34% decline from the levels of 1990. Developing countries accounted for 99% (355,000) of the deaths. Afghanistan had the highest MMR of any country at 1400 deaths per 100,000 births .Among developing regions, sub-Saharan Africa had the highest MMR at 640 deaths per 100,000 live births in 2008. The goal of MDG5 was to reduce MMR by 75% from 1990-2015, which means a 5.5% annual decline. Globally, the annual percentage decline was This report was created in collaboration between the San Francisco Juvenile Probation Department and the United Way of the Bay Area in the creation and implementation of the Girls Justice Initiative. Enhancing programs and services to young women and girls in the juvenile justice system is a key priority of GJI, as is increasing gender-specific programming and services for girls. This report on girls involved in the juvenile justice system was compiled in 2002 to accomplish three major objectives:

1. Review national and local literature on girls in the juvenile justice system to inform funders, policy makers, service providers and community members of the status of girls in the juvenile justice system.
2. Analyze the characteristics and status of girls in the San Francisco juvenile justice system in order to develop comprehensive strategies, models and opportunities to address the crisis and inform prevention and aftercare programs for girls.
3. Detail the Girls Justice Initiative strategy to address the needs of girls in the juvenile justice system, strengthen programs that serve them and identify the gaps in services needed. This report is an overview of trends, issues, obstacles and challenges facing the more than

SAMSHA brought together a 16-member Expert Panel, including professionals and consumers from diverse cultural and geographic backgrounds, on Core Competencies for Women and Girls in Behavioral Health to develop this report. The competencies illustrated in this report were developed for the workforce serving women and girls by offering a framework that can be tailored to meet multiple needs. "Competencies" are defined as the set of knowledge, skills, and attitudes/attributes necessary to successfully serve women and girls. SAMSHA utilizes the public health approach, trauma-informed care, and recovery-oriented system of care models as a foundation to these core competencies for women and girls. The Expert Panel compiled 10 cross-cutting statements for workers working with women in substance use and mental health arenas. Including the essential use of gender-specific, cultural and linguistic appropriate, and trauma-informed approaches in treatment of women and girls. Recurring themes in implementation of these key statements are increased resources, increased education, and increased comprehensive, coordinated care.

This publication presents the results of a baseline assessment that was conducted in 2008 as part of the monitoring and evaluation of the WHO Strategy for integrating gender analysis and actions into the work of WHO. The results of the baseline assessment present the current status of gender mainstreaming in WHO as well as the gaps and actions required for implementing the strategy. Findings are presented for 16 indicators that correspond to the four strategic directions: build capacity for gender analysis and actions; bring gender into the mainstream of WHO; promote the use of sex-disaggregated data and gender analysis; and establish accountability. This publication presents the results of a baseline assessment that was conducted in 2008 as part of the monitoring and evaluation of the WHO Strategy for integrating gender analysis and actions into the work of WHO. The results of the baseline assessment present the current status of gender mainstreaming in WHO as well as the gaps and actions required for implementing the strategy. Findings are presented for 16 indicators that

Both community-based studies and studies of treatment seekers indicate that women are disproportionately affected by mental health problems and that their vulnerability is closely associated with marital status, work and roles in society. Women's mental health cannot be considered in isolation from social, political and economic issues. When women's position in society is examined, it is clear that there are sufficient causes in current social arrangements to account for the surfeit of depression and anxiety experienced by women. Women experience and respond to stress quite differently than do men. In addition, the routine of women's lives render them at risk to experience more stress than do men. This reflects greater number of social roles women fill as wife, mother, daughter, employee and carer of others. Beyond that, women's reproductive role of bearer, producer, feeder and nurturer of children produces unique potential for stress related effects. Thus, the well-documented higher morbidity in women's health across the lifespan has a clear biosocial underpinning to explain the burnout rates. It is not

In this report the San Francisco Commission and Department on the Status of Women take an in-depth look at middle and high school girls in the City and County of San Francisco. A gender analysis on a collection of disaggregated data. Then positive trends for best practices were examined which require corrective action. This report is also meant to act as a benchmark against which subsequent progress can be measured. This report concludes that San Francisco girls of color are disproportionately represented in both the child welfare and juvenile justice systems. It is recommended that these two systems work together to coordinate services and resources to address and correct this issue.

This issue of The NSDUH Report examines past year violent behavior (2008-2009) among females aged 12 to 17. Combined 2006 to 2008 data indicate that 18.6 percent of adolescent females got into a serious fight at school or work in the past year, 14.1 percent participated in a group-against-group fight, and 5.7 percent attacked others with the intent to seriously hurt them; about one quarter (26.7 percent) of adolescent females engaged in at least one of these violent behaviors in the past year. Adolescent females who engaged in at least one of these violent behaviors were more likely than those who did not to have indicated past month binge alcohol use (15.1 vs. 6.9 percent), marijuana use (11.4 vs. 4.1 percent), and use of illicit drugs other than marijuana (9.2 vs. 3.2 percent). The rate of substance use was higher the more types of violent behaviors the girls engaged in (e.g., binge drinking in the past month was reported by 6.9 percent of girls with none of the violent behaviors, 12.6 percent of those with one type of violent behavior, 17.3 percent of those with two types, and 27.2 percent of those with three types).

Adolescence (ages 12 to 17) is a crucial phase of human development, during which females and males experience different biological, social, and cognitive changes. Findings from the National Survey on Drug Use and Health (NSDUH) show that compared to adolescent males nationwide, adolescent females had significantly higher rates of past month illicit drug use other than marijuana. Females also had higher rates of current alcohol use, cigarette use, past year nonmedical pain reliever use, depression, and alcohol dependence.<sup>1</sup> Understanding the characteristics of adolescent female substance abuse treatment admissions can help to inform public health policy and build prevention and intervention programs that are gender specific.

Using the 2007 Treatment Episode Data Set (TEDS), this report examines the characteristics of female substance abuse treatment admissions aged 12 to 17. In 2007, of the nearly 132,000 admissions aged 12 to 17, approximately 30 percent or slightly more than 40,000 were female admissions.

This is a booklet designed for women as a guide to help empower women to protect their mental health. It provides resources, and preventative tips and tools in order to recognize warning signs and to promote better mental health for women and girls. A comprehensive list of ways to stay healthy, warning signs, overcoming stigma, and how/where to seek help (including a resource guide) for sound mental health is available as well.

This report represents a collaborative effort of women's health experts across multiple agencies and offices. Its purpose is to spur positive changes through suggested actions through policy planners, health care providers, and others by translating these actions into reality. Many of the suggested actions center on incorporating women's mental health into primary care and focusing on gender/cultural diversity including women's unique prevalence for trauma, stress, violence.

Program Name	Population served	What programs specifically for women and girls?
About Face	Bay Area women and girls	<p>About-Face equips women and girls with tools to understand and resist harmful media messages that affect their self-esteem and body image. They accomplish this through three programs: Education Into Action media-literacy workshops for teens and the community; Take Action, which enables girls and women to develop and execute their own actions; and the About-Face.org website</p> <p>La Casa offers a comprehensive continuum of support services, because survivors of domestic violence need more than a bed for the night, or a few weeks of respite, to transition to truly violence-free lives. Invoking strength-based empowerment models, their programs facilitate safety and offer transformative opportunities to heal from and end domestic violence.</p> <p>Each year, they serve more than 10,000 community members. All their program services are free of charge, confidential, and available to all women, teens and children in various languages, particularly English and Spanish. Our Adult and Teen Hotlines provide 24-hour crisis counseling, resources and referrals;</p> <p>The Domestic Violence Response Team strives to reduce trauma by offering victims on-site crisis assistance and legal support while offering professionals education and resources to compassionately identify and respond to domestic violence;</p>
La Casa de Las Madres	Bay Area women and girls, particularly focused on underserved populations	<p>The Emergency Shelter Program provides up to 8-weeks of safety and support to 35 women and children fleeing violence every day and night;</p> <p>The Drop In Counseling Center provides domestic violence victim</p>

Program main line phone number/information line/reception desk	Program main website	program general information email	Program Street Address	Program City
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(415) 839-6779	<a href="http://www.about-face.org/">http://www.about-face.org/</a>	<a href="mailto:info@about-face.org">info@about-face.org</a>		San Francisco
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(415) 503-0500	<a href="http://www.lacasadelasmadres.org/2_0About.html">http://www.lacasadelasmadres.org/2_0About.html</a>	<a href="mailto:info@lacasa.org">info@lacasa.org</a>		San Francisco
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Program zipcode	First Name of contact person	Last Name of Contact person	position at agency	phone number for contact person
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Jennifer

Berger

Executive Director

email for contact person	date contacted	Comments	Notes
jberger@about-face.org		Heather knows Jennifer well from collaborating on projects around body image workshops for teen girls. This org runs great workshops on media awareness and body image with a new focused workshop series for young women of color. I am happy to contact Jennifer for any questions/needs ,etc.	

Last Name Author	First Name Author	Title of Article	Journal Title/Book Title	Year
Covington	Stephanie	Gender Responsive Treatment and Services in Correctional Settings	Women & Therapy	2007
Adamshick	P.Z.	The lived experience of girl-to-girl aggression in marginalized girls A social-cognitive information-processing model for school-based aggression reduction and prevention programs: Issues for research and practice	Qualitative Health Research vol. 20, issue 4	2010
Boxer & Dubow	Paul & Eric		Applied & Preventive Psychology	2002

Brown, Chesney-Lind, & Stein	Lyn Mikel Brown, Meda Chesney-Lind, and Nan Stein	Patriarchy Matters: Toward a Gendered Theory of Teen Violence and Victimization	Violence Against Women	2007
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Cauffman	Elizabeth	Understanding the female offender	The Future of Children, vol. 18, issue 2	2008
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Chesney-Lind	Meda	Girls and violence: is the gender gap closing?	VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence	2004
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Ferrell, Henry,  
Schoeny,  
Bettencourt, & Tolan

Normative beliefs  
and self-efficacy for  
nonviolence as  
moderators of peer,  
school, and parental  
risk factors for  
aggression in early  
adolescence.

Journal of Clinical  
Child and  
Adolescent  
Psychology

2010

Hipwell & Loeber

Alison & Rolf

Do we know what  
interventions are  
effective for  
disruptive and  
delinquent girls?

Clinical Child and  
Family Psychology  
Review

2006

Littrell & Zinck	Action research shows group counseling effective with at-risk adolescent girls	Professional School Counseling	2000
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Prout & Prout	A meta-analysis of school-based studies of counseling and psychotherapy: an update	Journal of School Psychology	1998
---------------	--	------------------------------	------

Ringrose	Jessica	A new universal mean girl: examining the discursive construction of social regulation of a new feminine pathology	Feminism & Psychology	2006
----------	---------	---	-----------------------	------

Merrell, Buchanan, and Tran		Relational aggression in children and adolescents: a review with implications for school settings	Psychology in Schools	2006
-----------------------------	--	---	-----------------------	------

Wilson and Fagan		What do we know about gun use among adolescents?	Center for the Study of Prevention of Violence: Institute of Behavioral Science/ University of Colorado, Boulder	2002
---------------------	--	---	---	------

Kaltiala-Heino	Riittakerttu	Early puberty is associated with mental health problems in middle adolescence	Social Science & Medicine	2003
----------------	--------------	---	------------------------------	------

Walvoord	Emily C.	The timing of puberty: Is it changing? Does it matter?	Journal of Adolescent Health	2010
----------	----------	---	---------------------------------	------

Wierson	Michelle	Toward a new understanding of early menarche: The role of environmental stress in pubertal timing	Adolescence	1993
---------	----------	---	-------------	------

Stice	Eric	Relation of early menarche to depression, eating disorders, substance abuse, and comorbid psychopathology among adolescent girls	Developmental Psychology	2001
-------	------	--	-----------------------------	------

Posner	Rachel	Early menarche: A review of research on trends in timing, racial differences, etiology and psychosocial consequences	Sex Roles	2006
--------	--------	--	-----------	------

Caspi & Moffitt	Avshalom, Terrie E	Individual differences are accentuated during periods of social change: The sample case of girls at puberty	Journal of Personality and Social Psychology	1991
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Moffitt & Caspi; Belsky	Terrie E. & Avshalom; Jay	Childhood experience and the onset of menarche: A test of a sociobiological model	Child Development	1992
----------------------------	------------------------------	--	-------------------	------

Negriff	Sonya	The relationship between pubertal timing and delinquent behavior in maltreated male and female adolescents	Journal of Early Adolescence	2010
---------	-------	--	---------------------------------	------

Rapp-Paglicci,  
L., Roberts, A.,  
Wodarski J.

Handbook of  
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Handbook on  
Violence

2002

Moffitt, Caspi,  
Rutter, & Silva

Sex differences in  
antisocial  
behaviour: Conduct  
disorder,  
delinquency, and  
violence in the  
Dunedin  
Longitudinal Study.

Book

2001

Pepler, Madsen,  
Webster, & Levene

The Development  
and Treatment of  
Girlhood Aggression Book

2004

Covington

Stephanie

Creating gender-  
responsive  
programs: The next  
step for women's  
services

Corrections Today

2001

Type of source (article, book, etc)	Population that is main focus on source (youth, adults, women and girls, etc)	Key Words/Subjects (ex. trauma, body image, culturally competent intervention etc)	website
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article	women in criminal justice systems	women, criminal justice system, gender responsive treatment,	<a href="http://dx.doi.org/10.1300/J015v29n03_02">http://dx.doi.org/10.1300/J015v29n03_02</a>
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article	marginalized girls	violence, aggression, girls, adolescents, marginalized,	
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article	children and adolescents	aggression, school programs, social-cognitive, information-processing	
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article      teens, young      bullying, gendered  
                 women in      violence, girls'  
                 particular      violence, girls'  
                 victimization      <http://vaw.sagepub.com/content/13/12/1249>

article      young  
                 women

article      young      aggression, girls,  
                 women      violence,  
                 criminalization      <http://vawnet.org>

article

adolescents

<http://www.informaworld.com/smp/content~db=all~content=a929200215>

article

girls

article at-risk  
adolescent  
girls

article children and  
adolescents

article

article

children and  
adolescents

report adolescents gun, violence, adolescents <http://www.colorado.edu/cspv/publications/papers/CSPV-007.pdf>

journal article adolescents pubertal timing, adolescents, internalizing symptoms, externalizing symptoms

article children and adolescents menarche, pubertal onset, children, puberty

article adolescents pubertal timing, adolescents, menarche, marital conflict

article adolescent girls menarche, depression, girls, substance abuse, eating disorders, psychopathology

article

girls

pubertal timing,  
menarche,  
menstruation

article

girls

girls, puberty,  
individual  
differences, life  
course,

article girls girls, onset of menarche, family conflict,

article adolescents pubertal timing, delinquency, maltreatment, gender differences

book girls girls, context for violence, gender-specific services

Book young women/girls conduct disorder, violence, gender differences, delinquency

Book girls--all ages aggression, girls,  
and intergenerational  
development violence, family  
al stages factors

article women women, gender-  
responsive services,  
incarcerated women

## Summary

## Comments

This article posits the importance of having gender responsive services available to women in the criminal justice system (CJS). Women offenders face gender-specific adversities including sexual abuse, sexual assault, domestic violence and poverty. Most women in correctional facilities are poor, undereducated, unskilled, and are disproportionately women of color. Additionally, many of these women have substance abuse problems and a history of trauma. Covington highlights guiding principles that are designed to address system concerns about the management, supervision, and treatment of women offenders in the CJS. These include acknowledging gender, creating a safe environment, developing policies and programs that are relational, addressing substance abuse/trauma/mental illness through a comprehensive and culturally relevant way, providing women with ways to improve their SES, and establishing a collaborative system or service for reentry into the community. It is also important to add that women are relational by nature and seek connections with others. Many women i

Aggression in schools is problematic. Boxer & Dubow review research on the development of aggressive behavior within a social-cognitive information processing (SCIP) framework. They highlight components of best practice school programs that address the steps to SCIP. In addition, limitations as well as future research and applications recommendations for this model are offered.

This article discusses how gender plays into the violence and victimization of girls. The authors argue that the increase in girls' arrests are not the product of girls becoming more like boys but rather criminalization of girls' minor offenses is occurring. The article also explores how gender-neutral approaches to seeing and intervening with aggression amongst girls in schools is problematic as it minimizes the structural realities that exist beneath aggressive behavior. The Bullying Prevention Program is critiqued to illustrate this point. Cauffman begins by reviewing historical trends in arrest rates, processing, and juvenile justice system experiences of female offenders. She also describes the adult outcomes commonly observed for female offenders and points out that the long-term consequences of offending for females are often more pronounced than those for males, with effects that extend to the next generation. She also considers common patterns of offending in girls, as well as factors that may increase or decrease the likelihood of offending. She then reviews what is known about effective treatment strategies for female offenders. Female delinquents have a high frequency of mental health problems, suggesting that effective prevention efforts should target the mental health needs of at-risk females before they lead to chronic behavior problems. Once girls with mental health problems come into the juvenile justice system, says Cauffman, diverting them to community-based treatment programs would not only improve their individual outcomes, but allow the juvenile justice system to focus on cases that present the greatest risk. Evidence is emerging that gender-specific treatment met

Chesney-Lind contends that media hype is triggering an increased focus on girls' violence leading to increasing harsh consequences for girls' aggression. However, she points out the reasons to be skeptical about the new lenses through which girls are viewed as delinquents, offenders, and so on. The author highlights statistics indicating that girls' violence has decreased rather than increased since the early 1990s.

This study examined the direct effects of beliefs about aggression and nonviolence on physical aggression and their role as protective factors that buffer adolescents from key risk factors in the peer, school, and parenting domains. Multilevel analyses were conducted on data from 5,581 adolescents representing two cohorts from 37 schools in four communities collected at the beginning and end of the sixth grade and at the end of the following 2 school years. Individual norms for aggression at Wave 1 moderated relations of delinquent peer associations and parental support for fighting with physical aggression. Self-efficacy for nonviolence at Wave 1 moderated relations of school risk, delinquent peer associations and parental support for fighting with physical aggression. There was clearer evidence for protective effects for self-efficacy for nonviolence for girls than for boys.

Interventions that have been developed for behavior problems of boys are typically used to intervene with girls displaying behavior problems with little success, leaving these girls ill-served by the mental health and juvenile justice systems. A growing body of evidence supports the need for female-specific interventions as various risk factors differ from boys to girls. Hipwell & Loeber review what limited research does exist on interventions, as far too often researchers don't control for gender in relation to interventions for behavioral problems with children and adolescents. A small body of evidence suggests that interventions specifically designed to address female behavior problems or risk factors can be effective in ameliorating these behaviors. Multi-model interventions that address multiple risk factors are hopeful for positive outcomes for girls. Hipwell & Loeber suggest future studies and development of interventions that are gender specific in order to reduce disruptive and delinquent behavior amongst girls.

Attempted to answer 5 questions: (1) Does group counseling effectively decrease problem severity for at-risk students? (2) Does progress toward goal attainment endure beyond termination? (3) Do students notice other changes in themselves related to what they learned in group counseling? (4) How do students evaluate group characteristics? and (5) Is group counseling an efficient use of counselor time? 35 15–18 yr-old girls were involved in 1 of 4 groups held in a high school. All 10 group counseling sessions were co-facilitated by a male and female counseling team. While the results are exploratory, group counseling appeared effective in promoting individual change. At 1-wk and 6-wk follow-ups, a majority of female students reported moderate to strong progress in achieving their primary and secondary goals. A significant reduction in problem severity was reported by students upon termination of the counseling groups. Additionally, students experienced meaningful changes in attitudes and in their relationships with other people. The 2 follow-up surveys indicate that the 10 sessions of group counseling

he effectiveness of psychological interventions has long been discussed and studied in the behavioral sciences. In recent years, the quantitative review technique of meta-analysis has been utilized to evaluate effectiveness across a wide variety of therapeutic interventions. The purpose of this study was to apply this technique to school-based outcome studies of counseling and psychotherapy published in a recent 10-year period. In particular, this study updates and extends an earlier meta-analysis focusing on the same question (Prout & DeMartino, 1986). Seventeen studies were identified that met criteria acceptable for use in a meta-analysis and were either conducted in school settings or dealt with relevant school issues or problems. The analysis found an overall effect size of nearly one standard deviation across all studies and outcome variables. These findings support the effectiveness of school-based therapeutic interventions, although this conclusion is offered with some cautions and limitations. These findings apply almost exclusively to group interventions. Further, the greatest impact was c

This article examines recent sensationalist media attention to mean girls. Popular constructions of the mean girl are argued to be rooted in a developmental psychology debate on girls as indirectly and relationally aggressive. The developmental psychology model of feminine aggression is analyzed as a postfeminist discourse, illustrated to pathologize girls through universalizing, essentializing and context-devoid models of girlhood, which contribute to a shift from notions of girls as vulnerable to girls as mean in popular culture. Constructions of the mean girl are also linked to postfeminist gender anxieties over middle-class girl power and girl success. Regulatory strategies emerging to manage mean girls are examined as oriented toward maintaining appropriate modes of repressive, white, middle-class femininity. When 'other' girls do figure in the mean girl story, it is through sensational incidences of isolated girl violence, held up as a dangerous risk of uncontained feminine aggression. Girlhood is argued to remain carefully regulated, through class and race-specif

This article provides an overview of the literature on relational aggression of school-aged children and adolescents, with the specific aim of making this information relevant to school settings and education professionals. Relational aggression is discussed in terms of definitions, terms, and the importance of the school context. The literature on gender and familial influences as they relate to relational aggression is overviewed. Assessment methods for detecting relational aggression in children and adolescents are described, with an emphasis on measurement techniques most viable for capturing this sometimes-elusive construct. We conclude with a discussion of proposed best practices in school settings for effectively preventing and responding to incidents of relational aggression within the context of social and emotional learning interventions and positive behavioral interventions and supports. © 2006 Wiley Periodicals, Inc. *Psychol Schs* 43: 345–360, 2006.

The current generation of American teenagers has grown up surrounded by gun violence. Guns have played a significant role in shaping the developmental trajectories and behaviors of many inner-city youths. In this essay, we examine the role of guns in the lives of young people, and especially in the social and symbolic construction of violent events among adolescents, primarily focusing on males. First, we review studies of gun attitudes and behaviors as well as several epidemiological studies of firearm experiences and risk factors for violence among youth. Second, we summarize several recent studies on the trends in youth violence in relation to firearms. Next, we review findings from our original research based on in-depth interviews with 377 active gun offenders from two socially isolated inner-city neighborhoods. We present descriptive counts for the sample on variables relating to gun acquisition and use. Data on the use of guns in violent events among adolescents are generally lacking in prior research. We attempt to fill that knowledge gap by presenting a summary of our more detailed analysis of g

This study set out to assess the relationship between pubertal timing and behavioral problems in middle adolescence. The study involved a school based survey of health, health behavior and behaviors in school as well as questions about emotional and behavioral problems. Secondary schools in 4 regions and 13 towns in Finland participated in the study in 1998. The respondents were 36,549 adolescents aged 14-16. The study included questions on depression, bulimia nervosa, psychosomatic symptoms, anxiety, drinking, substance use, smoking, bullying and truancy. Among girls, both internalizing and externalizing symptoms were more common the earlier puberty occurred. Among boys, externalizing symptoms only were associated with early puberty. It is concluded that early pubertal timing is associated with increased mental health problems. Professionals working with adolescents should consider the mental health needs of early maturing adolescents.

Whether the secular trend of a decreasing age of puberty has continued over the past 50 years remains controversial. Data that had been classically used to address this issue are reviewed and large epidemiologic studies, which had not previously been included, are now considered to challenge the conclusions of prior debates of this topic. The effect and timing of excessive weight gain are discussed in detail and recent observations about the opposing effects of obesity on pubertal timing of girls versus boys are considered. The second half of the review examines both the causes and the long-term health consequences of early puberty, touching on the possible effect of stress and endocrine-disrupting chemicals along with the risks of reproductive cancers, metabolic syndrome, and psychosocial consequences during adolescence and beyond.

A recent theory suggests that environmental stress may trigger early menarche in adolescents. This is in contrast to a more traditional view that early menarche is biologically determined and serves as a risk factor for developing girls. The purpose of the present study was to examine two family stressors, divorce and interparental conflict, in light of the Belsky et al. theory. Participants were 71 adolescent females and their mothers. Of these, 44 were from intact families and 27 were from divorced families. Age at first menarche was obtained via self report. Maternal reports of interparental conflict as well as adolescent perception of conflict were obtained. Mothers reported on marital status. Results showed that, compared to girls from intact families, those from divorced families had an earlier onset of menarche. In addition, higher maternal reports of interparental conflict were significantly related to earlier menarche in the total sample.

This prospective study tested whether early menarche partially accounts for the increase in depression, eating pathology, substance abuse, and comorbid psychopathology that occur among adolescent girls, with structured interview data from a community sample (N = 496). Early menarche (prior to 11.6 years) was associated with elevated depression, substance abuse, and "any" disorder but did not confer increased risk for anorexia nervosa, bulimia nervosa, or binge eating disorder. Although there was significant comorbidity across all three classes of pathology, early menarche was associated only with comorbid depression and substance abuse. Results provide partial support for the assertion that early menarche is a general risk factor for psychopathology among adolescent girls but suggest that this risk may not apply to certain disorders and that the effects are modest in size.

This paper elucidates varying definitions of "early menarche" and reviews evidence in four well-documented areas: (a) A potential trend toward earlier maturation, (b) racial differences in menarcheal timing, (c) etiology of early puberty, and (d) consequences of early puberty. Mean menarcheal age has remained relatively constant over the past 50 years. Conflicting results concerning racial differences in timing highlight the need for further research to unravel the effects of race and SES. Evidence regarding the relative etiological contributions of nutrition, environmental stress, and genetics is evaluated. Maturing earlier than one's peers has negative consequences for girls, especially when combined with simultaneous stressors. However, the negative psychosocial consequences of early puberty may not last into later adolescence or adulthood. Few studies have investigated early-maturing adolescents' subjective experience with menarche, particularly those from non-white and non-middle class backgrounds.

The emergence of new behaviors and the reorganization of psychological structures are often attributed to critical events and crises in the life course. A fundamentally different perspective is offered: Potentially disruptive transitions produce personality continuity, not change. The behavioral response of adolescent girls to the onset of menarche was studied in a longitudinal study of an unselected birth cohort. Predictions from 3 rival hypotheses about the relation between pubertal change and social psychological change were first tested: the stressful change, off time, and early timing hypotheses. The results supported the early-timing hypothesis. Whether stressful, early menarche generated new behavioral problems or accentuated premenarcheal dispositions was then tested. The results supported an accentuation model: Stressful transitions accentuated behavioral problems among girls who were predisposed to behavioral problems earlier in childhood. Speculations are offered for a broader theory about the role of individual differences in the life course.

We tested predictions about psychosocial factors in the onset of menarche using data from a longitudinal study of 16-year-old girls. Belsky, Steinberg, and Draper have proposed a model that seeks to explain individual differences in maturational timing in terms of stressful childhood experiences. Their model hypothesizes that (1) individuals who grow up under conditions of family stress (2) experience behavioral and psychological problems which (3) provoke earlier reproductive readiness. In this study, the effect of family stressors on menarche was mediated by neither behavior problems nor weight, contrary to the predictions. However, the most provocative proposition advanced by Belsky et al. received empirical support. Family conflict and father absence in childhood predicted an earlier age of menarche, and these factors in combination with weight showed some evidence of an additive influence on menarche. A genetic inheritance model may provide a more parsimonious account of these data than does a conditional adaptation model derived from sociobiology. This study examined the relationship between pubertal timing and delinquent behavior across two time points in a sample of 303 maltreated and 151 comparison adolescents aged between 9 and 13 years at enrollment. The first aim was to examine the relationship between pubertal timing and delinquency for the total sample and then to test for gender differences using multiple group models. The second aim was to examine the interaction effect of pubertal timing and maltreatment on delinquency as well as gender differences for this interaction effect. Results showed that earlier pubertal timing was related to higher delinquency and this relationship was not significantly different for males and females. Maltreatment did not moderate the relationship between pubertal timing and delinquency for the total sample; however, there was evidence of a three-way interactions. These findings highlighted the need to examine contextual factors that may affect the amplification and direction of these relationships.

A multidisciplinary team of experts examines violence from a resilience perspective

Violence knows no boundaries. It attacks in schools, in families, and even in the workforce—places that should be regarded as safe havens. Encompassing the enormity of violence through a comprehensive, biopsychosocial perspective, *Handbook of Violence* examines community, school, family, and workplace violence, including identification, classification, prevention, and intervention programs and case management.

Written by the leading authorities in their fields, this groundbreaking compilation:

Reviews how children and adolescents from violent homes are detrimentally affected in multiple ways, including short- and long-term consequences that seriously impair their psychological, social, educational, and physical development

Explores issues related to the occurrence of domestic violence in African-American families, presenting an array of theoretical formulations that may prove useful to practitioners who must service both victims and perpetrators

Why are females rarely antisocial and males antisocial so often? This is one of the key questions addressed in a fresh approach to sex differences in the causes, course and consequences of antisocial behavior. A multidisciplinary team of authors present all-new findings from the landmark Dunedin Longitudinal Study and also provide new insights into such topics as the importance of puberty, diagnostic issues in psychiatry, the problem of domestic violence and the intergenerational transmission of antisocial behavior.

After decades of neglect, researchers have begun to focus attention on the development and outcomes of girlhood aggression. This comprehensive volume provides an account of some of the pioneering research in the field. Its central aims are to highlight current understanding, identify key components for preventing and treating the complex array of problems experienced by aggressive girls, and raise new questions for future research.

The perspectives presented by the authors highlight the diverse factors that moderate the emergence of aggression while offering insight into how to target that aggression at various stages of development. The problem is presented as a continuum from normative forms of behavior to extreme and serious attacks. The importance of relationships--particularly family relationships--is a theme that permeates the entire volume. A growing body of research indicates that aggression in girls is a predictor of long-term psychological, social, academic, health, and intergenerational problems.

This article highlights a number of considerations for the development of gender-responsive programs and services. For women who are in the criminal justice system, a gender-responsive approach would include comprehensive services that take into account the content and context of women's lives. Programs need to take into consideration the larger social issues of poverty, abuse, and race and gender inequalities, as well as individual factors that impact women in the criminal justice system. Services also need to be responsive to women's cultural backgrounds. Programming that is responsive in terms of both gender and culture, emphasizes support. Service providers need to focus on women's strengths and they need to recognize that a woman cannot be treated successfully in isolation from her social support network. Coordinating systems that link a broad range of services will promote a continuity-of-care model. Such a comprehensive approach would provide a sustained continuity of treatment, recovery, and support services.

Name of Film	Name of agency/company responsible for publishing the film
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"Me Facing Life: Cyntoia's Story,"	airing on PBS independent lense March 1st @ 10pm and afterwards on PBS.org
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"Learning From Our Mistakes: Transforming the Juvenile Justice System"	Ella Baker Center for Human Rights
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"System Failure"	Ella Baker Center for Human Rights
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summary

In 2004, Cyntoia Brown was arrested for murder. There was no question that a 43-year-old man is dead and that she killed him. What mystified filmmaker Daniel Birman was just how common violence among youth is, and just how rarely we stop to question our assumptions about it. He wondered in this case what led a girl — who grew up in a reasonable home environment — to this tragic end?

*Me Facing Life: Cyntoia's Story* explores Cyntoia's history and her future. Without attempting to excuse her crime as youthful indiscretion nor to vilify her as an example of a generation gone off the rails, Birman simply follows Cyntoia through six years of her life after the crime, and searches for answers to persistent questions.

Cyntoia wrestles with her fate. She is stunningly articulate, and spends the time to put the pieces of this puzzle together with us. Cyntoia's pre-prison lifestyle was nearly indistinguishable from her mother's at the same age. History — seemingly predestined by biology and circumstance — repeats itself through each generation in this family.

Produced through the Ella Baker Center's Books Not Bars campaign this film talks about the school to prison pipeline that is changing the lives for the worse of some of our most vulnerable citizens; impoverished youth of color. This film is a blue print for how California can transform the dismal system we are now operating under to one that is rehabilitative and gender/culturally sensitive.

Another film produced through Books Not Bars campaign, this film discusses in detail and through interviews with formerly incarcerated youth and their families ways in which the California Youth Authority has abused its power over incarcerated youth. One account in particular is relevant to the sexual harassment and verbal, physical, and emotional abuse suffered by the young women (that is different from the way young men are treated) in the system that sadly goes unnoticed and is more often than not, never addressed.