

Prevention Glossary



Prevention: A systematic process that promotes safe and healthy environments and behaviors, reducing the likelihood or frequency of an incident, injury or condition occurring (Prevention Institute, 2007).

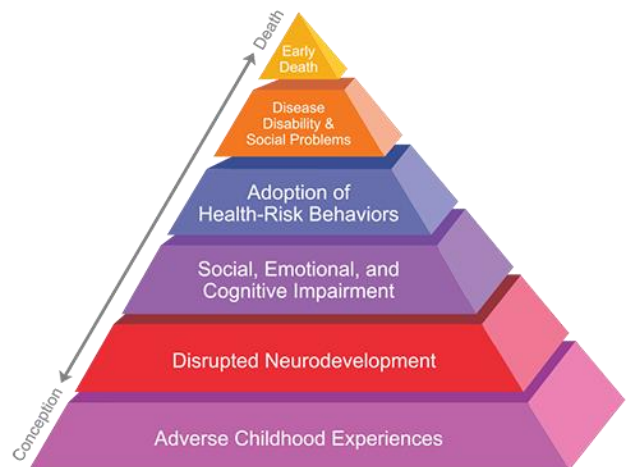
Prevention can be broken down into two categories: BEFORE and AFTER

- **Primary Prevention:** stopping a social or health problem BEFORE it occurs
- **Secondary Prevention:** takes place immediately AFTER an event occurs to deal with short term consequences and immediate needs
- **Tertiary Prevention:** long-term approach for AFTER an event occurs

FOR THE CONTEXT OF THIS GLOSSARY WE WILL FOCUS ON **PRIMARY PREVENTION**.

Adverse Childhood Experiences (ACEs): Research based off the idea that childhood experiences, both positive and negative, have a severe impact on a person's future victimization, perpetration and lifelong health (CDC, 2016).

Anti-Oppression Framework: Framework that works to acknowledge and shift power towards inclusiveness, accessibility, equity and social justice. It's important to ensure that this framework is embedded in everything by examining attitudes and actions through the lens of access, equity, and social justice (Virginia Sexual & Domestic Violence Action Alliance).



Determinants of Health: Factors that combine and affect the health of a community or individual. These factors are largely due to environment, genetics, income, education level, and our relationships with people. These circumstances all have considerably more effects on health as opposed to use or access to health care services, which is commonly believed to have more of an impact. (WHO, 2017).

Evaluation: "The systematic collection of information about the activities, characteristics, and outcomes of strategies (i.e., programs) to make judgments about the strategy, improve strategy effectiveness, and/or inform decisions about future strategy development" (based on Michael Patton's definition as cited in U.S. Department of Health and Human Services [U.S. DHHS], 2005, p. 1).

- **Empowerment Evaluation:** A learn-by-do strategy that helps organizations improve their efforts to prevent violence by building their capacity to do evaluation and to use evaluation results to improve strategies (CDC, 2009).

Health: A state of complete physical, mental and social well-being and not just the absence of sickness (WHO, 2003).

Health Disparity: Preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations (CDC, 2015).

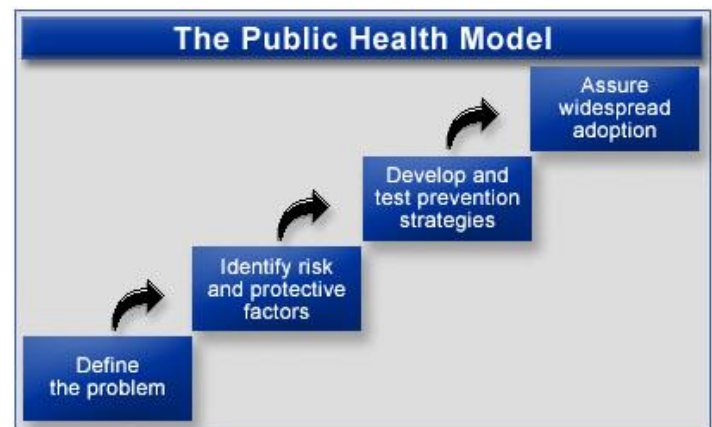
Health Equity: Focuses on people's ability to attain the highest level of health regardless of how people are defined socially, economically, demographically, or geographically.

Healthy Masculinity: Acknowledging that masculinity is about characteristics and qualities that are traditionally ascribed to men. Shifts the ideas about what it means to be masculine away from those that are risky, violent and harmful. Focuses on the goal that boys and men will be able to critically analyze how norms, attitudes and behaviors impact themselves and others, while striving to achieve healthy qualities and characteristics along with fluidity to define what it means to be a boy or man.

Protective Factors: Circumstances or conditions that reduce the likelihood of violence or victimization.

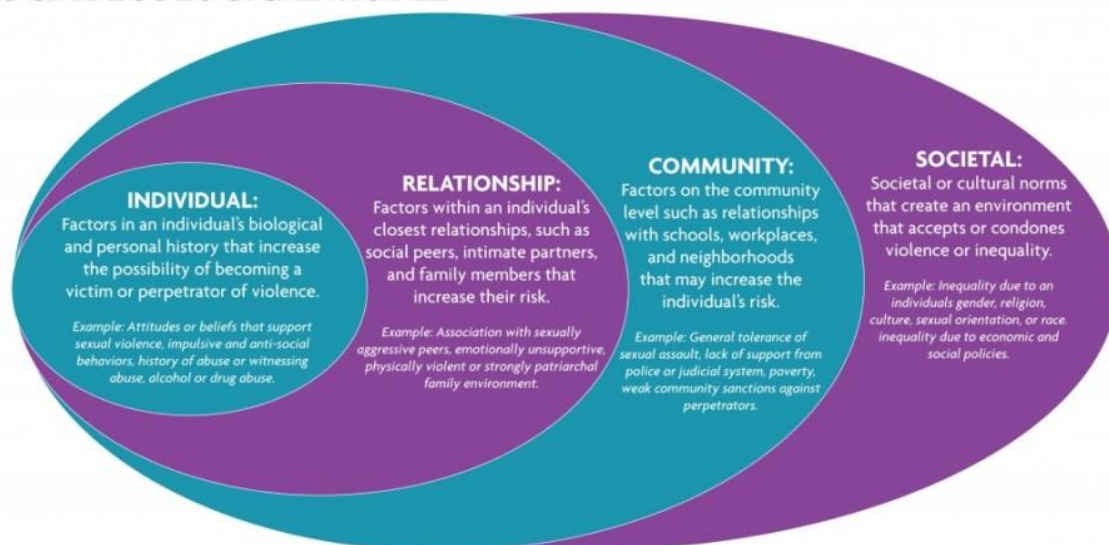
Public Health Approach: Focuses on the health, safety and well-being of entire populations and rooted in the scientific method and grounded in data. This approach strives to provide maximum benefit for the largest number of people (CDC, 2015).

Risk Factors: Circumstances or conditions that increase the likelihood of violence or perpetration.



Social Ecological Model: A four level model that focuses on the interaction between individual, relationship, community and societal factors to help understand violence and the potential primary prevention strategies. This approach allows us to recognize factors that put people at risk for violence or acknowledge how to protect them from experiencing or perpetrating it (CDC, 2015).

SOCIAL ECOLOGICAL MODEL



Social Norms: The values, beliefs, attitudes, and/or behaviors shared by a group of people. Often based on what people believe to be normal, typical, or appropriate and can function as unspoken rules or guidelines for how people behave.

- **Social Constructs:** A social idea, phenomenon or category that was created by society and developed through social norms. It can also be a perception of a person or group that is ‘constructed’ through socialization.

Spectrum of Prevention: A tool that encourages a range of activities in regards to primary prevention. This approach shifts from the idea that prevention is about teaching healthy behaviors and addresses six levels of primary prevention work (Prevention Institute, 1999).

The Spectrum of Prevention

Influencing Policy & Legislation
Changing Organizational Practices
Fostering Coalitions & Networks
Educating Providers
Promoting Community Education
Strengthening Individual Knowledge & Skills

Trauma Informed Care: An approach to human services that stems from the knowledge that most people have experienced some level of trauma in their lifetime. Service providers understand that the trauma that a person experiences affects behaviors, cognitive abilities, perceptions and are sensitive to trauma. This approach allows for service providers to work with individuals while understanding their specific needs based off of their trauma. This approach shifts the approach to individuals from ‘what’s wrong with you?’ to ‘what’s happened to you?’

Additional Resources:

National:

- <https://www.cdc.gov/violenceprevention/index.html>
- <http://www.preventipv.org/>
- <https://vetoviolence.cdc.gov/>
- <https://www.preventioninstitute.org/>

Delaware Specific:

- <http://www.dcadv.org/>
- <http://www.delawaremen.org/>

For more information, training or technical assistance, please contact DCADV’s Training, Prevention and Outreach team: training@dcadv.org.