RESEARCH REPORT

Let Girls Be Girls

How Coercive Sexual Environments Affect Girls Who Live in Disadvantaged Communities and What We Can Do about It

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Contents

Acknowledgments

Let Girls Be Girls

"Because [I] look at me like as a little girl, so when I was in [my former public housing development] they looked at me like . . . a grown lady. 'Cause I got—I got body parts that men like. So, then when I moved out here [to this new development], I noticed that people . . . were friendly and they knew me as a little girl. I tell them that I'm 12 years old. And they don't believe it, but I tell them that I'm 12. They say that I look like I'm 13, something."

-12-year-old girl (Chicago, IL, 2008)

Teens growing up in neighborhoods marked by chronic poverty and disadvantage are at risk for a range of poor outcomes. Thanks to high-profile national initiatives like the White House's My Brother's Keeper and now the My Brother's Keeper Alliance, the specific issues confronting boys growing up in such distressed places are receiving long-overdue attention. But girls who live in these same communities are faced with similar challenges, and additionally experience gender-specific risks like sexual harassment, exploitation, pressure, and sexual violence. Our goal is to raise attention to a phenomenon we call *coercive sexual environments* (CSEs), which too often affect adolescent girls of color living in urban neighborhoods of concentrated poverty and disadvantage.

Before we begin, however, it is important to acknowledge the sensitivity of this topic and the danger of further stigmatizing an already-stigmatized population—low-income people of color, both males and females. In her essay, "Understanding the Environmental Contexts of Boys and Young Men of Color," our colleague Lynette Rawlings (2015) notes,

> Far too often, when the research and policy communities take on the topic of boys and young men of color, it is to describe in depressing detail how these young males contribute to their own poor outcomes. Complex realities, institutional challenges, and underlying circumstances are reduced to individualized behaviors. In addition, research and policy often fail to explore the many cases where boys and young men are thriving despite challenging circumstances or to examine the roots of these successes.

We face this challenge in addressing one aspect of the experience of girls of color from communities of concentrated disadvantage. How do we discuss a serious issue and its potential solutions without contributing to the very problems that have allowed the CSE phenomenon to flourish in the first place?

As Rawlings suggests, our answer is to look at the larger ecological contexts that affect the girls we are writing about: not just the neighborhoods in which they live, but also at the systems and institutions that have shaped those neighborhoods and the larger cultural influences that affect all girls and women. In fact, when viewed through an ecological lens, we recognize CSEs are probably not unique to neighborhoods of concentrated disadvantage in the United States, but that the phenomenon may also spring up in other communities and affect non-Hispanic white girls. In addition, CSEs are likely found in other settings around the globe, such as war-torn regions, where misogynistic norms from the surrounding culture, violence, and social disorganization run rampant (Adams 2013). However, the focus of our effort here is on communities of color living in neighborhoods of concentrated disadvantage, which may present unique challenges.

We further acknowledge that any victim of sexual violence can experience trauma, whether or not they live in a CSE, and that boys are often victims of sexual violence and harassment as well as girls. Further, boys living in neighborhoods affected by the CSE phenomenon are also at a disadvantage because they are socialized and pushed to at least accept the CSE as passive bystanders or perhaps participate in a CSE as aggressors. We also acknowledge that LGBTQ populations can face similar traumas (Dank et al. 2015). However, as Rawlings (2015) points out, the experiences of girls within various contexts "can vary in profound and unexpected ways." The purpose of this paper is to explore one of those ways, namely, by examining CSE as a gender-specific phenomenon that has unique consequences for low-income girls of color in communities of concentrated disadvantage in the United States so solutions tailored to address the phenomenon and the populations most affected by it can be pursued.

This paper is divided into three parts. First, we briefly review our previous research, which explored the experiences of girls and women in low-income racially segregated urban communities and grounded our theories about the gender-specific mechanism of CSEs. Second, we explore the development and context of the CSE phenomenon from the vantage point of the three ecological domains within which it nests: culture and society, systems and institutions, and, finally, neighborhoods of concentrated disadvantage where the phenomenon produces low to high levels of trauma for the girls who live there, leading to negative consequences for their physical and mental health, educational advancement, and long-term economic stability. Third, we outline next steps for research, briefly review promising and emerging solutions, and raise a call to action for addressing CSEs, not only through policies and campaigns capable of responding to the phenomenon, but by working with the many girls, boys, parents, and other community members from communities of concentrated disadvantage who will gladly stand up to CSEs if given the tools and resources to do so.

The Coercive Sexual Environment Phenomenon

In recent research, we have demonstrated that when disadvantage and violence are great and collective efficacy and social control are low, a gender-specific neighborhood mechanism can emerge that has different effects on male and female youth. To be specific, some communities develop a pervasive CSE in which harassment, domestic violence, and sexual exploitation of women and even very young girls become part of everyday life (Popkin, Acs, and Smith 2010; Popkin, Leventhal, and Weismann 2010; Popkin and McDaniel 2013; Popkin et al., forthcoming).

Our interest in this research began when we first observed strikingly different outcomes for inner-city male and female youth who participated in the US Department of Housing and Urban Development's Moving to Opportunity (MTO) demonstration. MTO was a voluntary relocation program targeted at very low-income residents of distressed public housing in high-poverty neighborhoods in Baltimore, Boston, Chicago, Los Angeles, and New York City. Interim data revealed the girls from families who had received special assistance and incentives to move to a low-poverty neighborhood fared unexpectedly better than boys from these families in terms of mental health and engagement in risky behavior (Briggs, Popkin, and Goering 2010; Popkin, Leventhal et al. 2010).
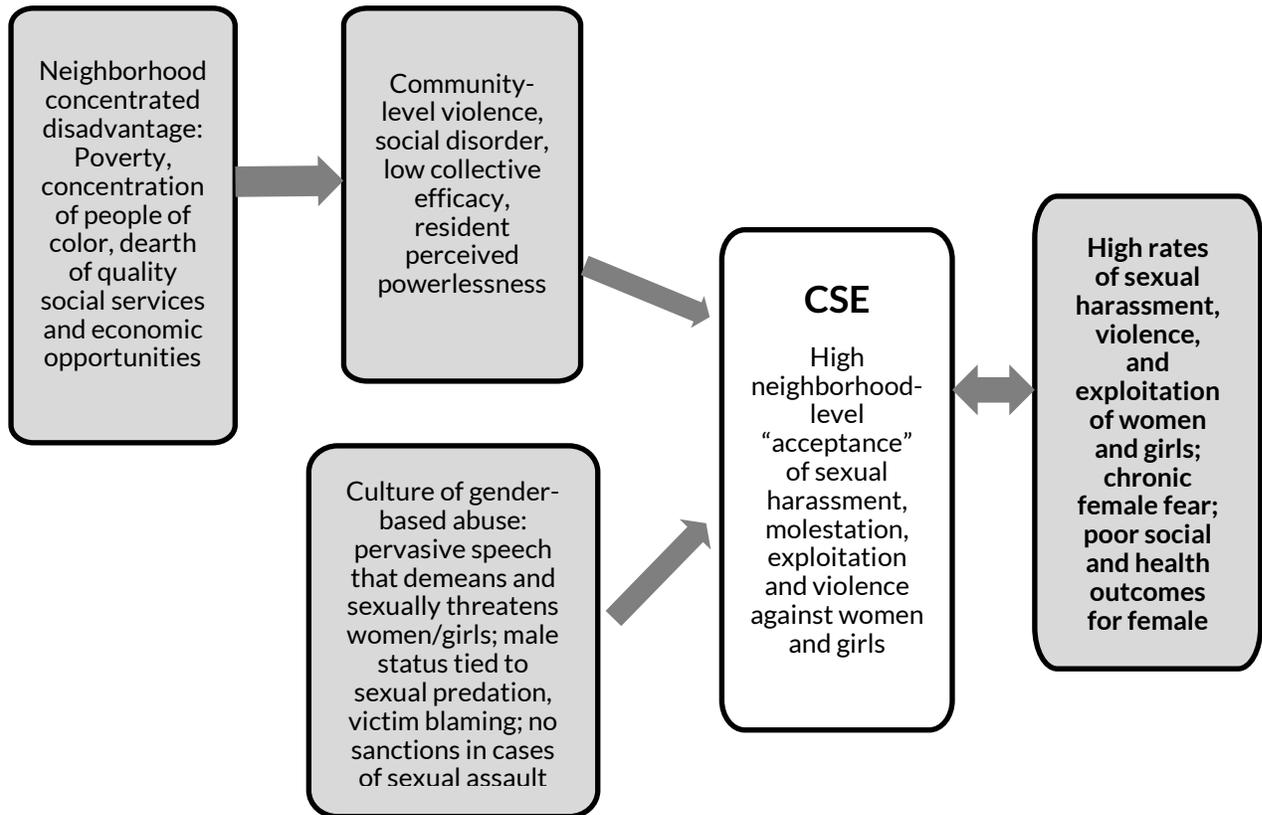
The MTO final evaluation survey also found significant differences in mental and physical health and well-being between the adult women and girls who moved to lower-poverty neighborhoods and those who remained in public housing (Ludwig et al. 2011). This research also showed that the girls who moved were significantly less likely than those who did not move to report frequent unwanted sexual attention (Sanbonmatsu et al. 2011). We conducted additional analysis to create a measure of CSE and found a link between this index and poor mental health. In addition to this quantitative work, we have conducted extensive qualitative research, interviewing hundreds of MTO movers. This work has allowed us to describe what a CSE looks and feels like to those experiencing it; in other words, what it is like to live with chronic violence and predatory threats and how the violence and threats constrain community life. Women and girls in these communities describe daily life with catcalls, grabbing, sexually suggestive language, and violence toward women and even very young girls (Smith et al. 2014).

Since these initial findings from our exploratory work with the MTO survey data, we have developed and validated a more robust measure of CSE for both adults and youth (Popkin et al., forthcoming) and refined our conceptual model (figure 1). Though elements of a CSE may emerge across a variety of contexts (e.g., college campuses, workplaces), our model posits that CSE, as an identifiable phenomenon, results from broader cultural norms around gender-based abuse and harassment combined with high levels of chronic violence and poverty and low levels of collective efficacy present

in highly distressed communities. In these circumstances, sexual harassment, coercion, and gender-based violence become normalized, undermining the life chances of young women and girls.

CSE Conceptual Model

Neighborhood concentrated disadvantage: Poverty, concentration of people of color, dearth of quality social services and economic opportunities

Community-level violence, social disorder, low collective efficacy, resident perceived powerlessness

Culture of gender-based abuse: pervasive speech that demeans and sexually threatens women/girls; male status tied to sexual predation, victim blaming; no sanctions in cases of sexual assault

CSE

High neighborhood-level "acceptance" of sexual harassment, molestation, exploitation and violence against women and girls

High rates of sexual harassment, violence, and exploitation of women and girls; chronic female fear; poor social and health outcomes for female

In the next section of this paper, we unpack this model and show how a CSE does not originate with the people who live in communities of concentrated disadvantage, but rather bubbles up to afflict them after having been brewed within larger cultural, institutional, and neighborhood domains. We also look at the relevant consequences each domain produces for individual women and girls and at how these consequences affect life outcomes. We titled this paper *Let Girls Be Girls* because we believe CSEs—the ultimate expression of these consequences at the neighborhood level—often causes trauma for disadvantaged girls. This trauma then interferes with the natural course of development upon which a young woman's successful transition to adulthood depends, including economic and social success, as well as her health and well-being.

Putting CSEs in Context

A CSE, as we have conceived it, is a placed-based phenomenon that emerges in chronically violent and disadvantaged communities. But, as our model indicates, a CSE does not occur in isolation; rather, it grows out of the broader context of historic and ongoing racial segregation, as well as cultural and societal norms, that encourage gender-based sexual harassment, threats, and violence. A CSE begins with these societal norms, which shape how girls and women are perceived and treated wherever they live. But as figure 2 illustrates, institutions and systems often encourage the social and economic isolation of people of color and frame the opportunities for low-income children of color in very specific ways. These forces play out in racially segregated neighborhoods of concentrated disadvantage, where poverty, violence, and social disorganization take root, allowing CSEs to emerge as a place-based and gender-specific phenomenon that affects the daily interactions, well-being, and economic opportunity of the girls and women who live there.

FIGURE 2

Girls in Context

Source: Adapted from Rawlings (2015).

The Domain of Society and Culture

For most women and girls, experiences of sexism and sexual harassment are an everyday occurrence. In the United States, one in two women has experienced some form of sexual harassment in her lifetime (Pina, Gannon, and Saunders 2009). For example, the American Association of University Women reports that 56 percent of girls in middle and high school report sexual harassment (Hill and Kearl 2011). But although sexual harassment is widespread, some women and girls are more directly affected depending on the settings (e.g., college campuses, military bases, workplaces, or neighborhoods) in which they find themselves.

Although women in most communities are more likely to face sexual harassment than their male counterparts (Gruber and Fineran 2007; Street et al. 2007), some evidence suggests women who grow up in chronically disadvantaged communities are more vulnerable to sexual harassment, exploitation, and victimization and to experiencing related trauma and other long-term consequences (Cobbina, Miller, and Brunson 2008; Menard and Huzinga 2001; Popkin, Leventhal, et al. 2010; Smith et al. 2014). Among African American sexual assault survivors, poverty has been linked to depression, posttraumatic stress disorder, and illicit drug use. Thus, poverty plays a role in how these survivors are able (or unable) to heal from their experiences, complicating access to services and resources that could help them, and emphasizing the nexus of being female, African American, and impoverished (Bryant-Davis et al. 2010).

The Domain of Systems and Institutions

The legacy of segregation and discrimination in federal, state, and local policies and practices means too many low-income African Americans live in neighborhoods that lack quality housing, schools, and basic services, including police (Rothstein 2015; Turner, Popkin, and Rawlings 2009). Although African Americans and other minorities are less starkly segregated today than in the past, virtually all concentrated poverty neighborhoods in the United States are majority minority.

Institutional and systemic forces have affected low-income girls of color in very particular ways that often contribute to the neighborhood settings where a CSE emerges and thrives. For example, Crenshaw, Ocen, and Nanda (2015) describe punitive school disciplinary policies (such as in-school and out-of-school suspension) that are used disproportionately on black girls that, in turn, lead to underachievement. The odds of suspension are three times greater for females with the darkest skin tone than those with the lightest (Hannon, DeFina, and Bruch 2013). Girls also often feel less safe in high-security school environments, as they typically are in high-poverty neighborhoods. In addition,

punitive responses, as well as failure to intervene in situations involving sexual harassment and bullying, often separate black girls from school and lead to increased involvement in the criminal justice system.

The justice system also fails to treat low-income girls and women of color equally, particularly when it comes to sex crimes, exacerbating the isolation of girls from neighborhoods of concentrated disadvantage. This trend begins early with young girls who come from low-income neighborhoods and have experienced physical and sexual abuse. Though much attention is paid to boys and men of color in the criminal justice system, rates of all girls' involvement in the justice system are quietly on the upswing, with girls of color disproportionately affected. African American girls are entering the juvenile justice system at a rate of 123 per 100,000. In contrast, non-Hispanic white girls are confined at a rate of 37 per 100,000 (Saar et al. 2015). There is no definitive understanding behind the increased rates of girls' arrest and incarceration, but they are not due to increased criminal activity (Zahn et al. 2010). Disturbingly, system-level disparities toward low-income girls of color and the place-based phenomenon of CSE may combine to create a self-perpetuating loop. There is a link between girls' experiences with sexual and physical abuse and their involvement in the criminal justice system, especially girls of color. This link creates a victimization-to-imprisonment pipeline, with many girls imprisoned who are victims of sex trafficking, who have run away or are truant, or who have connections to the child welfare system (Saar et al. 2015).

The Domain of Neighborhood

The patterns of systemic injustice described above have created and sustained neighborhoods of concentrated disadvantage—places with high poverty, high crime, and chronic distress that blight the life chances of the families who live there (Sampson 2012). Distressed, central-city public housing communities like those in which MTO families lived are some of the most racially and economically segregated communities in the nation, where the worst aspects of concentrated disadvantage are plainly evident—physical decay, violent crime, drug trafficking, drug and alcohol addiction among adults, high rates of incarceration, and the absence of even the most basic amenities, such as grocery stores and laundromats. Other evidence suggests the risk of sexual violence is greater in disadvantaged communities, even among couples with higher incomes (Fox and Benson 2006). Many adults who live in these communities are disconnected from the labor market and suffer from high rates of physical and mental illness; many of the children and youth are in danger of injury, neglect, and educational failure (Popkin, Acs, and Smith 2010; Popkin et al. 2000). As a result, youth in these communities must often learn to master their environments—school, family, neighborhood—as a method of surviving the chaos

around them (Rankin and Quane 2002). Sharkey's (2013) analysis highlights the costs for families and communities, showing that a subset of highly disadvantaged families have become "stuck in place" over time in these very disadvantaged places, making it increasingly difficult for each subsequent generation to improve their life circumstances.

Recent research by Chetty and his colleagues (Chetty and Hendren 2015; Chetty, Hendren, and Katz 2015) shows that moving out of deeply poor and distressed neighborhoods leads to long-term benefits for children's economic success. The younger children are when their families move, the more they benefit over time. This research supports the argument that where people live matters (Chetty et al. 2015), and it particularly matters for children's outcomes.

The Cost of CSE for Girls

Our research suggests that living in a community with a high level of CSE contributes to poor outcomes for girls. As we have discussed above, there is ample evidence that living in neighborhoods of concentrated disadvantage—racially segregated, high-poverty, and high-crime communities with low levels of collective efficacy—harms children's life chances. Children growing up in these neighborhoods experience developmental delays, suffer serious physical and mental health problems, and are at greater risk for delinquency, early sexual initiation, and teen parenthood (Popkin, Leventhal, and Weismann 2010). In addition, ethnographic research supports the idea that girls and boys experience the effects of concentrated disadvantage in very different ways, especially as they enter adolescence. Girls in most communities experience at least some verbal and physical harassment from men, but in socially isolated, extremely high-poverty communities, the pressures for sexual activity are much greater, the threats more blatant, and the risk of victimization very real (Alvi et al. 2001; Popkin et al. 2000; Raphael 2001; Renzetti and Maier 2002). Just as "concentrated poverty is without any doubt a risk factor for the concentration of homicide" (Morenoff, Sampson, and Raudenbush 2001), neighborhoods of concentrated disadvantage are a risk factor for pervasive sexual harassment and constant fear of sexual violence (Briggs, Popkin, and Goering 2010; Popkin, Leventhal, and Weisman 2010; Smith et al. 2014; Popkin et al., forthcoming).

We believe CSE may affect the healthy sexual development of children who live in neighborhoods of concentrated disadvantage, particularly girls. Healthy sexual development is the combination of physical sexual maturation known as puberty, age-appropriate sexual behaviors, and the formation of a positive sexual identity and sense of sexual well-being (McNeely and Blanchard 2009). Healthy sexual

development is bound to physical and mental health. It is the ability to understand and weigh the risks and responsibilities of sexual actions and the ability to integrate sexuality into life safely, derive pleasure from it, and maintain reproductive choice (Satcher 2001). Importantly, it also includes freedom from sexual abuse and discrimination.

The specific consequences of CSEs related to the interruption of healthy sexual development include early sexualization, sexual harassment, trading sex for things youth need, and sexual assault. These consequences have real costs for girls—they are traumatic and have serious and life-long consequences for girls' physical and mental health and overall well-being.

In her graphic portrayal of life for low-income, urban, African American girls, Miller (2008, 149) emphasizes how neighborhood environments can place girls at risk, writing that the "broader patterns of girls' neighborhood mistreatment, visible violence against women, crime and delinquent peer networks, and the prevalence of sexual harassment in schools all coalesced to create social contexts that heightened young women's risks for sexual victimization." As we also found in our research on MTO and a pilot study of Washington, DC, public housing residents, Miller notes teens often believe the girls are to blame because of the way they behave or dress, explaining that "gendered status hierarchies and the sexualization of young women meant that a number of youths looked to young women's behavior or dress in explaining their neighborhood risks" (Miller 2008, 39).

Yet low-income women often face widespread pressure for early sexual activity from male partners (Popkin, Leventhal, and Weisman 2010), and qualitative evidence suggests many girls who grow up in inner-city communities have early and continued experiences of being compelled to have sex (Dunlap, Golub, and Johnson 2004). About 30 percent of African American youths' increased likelihood of early sexual activity can be explained by demographic background, peer influences, family processes, and developmental risk factors. The remaining 70 percent of the racial difference in sexual activity timing can be accounted for by neighborhood-level concentrated poverty (Upchurch, Sucoff, and Levy-Storms 1999).

Outcomes associated with early sexualization include improper contraceptive use, unintended pregnancy, sexually transmitted infections, mental health issues, nonsexual problem behaviors, and school dropout, all of which have long-term impacts on girls' lives (Alan Guttmacher Institute 1994; Albert, Brown, and Flanigan 2003; Browning, Leventhal, and Brooks-Gunn 2004; Cooksey, Rindfuss, and Guilkey 1996; Furstenberg, Brooks-Gunn, and Morgan 1987; Kendall-Tackett, Williams, and Finkelhor 1993). Inner-city girls' early and continued experiences of being compelled to have sex, along with structural disadvantage, often create an "independent sexuality" that may involve prostitution,

teen pregnancy, young motherhood, school dropout, lack of steady employment, and drug abuse (Dunlap et al. 2004).

Some research suggests that in high-poverty communities, the nonphysical violence of sexual harassment is often tolerated because of the prevalence of violence in general (Dominguez and Menjivar 2014). Another qualitative study suggests high levels of sexual harassment might be associated with drug trafficking, specifically drug dealers hanging out in public spaces and the sexualization of women in the drug trade (Cobbina, Miller, and Brunson 2008). More generally, research shows women report greater fear of harassment in socially isolated, public housing communities with high levels of disorder (Alvi et al. 2001), as well as in public spaces that are poorly lit or marked by vandalism (Weatherburn, Matka, and Lind 1996).

Sexual harassment puts young women at risk for a range of poor outcomes, including a higher likelihood for experiencing intimate partner violence and emotional abuse, substance abuse, and delinquency (Chiodo et al. 2009). In addition, sexual harassment has negative consequences for girls' school performance (Hand and Sanchez 2000).

In communities of concentrated disadvantage a high level of CSEs may also contribute to youth being sexually exploited. We know economic insecurity is one reason women and youth provide when describing why they might trade sex for things they need (see, for example, Dank et al. 2014, 2015; Silverman et al. 2015). Although some research estimates the rate of adolescents having ever exchanged sex or drugs for money as fairly small (4 percent; Edwards, Iritani, and Hallfors 2006), nearly one-third of a sample of African American youth living in urban public housing had traded sex for money, and maternal incarceration and parental substance abuse contributed to a higher likelihood of this type of risky behavior (Nebbitt et al. 2014).

Adolescents with a history of participating in exchange sex also often engage in other high-risk behaviors and experience poor health outcomes, including depression, HIV, and other sexually transmitted infections (Edwards et al. 2006). They may experience more running away and drug abuse (Nadon, Koverola, and Schludermann 1998).

Other research suggests girls in neighborhoods of concentrated poverty and disadvantage may be at higher risk of sexual assault than other girls. Lower incomes and higher housing densities have been associated with higher rates of preteen and/or teen sexual assault (Mustaine et al. 2014). One qualitative study of at-risk African American youths living in St. Louis, MO, is suggestive that rates of sexual assault may be higher among this population. These researchers found that more than half of their small sample reported experiencing sexual assault or coercion (Cobbina et al. 2008). In contrast,

11 percent of female high school students in the United States report having been raped (Child Trends DataBank 2013). Although not an apples-to-apples comparison based on the measures used in these studies, the data suggest at-risk youth experience more sexual victimization than the general population.

Sexually victimized youth struggle with posttraumatic stress, cognitive distortions, depression, and anxiety, and they are also more likely to engage in substance abuse, suicide, self-injury, binging and purging, and risky sexual behavior (Small and Zweig 2007). Our interviews with MTO girls suggest one of the worst consequences of living in a CSE may mean that girls who experience assault do not get the support and resources they need to recover. Instead, they may be blamed, labeled a "ho," or simply told that "it's just the way it is" (Smith et al. 2014).

Next Steps for Research

Our decades of research on the lives of women and girls in distressed neighborhoods leads us to conclude that in the most disadvantaged communities, concentrated poverty, chronic violence, and social disorder lead to both low collective efficacy and the emergence of a CSE. In these communities, girls are at risk for early sexualization, exchanging sex for things they need, and experiencing sexual harassment or sexual assault, all of which contribute to poor mental and physical health outcomes.

Up to this point, this document has provided evidence that CSE exists, particularly in communities of concentrated disadvantage. We also show how a CSE can affect the lives of girls living in these communities, particular girls and young women of color. Yet there is much we still do not know about CSEs and its long-term effects.

First, we need further work that explores and documents the nature of CSEs beyond our seminal work. More specifically, is a CSE a unitary phenomenon for which the characteristics of CSEs are common across neighborhoods and contexts, or does the phenomenological experience of CSEs differ across contexts? If it is a unitary phenomenon based on a single set of characteristics, do CSEs vary in severity across neighborhoods? Or, rather, do the characteristics of CSEs vary across neighborhoods and contexts, such that there are different types of CSEs? If so, do these different types of CSE range in severity in terms of how they affect the girls and women living in such environments?

Second, the research we summarize here suggests that living in a CSE negatively affects individual well-being and leads to health- and life-compromising outcomes. Preliminary work shows CSEs are related to mental health (Smith et al. 2014; Popkin et al., forthcoming). Yet no study to date has actually

documented the specific outcomes that can be attributed to living in a CSE over time, nor has any study tried to isolate the effects of CSEs from the contribution to negative outcomes of other aspects of living in neighborhoods of concentrated disadvantage, such as low collective efficacy. So, we ask, what are the negative consequences of living in a CSE, net of the effects of other neighborhood characteristics and the personal characteristics of the people living there? We believe a host of possible negative outcomes should be explored, including psychosocial outcomes (e.g., trauma, depression, anxiety, hostility), behavioral outcomes (e.g., early sexual initiation, substance use), and physical effects (e.g., health outcomes, pregnancy).

Third, as we discuss above, we believe CSEs likely exist beyond disadvantaged urban communities. Other types of communities we believe are likely at risk are tribal communities (e.g., on Native American reservations) or places that have endured long-term conflict (e.g., Central America, parts of the Middle East). Further, it is likely that college campuses and military bases and units may show some aspects of a CSE, but these types of settings also offer high levels of social organization and collective efficacy that may function as protective mechanisms buffering the effects of the CSE.

Fourth, more research is needed on factors that protect girls who experience CSE. For example, the domain of family appears to be protective for girls when it comes to early sexualization. Father presence is an important protective factor against early sexual outcomes, even if other risk factors are present (Ellis et al. 2003). Ramirez-Valles, Zimmerman, and Juarez (2002) find the timing of sexual initiation for young black women is best predicted by age, mother's education, time spent with mother, and involvement in church activities. Parental monitoring exerts significantly greater influence on girls' timing of sexual initiation than it does on boys. Neighborhood collective efficacy can contribute to delaying the onset of sexual activity for adolescents without high levels of parental monitoring (Browning et al. 2005). Roche and Leventhal (2009) found that as neighborhood disorder increased, youths with higher levels of routine in family life and parents with more knowledge about their lives were more strongly associated with a lower probability of early sexual onset. We believe family and civic organizing efforts may be protective across the range of CSE consequences. However, we need more research on this issue, particularly around other influences that may protect girls, such as connection to school or other meaningful relationships with caring and supportive adults.

Addressing these gaps in knowledge about CSEs requires rigorous data collection efforts. To further understand the nature of CSEs across different neighborhoods of concentrated disadvantage and across different settings, a study would require data collection from women and girls in multiple neighborhoods. To further understand the consequences of CSEs and possible protective factors, we need longitudinal data. Thus, a long-term, multisite data collection effort would help us more fully

understand the risks of living within a CSE. This could be accomplished within a multi-community demonstration context, which combines programming efforts with research efforts. Including both communities with prevention and intervention programming along with comparison locations allows empirical research questions to be answered and evidence on the efficacy of programming to be built in tandem.

Taking Action

Although the field still has much to learn about the CSE mechanism and its impact on healthy youth development, some promising solutions are beginning to emerge. Because CSEs can be properly understood *only* in the context of the pervasive patterns of sexual and racial discrimination embedded in the larger culture and history of the United States, it is important to develop a "place-conscious" typology for these solutions lest we stigmatize the girls, boys, men, and women afflicted by a CSE by suggesting the solution to their plight resides only with them and their immediate families and neighbors. Place-conscious approaches recognize the importance of place and focus on the particular challenges of distressed neighborhoods, but they are less constrained by narrowly defined neighborhood boundaries, more responsive to the realities of family mobility and change, and more attuned to larger geographic and systems-level conditions and opportunities (Turner et al. 2014).

Our place-conscious typology for emerging CSE solutions is as follows:

- National campaigns aimed at policy and systems change that reduce the impact of sexual discrimination on all women and girls, particularly women and girls of color;

- Neighborhood-based interventions that directly address the ways a CSE plays out among individuals and groups; and

- Regional strategies that support families to move away from neighborhoods of concentrated disadvantage.

Drawing Policy Attention to Young Women and Girls of Color

There is already a national campaign forming to highlight issues relating to "marginalized girls" in the criminal justice system and in communities. This campaign arose in part because of the White House's My Brother's Keeper initiative, which sought to focus attention on the urgent problems facing boys and

young men of color. President Obama has clearly made these issues a priority and has established the My Brother's Keeper Alliance to ensure this work continues. But girls and young women are also suffering from the consequences of segregation, racial bias in school discipline, and a criminal justice system that punishes girls for being victims of commercial sexual exploitation instead of providing services and supports. The campaign, spearheaded by the National Crittendon Women's Foundation, seeks to bring equal policy attention to the issues facing young women and girls. The campaign is also calling for a trauma-informed approach to services for young women and girls that recognizes many of them have suffered sexual violence and abuse and provides the appropriate services to enable them to recover and become healthy adults. The White House has responded to the campaign with a report on the challenges facing young women and girls of color and establishing a working group that will focus on these issues specifically. This effort is still in its early stages and, as of this writing, it is difficult to predict whether it will gain the same level of traction as the efforts aimed at boys.

Place-Conscious Strategies

As we discussed above, the evidence shows that where people live matters, and it particularly matters for children's outcomes (Chetty et al. 2015). Although the research on MTO shows living in poverty has gender-specific effects for boys and girls, the reality is that if we truly want to improve outcomes for *all children*, we should aim to reduce their exposure to the risk of chronic disadvantage and CSEs. Our policies should focus on ensuring low-income families of color have the same ability to make choices for their families as higher-income families (Turner et al. 2014). And they should ensure families have good options to choose from—decent, affordable housing; safe neighborhoods; and good schools. Mobility programs like MTO can help families who want to move to access these kinds of neighborhoods.

But mobility programs alone will not be sufficient to address the depth of need. We also need place-based interventions that aim to improve the life chances of children living in extremely low-income, distressed communities. Large-scale community redevelopment strategies and collective impact models are both important approaches with the potential to help struggling communities. But these approaches take a long time, and there is always the risk that significant redevelopment may displace, or at minimum create new stresses for, the low-income families who live there (Turner et al. 2014). Further, these broad, long-term interventions are not intended to address the urgent risks facing the young people growing up in these communities.

Public health professionals and other experts have designed numerous "place-based" interventions designed to address sexual violence and coercion, but almost none are neighborhood based. Instead,

the "places" these typically curriculum-centered interventions target most often are educational institutions, such as schools or college campuses. These institutions are communities unto themselves, albeit within neighborhoods, thus complicating the nature of their relationship with the surrounding geography. In spite of these limitations, we have identified a handful of evidence-based interventions (i.e., models that have established statistically significant positive findings based on experimental or quasi-experimental designed studies) that might be effective for addressing CSEs because they touch on relevant themes such as healthy adolescent sexual development, the prevention of dating violence, bystander training on how to intervene safely and effectively to reduce sexual violence, and parents as potentially protective factors against sexual coercion (table 1, p. 17).

The Promoting Adolescent Sexual Health and Safety (PASS) program is a promising intervention designed to specifically address CSEs. PASS is a relatively new model that combines four curricular interventions and other program elements into a multilevel (individual, family, community) intervention. Researchers from the Urban Institute and the University of California at San Diego are collaborating with the DC Housing Authority, African American residents of Benning Terrace (a public housing community located in Ward 7 of the District), community-based h9ealth and social service organizations, and faith-based organizations to develop, implement, and evaluate programs to alter neighborhood factors that create CSE in order to reduce the high rates of sexual assault, sexually transmitted infections, HIV, and teen pregnancy among girls 9 to 18 years old living in public housing.

At the heart of the PASS intervention are four curricula: Sisters Rising, Brothers Rising, Youth Matter, and Parents Matter. Sisters Rising, a curriculum for older girls (ages 14 to 18), was designed by all partners through a National Institutes of Health– and Kellogg Foundation–funded community-based participatory research process. The curriculum draws on both research and evidence underlying programs like those discussed in table 1, as well as on community member wisdom. Brothers Rising, the older boys' curriculum, was developed in partnership with Men Can Stop Rape, a community-based organization in Washington, DC, and also findings from Coaching Boys into Men and Becoming a Man (table 1). Youth Matter and Parents Matter were developed by other organizations and selected for their capacity to reach younger children and parents. PASS is designed to work in tandem with local positive youth development and leadership efforts, as well as with family support and engagement initiatives. To reach sufficient numbers of people to affect the CSEs, PASS implements a "round" of each curriculum in sequence multiple times in a single neighborhood of concentrated disadvantage. Now that PASS has almost completed its pilot phase, partners are developing a full research agenda to refine the intervention and assess its effect on communities.

Conclusion

Many forces have combined to produce the place-based and gender-specific phenomenon of CSEs. Concurrent and multifaceted approaches are now needed to eradicate it: first, more research on the exact nature and impact of the phenomenon; second, campaigns to raise public awareness and spark better policies capable of responding to the phenomenon; and third, programs on the ground in communities of concentrated disadvantage that are conducted in close partnership with the many girls, boys, parents, and other community members who are concerned about CSEs and ready to combat it. Together, let's let girls be girls who then grow into women with the bright futures they deserve.

TABLE 1

Evidence-Based Interventions That Might Be Effective for Addressing CSE

Name	Description	Target population	Setting(s)	Frequency and duration	Other elements	Findings
Programs focused on healthy adolescent sexual development						
Girls Circle	Girls Circle was developed by the One Circle Foundation to offer structured support groups to counteract social and interpersonal forces that impede girls' growth and development by promoting an emotionally safe setting and structure.	Girls 9–18 years old	Community-based	90–120 minutes two times per week for 13 weeks	Includes topical discussion, as well as role playing, drama, dance, drawing	Statistically significant improvement for girls include increases in self-efficacy, attachment to school, positive body image, and social support (Roa, Irvine, and Cervantez 2007).
Becoming a Man (BAM)	BAM is a Chicago-based program developed by Youth Guidance that aims to reduce school dropout and violence among at-risk male students. BAM offers in-school programming and in some cases includes after-school sports in efforts to develop social–cognitive skills. The six core values of the program are integrity, accountability, self-determination, positive anger expression, visionary goal setting, and respect for womanhood.	At-risk males in grades 7–12	In-school programming, mentoring, and after-school sports	BAM operates during the school year.	Includes group therapy sessions. The return on investment was found to be about 31 times the participant costs.	The University of Chicago Crime Lab conducted a randomized control trial that demonstrated a 44 percent reduction in violent crime arrests and a 36 percent decrease in other arrests, increased GPAs, increased graduation rates by 10 to 23 percent, and a 53 percent decrease in the likelihood of a participant attending school in a juvenile justice setting (Heller et al. 2013).

TABLE 1 CONTINUED

Name	Description	Target population	Setting(s)	Frequency and duration	Other elements	Findings
Programs focused on dating violence						
Safe Dates	Safe Dates is a five-component dating abuse prevention tool for both male and female middle and high school students.	Middle school– and high school–aged males and females	School, community youth enrichment, faith-based programs, counseling/education programs, support groups	Ten 50-minute sessions	Includes games, small- and large- group discussions, writing exercises, journaling, role-playing, a poster contest, and drama	Compared with controls, adolescents receiving Safe Dates reported significantly less physical, serious physical, and sexual dating violence perpetration and victimization four years after the program. A booster did not improve the effectiveness of Safe Dates (Foshee et al. 2004).
Shifting Boundaries	Shifting Boundaries is a two-part intervention (classroom curricula and schoolwide program) designed to reduce dating violence and sexual harassment among middle school students by highlighting the consequences of this behavior for perpetrators and by increasing faculty surveillance of unsafe areas within the school.	Male and female middle school students ages 10–15	School	Classroom sessions: six sessions taught over 6 to 10 weeks; Schoolwide sessions: six sessions taught over 6 to 10 weeks	Classroom sessions include activities such as measuring personal space, identifying "hot spots" in school settings, highlighting safe and unsafe spaces, a fact-based component, and learning about state and federal laws. Schoolwide sessions include revising school protocols to identify and respond to dating violence and sexual harassment, temporary school-based restraining orders, and posters to increase awareness.	The building-only and the combined interventions were effective in reducing sexual violence victimization involving either peers or dating partners at six months post-intervention. This reduction was mirrored by reductions in sexual violence perpetration by peers in the building-only intervention (Taylor et al. 2013).

TABLE 1 CONTINUED

Name	Description	Target population	Setting(s)	Frequency and duration	Other elements	Findings
My Voice, My Choice (MVMC)	MVMC is a 90-minute assertive resistance training program that emphasizes skill practice in an immersive virtual environment. The virtual reality portion of MCMV was developed by clinical psychologists in the Southern Methodist University Psychology Department in conjunction with SMU's Guildhall video gaming program.	Female adolescents	Any setting	90-minute program	A facilitator explains and models assertive resistance (e.g., using a firm voice tone when coerced into sex). Participants then implement these techniques in a virtual reality setting, with feedback.	Participants assigned to MVMC were less likely than control participants to report sexual victimization during the follow-up period. Results also suggest MVMC reduced risk for psychological victimization and for psychological distress among participants with greater prior victimization at baseline (Rowe, Jouriles, and McDonald 2015).
Coaching Boys into Men (CBIM)	CBIM was developed by Futures Without Violence to facilitate high school athletic coaches' promotion of respectful behavior among their players and help prevent relationship abuse, harassment, and sexual assault.	Young men participating in high school athletics	High school athletic teams	Recommended 15-minute weekly trainings for 12 weeks	Coach-led discussions, national advertising campaign	After three months, participants were significantly more likely to intervene when witnessing abusive or disrespectful behaviors among their peers than those not in the program. After one year, they were more likely to report less abuse perpetration and less negative bystander behavior (Miller et al. 2012).

TABLE 1 CONTINUED

Name	Description	Target population	Setting(s)	Frequency and duration	Other elements	Findings
Dating Matters	Dating Matters was developed as a public health approach to address and prevent teen dating violence. Dating Matters® has both parent- and youth-focused programs containing curricula for students in grades 6–8 and their parents. These curricula address healthy relationships and social-emotional learning.	11- to 14-year-old boys in high-risk urban communities and parents	School based	Six to 10 sessions based on grade		Dating Matters is currently undergoing rigorous evaluation in several cities (Tharp 2012).

Programs focused on bystander intervention[a]

Name	Description	Target population	Setting(s)	Frequency and duration	Other elements	Findings
Bringing in the Bystander	Bringing in the Bystander was developed by the University of New Hampshire to address the role of community norms as a significant cause of sexual violence.	General public	College campuses	One or three 90-minute sessions	Presentation of content, active learning exercises, creation of bystander plans and signing of pledges	This program significantly improved knowledge of sexual violence; reduced acceptance of rape myths; and made positive differences in the likelihood of intervening, confidence, and behavior (Moynihan et al. 2011).
Green Dot	Developed by researchers at the University of Kentucky, Green Dot uses social change theory to make violence less sustainable within any given community.	General public	Schools, workplaces	Varies between six hours and a weekend retreat	Videos, roleplaying	A 50 percent reduction in sexual violence perpetration by students at schools with the Green Dot program is reported (Hautala 2014).

TABLE 1 CONTINUED

Name	Description	Target population	Setting(s)	Frequency and duration	Other elements	Findings
Programs focused on Parents as Protective Factors						
Parents Matter!	Parents Matter! was developed by the Centers for Disease Control and Prevention to give parents and guardians of youth the knowledge, skills, comfort, and confidence to communicate with their children about sexuality and sexual risk reduction.	Parents and caregivers of preteens 9–12 years old	Community based	Weekly sessions that run for 2.5–3 hours over the course of five weeks	Participatory methods such as group discussions, role plays, and home assignments to enhance positive parenting skills	Statistically significant improvements were noted in parents' report of parent–child communication about sexuality education and sexual risk reduction after the program and six months later. Both parent and child reports indicated parents were more skilled, comfortable, and confident during discussions with their children (Miller et al. 2011).

[a] Also see Coaching Boys Into Men in the "Programs Focused on Dating Violence" section.

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