

violence (e.g., early antisocial or aggressive behavior, poor parent-child relations and parenting practices) few studies have examined how these factors are influenced by sociocultural and community factors (See Attachment 1 Reference 5 as published on the CDC Web site).

The purpose of this program is to empirically demonstrate the predictive utility of potentially modifiable sociocultural and community characteristics to predict child maltreatment and early risk factors for youth violence. Previous research has described the importance of larger community and sociocultural factors such as access to social capital, community social organization, economic and family resources, residential instability, and community and family violence (See Attachment 1 References 6–8 under VIII. Other Information). However, limited information exists about the mechanisms through which these and other potentially modifiable risk and protective factors might have an impact on child maltreatment and the factors that place children on a developmental trajectory toward violence during later childhood, adolescence, and young adulthood. Modifiable factors include those that can be changed directly as well as those whose path to violence can be altered to reduce risk. By improving our understanding of how potentially modifiable community and sociocultural factors are associated with child maltreatment and early risk factors for youth violence the results from this research will inform the development of violence prevention strategies.

Protocols may include data from a variety of sources such as existing or new self-report data, observational data, or archival data. The proposed design and analysis plan should include an assessment of multiple levels of influence (e.g., peer, family, neighborhood, school, and/or community; cf., Coulton *et al.*, 1999; Sampson *et al.*, 2002) with emphasis on the effects of the broader community and sociocultural contexts on these levels of influence.

Protocols should be designed to assess (1) the potentially modifiable sociocultural and community factors that are hypothesized to influence risk for child maltreatment and early risk factors for youth violence; (2) multiple indicators of child maltreatment (e.g., neglect, physical, and/or sexual abuse) and early risk factors for youth violence (e.g., early antisocial or aggressive behavior, poor parent-child relations); and (3) potential mechanisms through which larger community and

sociocultural factors may influence risk at the individual and family levels.

In addition to the measurable outcomes with respect to performance goal, measurable outcomes of the program will be in alignment with the following research agenda items for the National Center for Injury Prevention and Control (NCIPC):

A. Identify modifiable sociocultural and community factors that influence youth violence.

B. Examine the development of child maltreatment perpetration (at the community level) to identify at-risk populations, modifiable risk and protective factors, and optimal times and settings for intervention. (See Attachment 1 Reference 9 as published on the CDC Web site.)

Activities: Awardee activities for this program are as follows:

a. Develop and finalize the research design and methodology, data collection measures and analyses, and disseminate the study results through publications and presentations.

b. Develop a research protocol for Institutional Review Board (IRB) review by all cooperating institutions participating in the research project.

c. Obtain approval of the study protocol by the recipient's local IRB.

d. Form and maintain a community advisory committee to provide guidance on the development of research protocol and the interpretation and dissemination of the study results. Members should include representatives and practitioners from agencies and organizations that engage in related research or service provision, and representatives of the communities targeted in the research.

e. Finalize and implement a research protocol focusing on identifying modifiable sociocultural and community-level characteristics that are hypothesized to predict child maltreatment and early risk factors for youth violence.

f. Finalize, pilot test, revise, and implement data collection instruments.

g. Analyze data and interpret findings focusing on sociocultural and community characteristics that predict child maltreatment and early risk factors for youth violence.

h. Conduct one reverse site visit to meet with CDC staff in Atlanta on an annual basis.

i. Complete all required reports as specified under "Reporting Requirements".

In a cooperative agreement, CDC staff is substantially involved in the program activities, above and beyond routine grant monitoring.

CDC Activities for this program are as follows:

a. Provide scientific and programmatic consultation. CDC will collaborate with project staff on research design and methodology, and analysis and dissemination of the study results in publications and presentations.

b. Assist in the development of a research protocol for IRB review by all cooperating institutions participating in the research project. The CDC IRB will review and approve the protocol initially and on at least an annual basis until the research project is finished.

c. Provide technical assistance on the selection and evaluation of the data collection instruments.

d. Facilitate an annual meeting between awardee and CDC to coordinate planned efforts and review progress.

II. Award Information

Type of Award: Cooperative Agreement. CDC involvement in this program is listed in the Activities Section above.

Fiscal Year Funds: 2004.

Approximate Total Funding: \$500,000.

Approximate Number of Awards: One.

Approximate Average Award: \$500,000.

Floor of Award Range: None.

Ceiling of Award Range: \$500,000.

Anticipated Award Date: August 2, 2004.

Budget Period Length: 12 months.

Project Period Length: Four years.

Throughout the project period, CDC's commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal Government.

III. Eligibility Information

1. *Eligible applicants:* Applications may be submitted by public and nonprofit private and for profit organizations and by governments and their agencies, such as:

- Public nonprofit organizations.
- Private nonprofit organizations.
- For profit organizations.
- Small, minority, women-owned businesses.
- Universities.
- Colleges.
- Research institutions.
- Hospitals.
- Community-based organizations.
- Faith-based organizations.
- Federally recognized Indian tribal governments.