



Youth, Violence and the Emergency Department: What do we know?



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Jo King NZRGON, MN.

Youth Violence

- Youth - period of transition from childhood to adulthood (12-25 years)
- Interpersonal violence - “the intentional use of physical force or power, threatened or actual, against another person that has a high likelihood of resulting in injury, death or psychological harm”. (CDC,2011)





Caputo et al. (2012). Violent and fatal youth trauma: Is there a missed opportunity? *Western Journal of Emergency Medicine*, 13(2), 146-150.



Dowd et al. (1996). Hospitalizations for injury in New Zealand: Prior injury as a risk factor for assaultive injury. *American Journal of Public Health*, 86, 929-934.

What do we know?

- Mortality and morbidity
- ED main contact for youth
- Fatal vs non-fatal youth violence
- Perpetrator vs victim



What do we know?

- Associated problems- failing at school, substance abuse, mental health, sexual risk taking, unemployment, crime, incarceration
- The ED expertise in violence
- The ED as a missed opportunity to prevent violence recidivism



“ treat them and street them ”
mentality.



Retrospective chart review

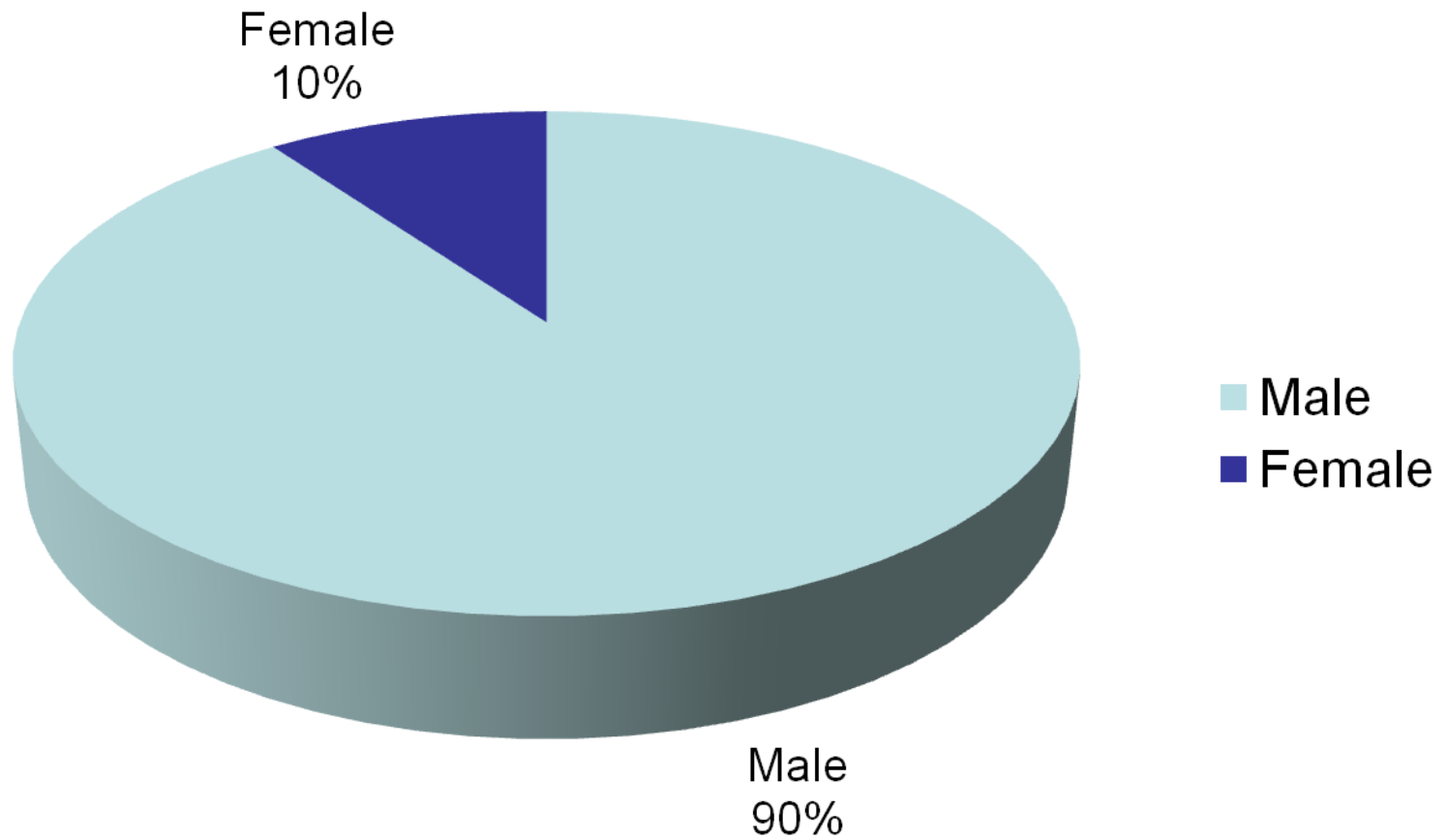
- To conduct a retrospective chart review of youth who have presented to the emergency department as a result of interpersonal violence.
- The intent of the review is to describe the incidence, demographics, injury profile, associated features and prior presentation history of violence.
- Population - youth aged 12 - 25. (n = 50)
- Study period - 01.01.13 – 30.06.13
- Exclusions – sexual and family violence.



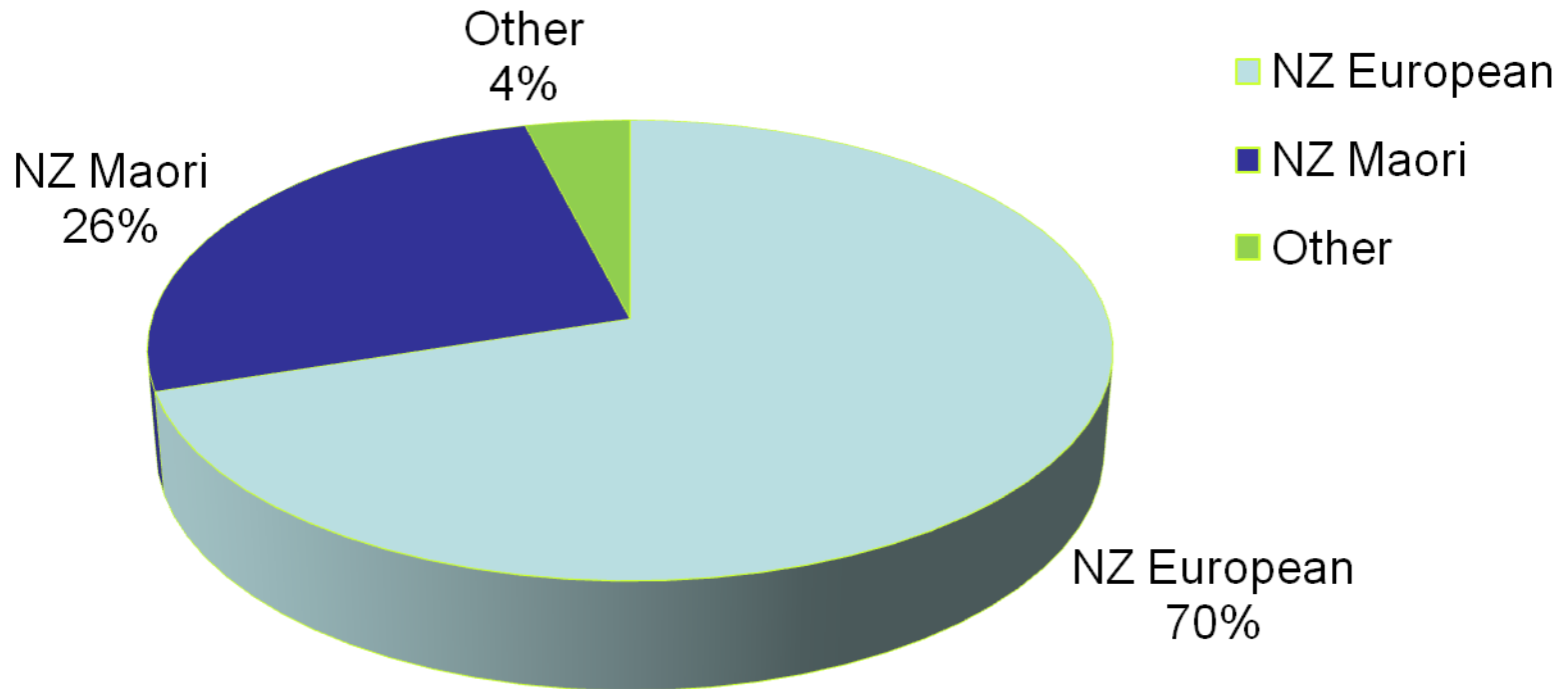


Results

Presentations by gender (n=50)

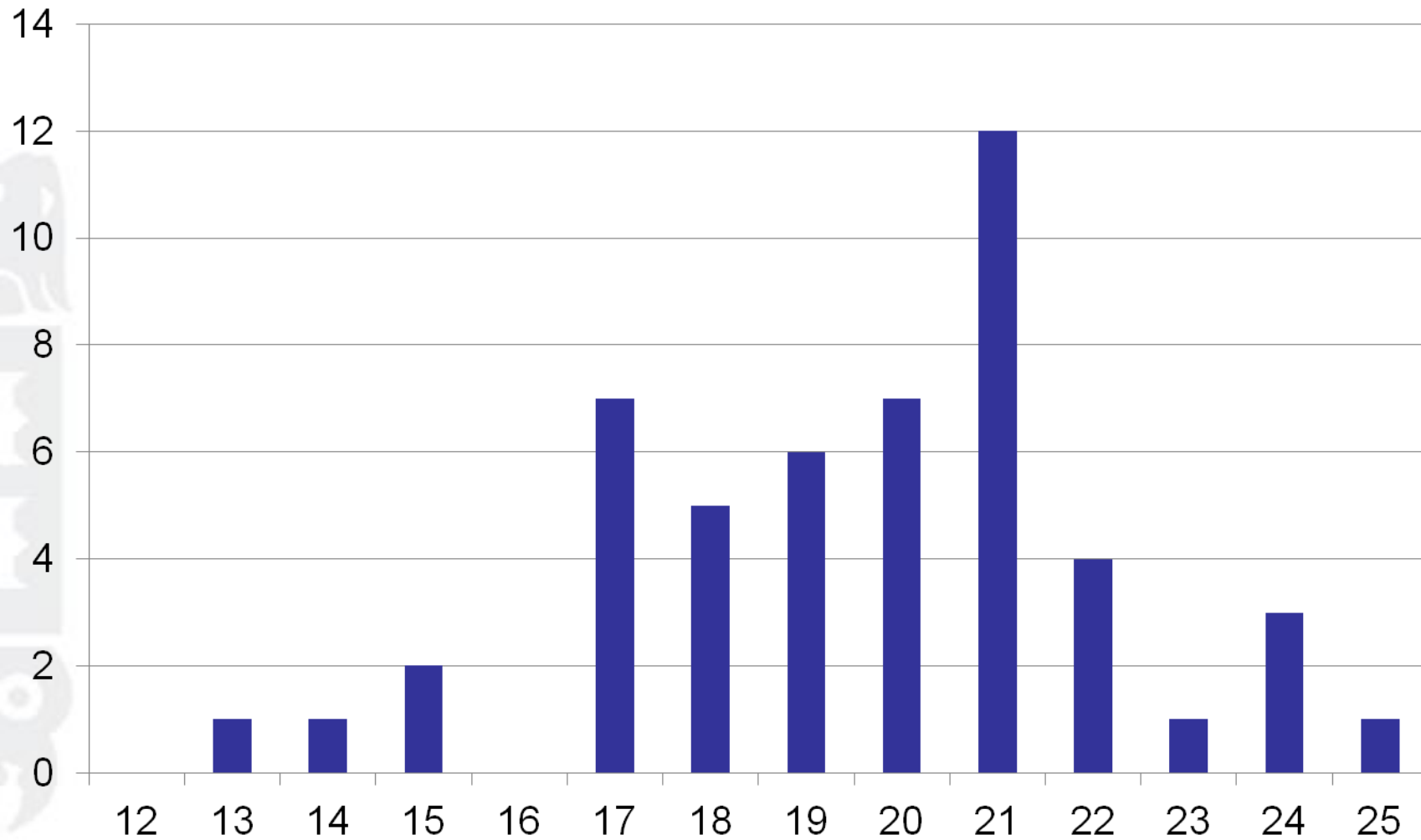


Presentations by ethnicity (n=50)



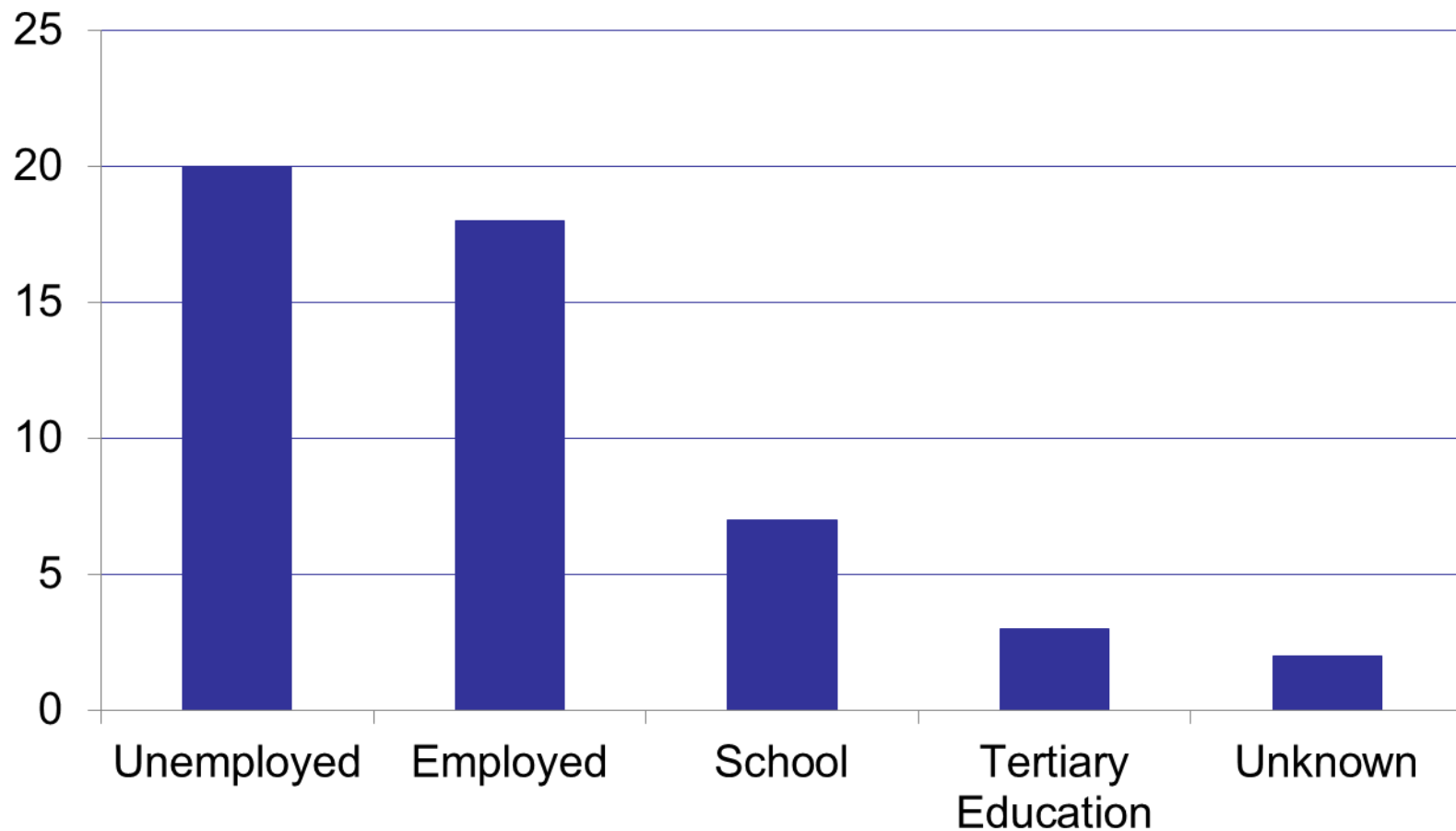
Presentations by age

(n=50)



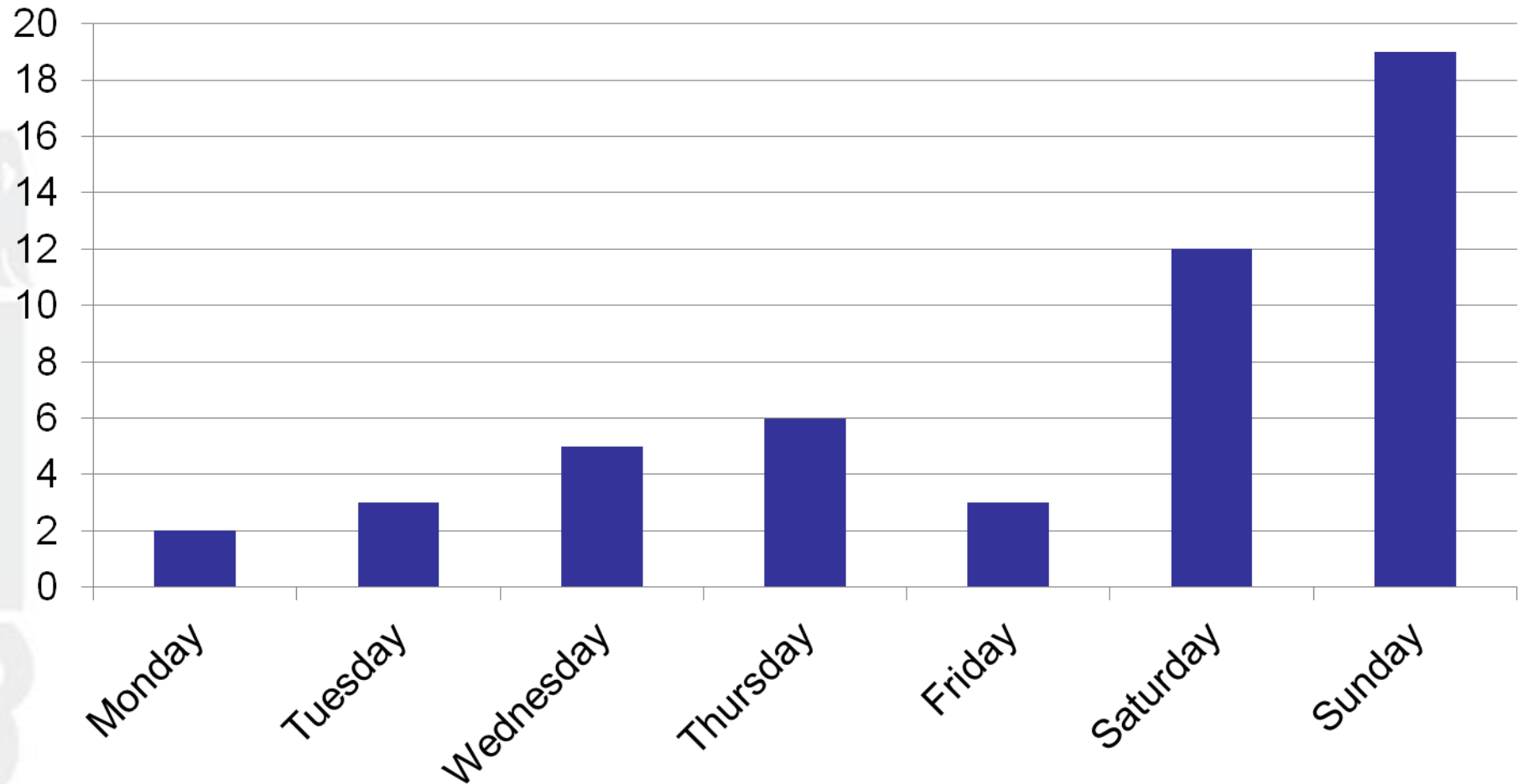
Presentations by occupation

(n=50)

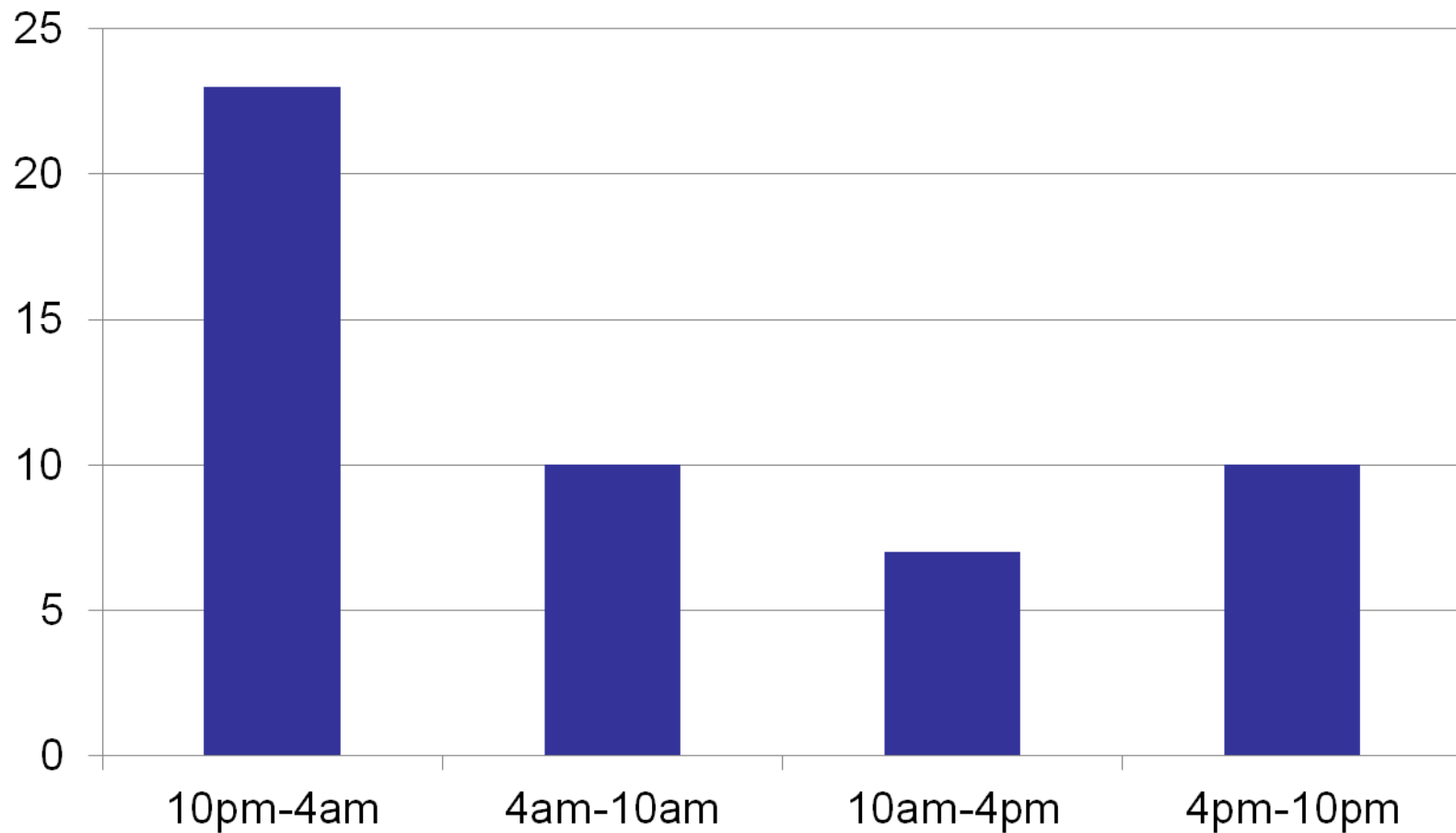


Presentations by day of week

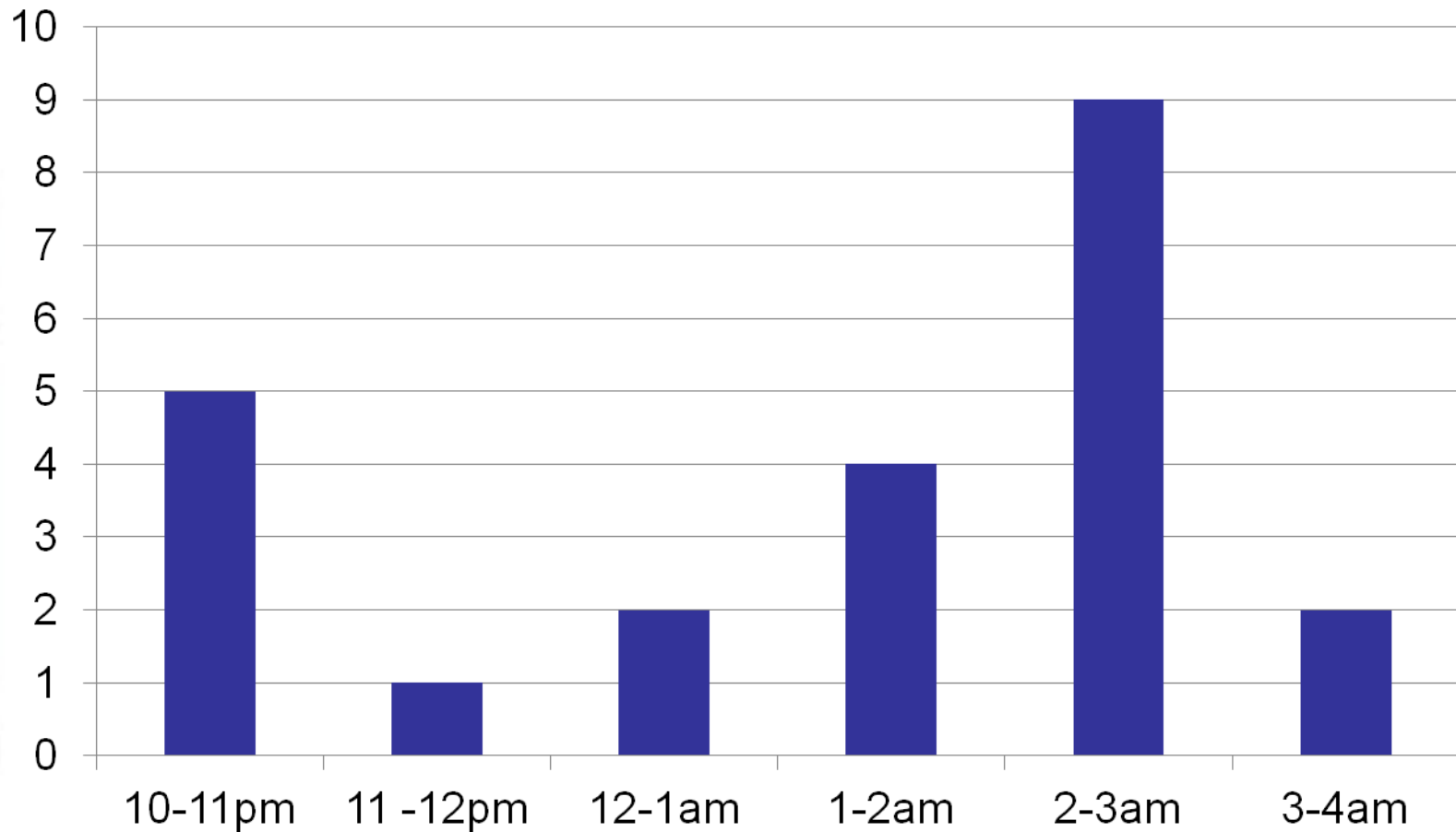
(n=50)



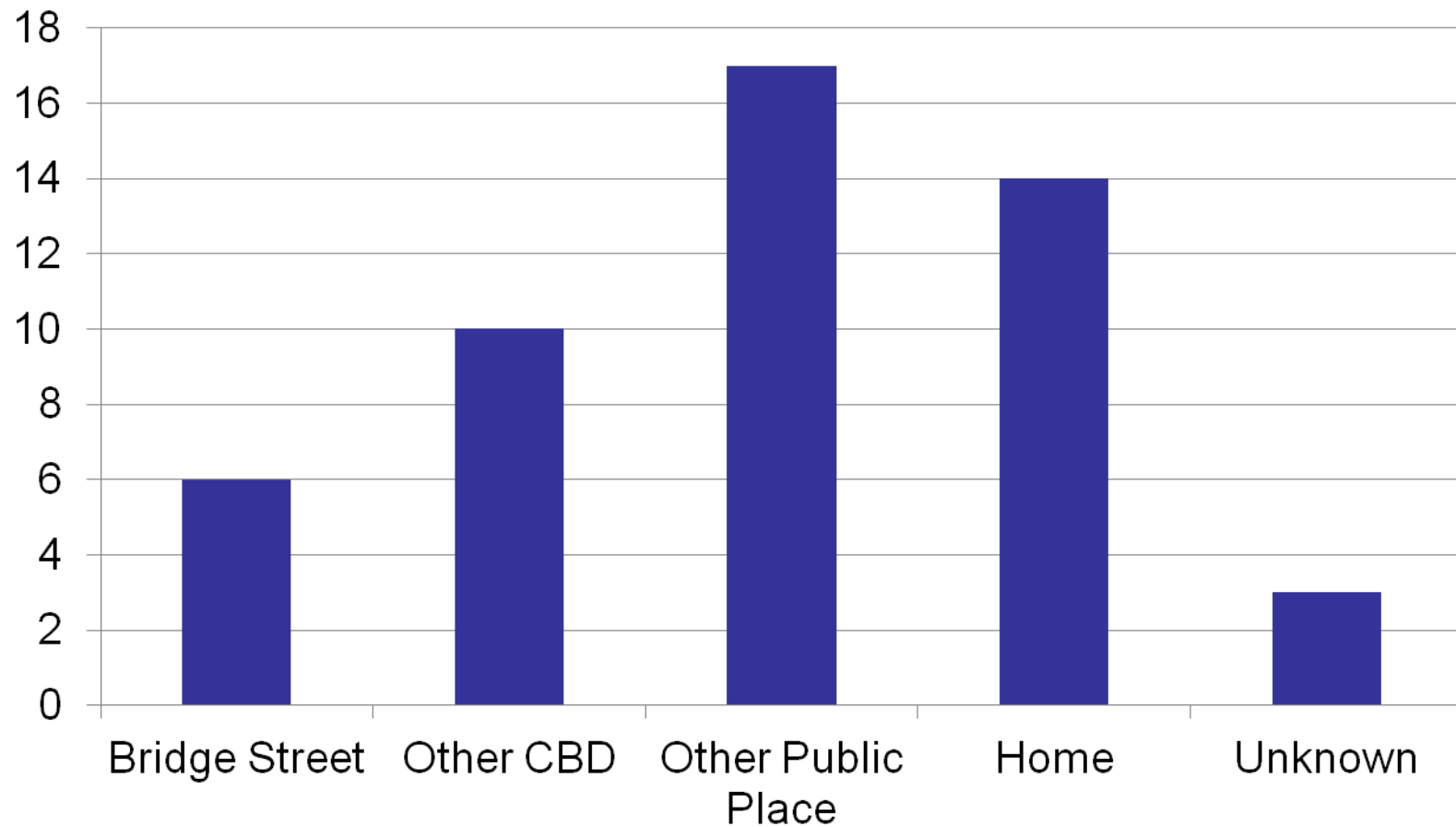
Presentations by time of day (n=50)

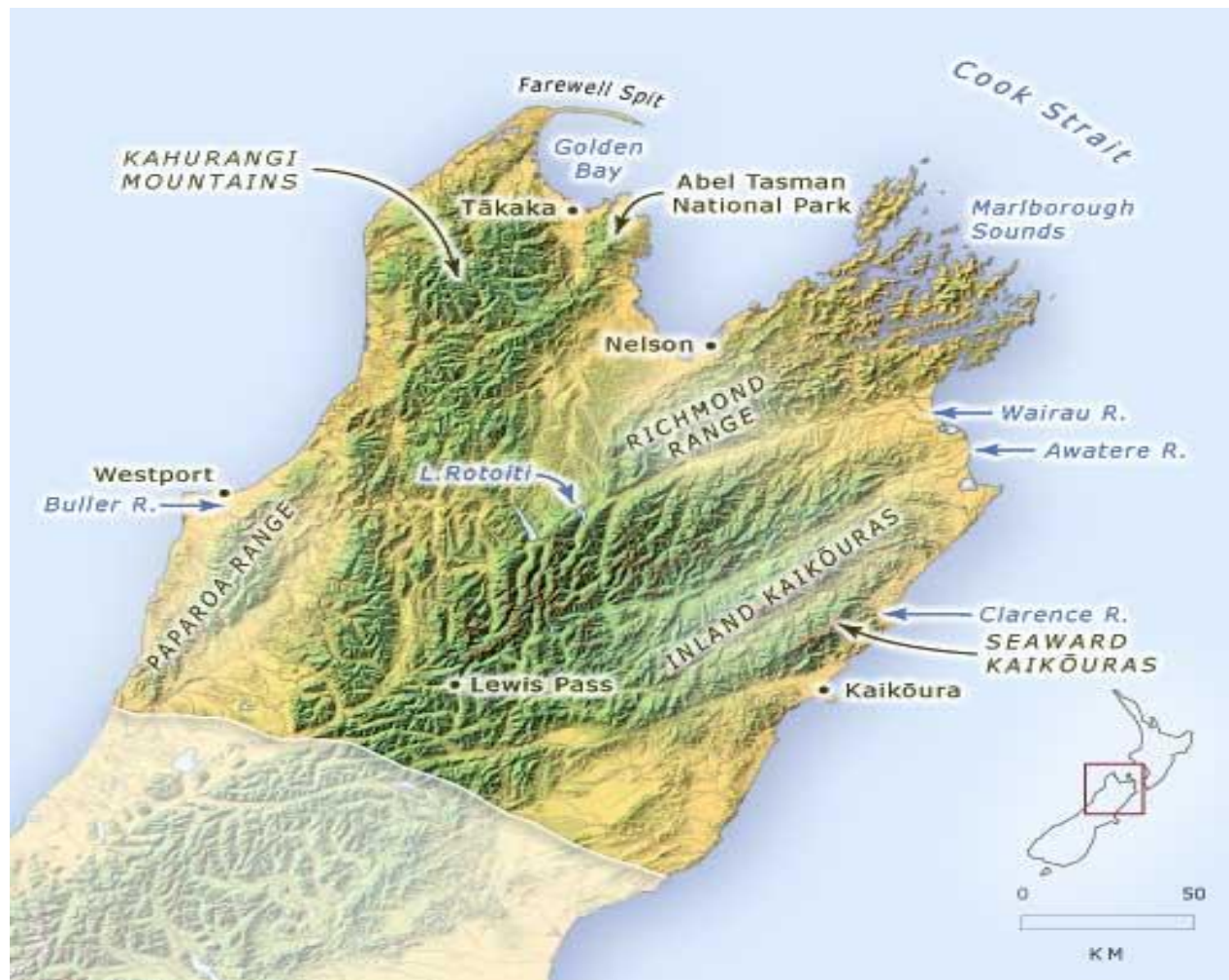


Presentations 10 pm – 4am



Presentations by location of injury (n=50)

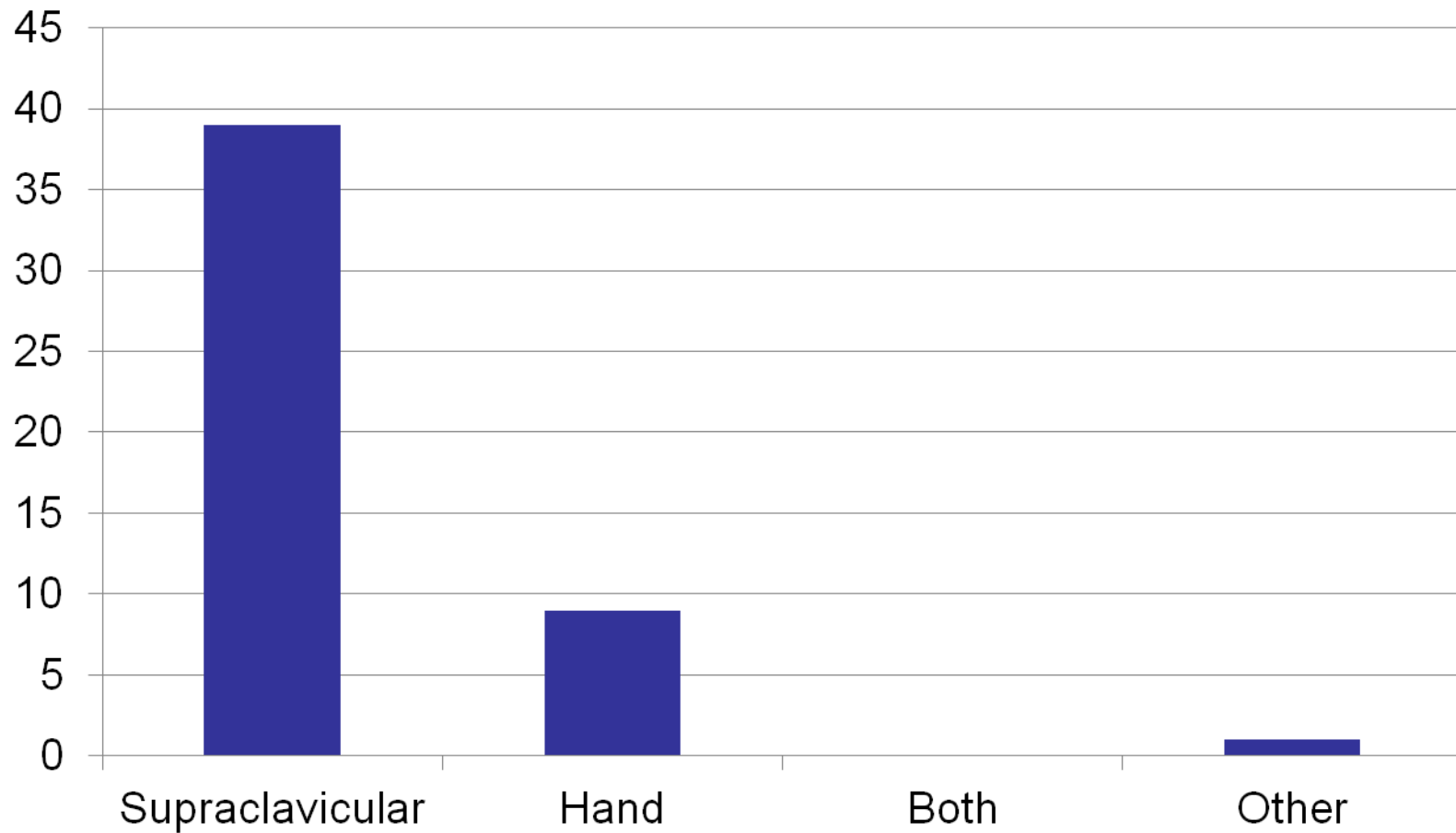




Bridge Street



Presentations by injury (n=50)



Associated features

	Yes	No	Unknown
Drugs	2		48
Alcohol	39	7	4
Smoker	18	18	14
Weapon use	4	46	0

Previous Presentation History

- 44% (n=22) of youth had previously presented to the emergency department with an injury allegedly caused by interpersonal violence or a violent act.
- Of these, 60% (n=12) had presented with a Boxer's fracture.
- 4 youth had 2 or more previous presentations with Boxer's fractures.

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OTHER



Prior Boxer's

- 25% stated injury was caused in fight.
- 75% stated injury was caused by punching an object



Where to now?

- Translate evidence to practice
- Inform debate
- Data sharing
- Clinical skills – HEADSS

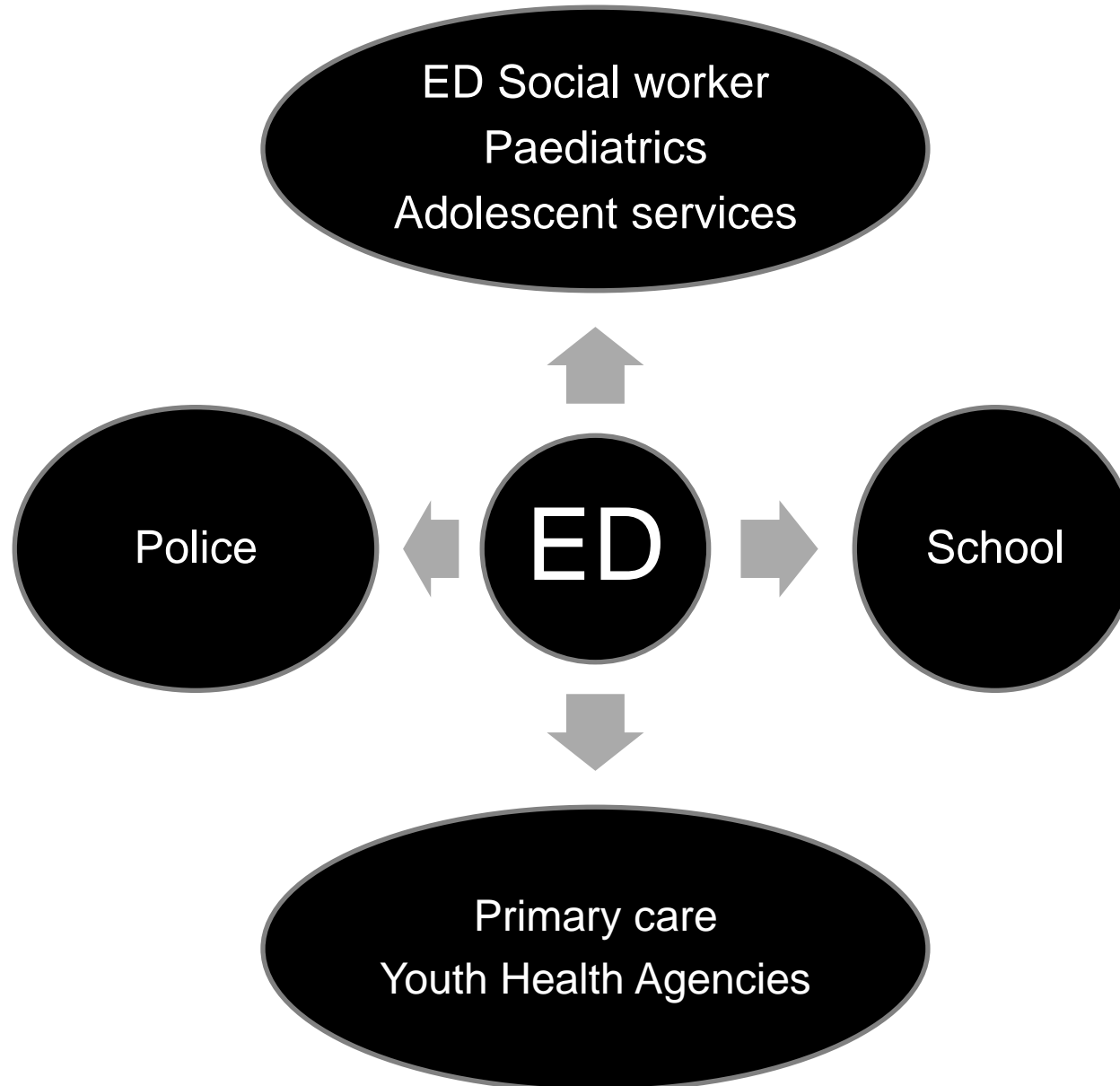


Change practice, change acceptance, recognise risk -



Boxer's fracture – a risk factor for violence recidivism ?

Collaborative Practice



Where we are at.

- Follow-up and referral.
- Actively pursuing funding streams with partners.
- Dedicated 'youth violence prevention worker' liaising with ED ????





Is the emergency department a missed opportunity to contribute to the prevention of youth violence?

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