Massachusetts Medical Society Seminar Series

Recognizing & Preventing Youth Violence

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Objectives

• Provide basic facts about youth violence
• Describe risk factors and appropriate assessments
• Suggest clinical approaches to prevention and intervention
• Introduce the Medical Society’s *Violence Prevention for Children and Youth Parent Education Tip Cards*
Acknowledgements

• Harvard Youth Violence Prevention Center
• The Floating Hospital for Children
• Massachusetts Medical Society
Today’s Topics

• Epidemiology of Violence
• Primary Prevention
• Violence History
• Prevention of Re-injury
• Special Populations

Recognizing & Preventing Youth Violence
Recognizing & Preventing Youth Violence

- Epidemiology of Violence
  - Statistics
- Primary Prevention
- Violence History
- Prevention of Re-injury
- Special Populations
Some Sobering Teen Facts

• On average, 15 Americans between the ages of 15 and 24 were murdered each day in 2001.¹

• Teens have the highest rate of violent crime victimization of all age groups.²
Firearms

• The third leading cause of death among Americans 10 to 14 years old
• The second leading cause of death among those 15 to 24 years old\(^1\)
Results From the 2003 National Youth Risk Behavior Survey

- 33% in a physical fight at least once in the past year
- 9% experienced dating violence in the past year
- 17% carried a weapon, and 6% carried a gun at least once in the past month
- 5% skipped school at least once in the past month because they didn’t feel safe.
- Rates declined in late 1990s
Crucial Role of Health Care Professionals

- Smoker in Household
- Community violence
- Supportive partner


Recognizing & Preventing Youth Violence
Recognizing & Preventing Youth Violence

- Epidemiology of Violence:  
  - Risk & Resilience
- Primary Prevention
- Violence History
- Prevention of Re-injury
- Special Populations
Recognizing & Preventing Youth Violence

Risk & Resilience

Risk
- Individual factors
- Home and family exposures
- Community risks

Resilience
- Internal controls
- Family cohesiveness
- Social connection

Recognizing & Preventing Youth Violence
Risk & Resilience: Individual

**Risk**
- Previous aggressive/violent behavior
- Previous victimization
- Genetic factors (e.g., temperament)
- Use of drugs and/or alcohol

**Resilience**
- Social competence
- Problem-solving skills
- Autonomy
- Sense of purpose/future
Risk & Resilience: *Home*

**Risk**
- Child witness to violence:
  - domestic violence
  - media
- Firearms in the home
- Ineffective parenting
- Poverty

**Resilience**
- Extended support system:
  - family
  - community
- Parental role-modeling
- Presence of routines

*Recognizing & Preventing Youth Violence*
Witnesses & Victims

• Children who are witnesses and victims of violence are:
  – More likely to be abused themselves
  – At a significantly higher risk for developmental and mental health problems
  – More likely to become aggressive and violent
TIP CARD

When Children Witness Violence

• Children see, hear, and remember more than adults think they do.

• When children witness violence at home, they are often profoundly affected by it.
Risk & Resilience: *Community*

### Risk
- Poverty
- Exposure to community violence
- Criminal activity:
  - gangs
  - drugs

### Resilience
- Social connections:
  - church
  - athletics
  - other activities
- School attachment
- Adult role-modeling/mentoring

*Recognizing & Preventing Youth Violence*
Role of the Health Care System

Health Care Systems

- Medical and surgical treatment
- Acute management/crisis intervention
- Primary prevention core messages
- Identification of at-risk youth

Community-Based Organizations

- Ongoing programs for primary prevention
- Cultural competence
- Community organizing
- Services for at-risk youth
Some Myths & Facts About Violence & Tips on How You Can Help

- Common misconceptions and myths about violence are refuted with the facts.
- Identifies factors that place youth at risk for involvement in violence.
- Provides specific tips for counseling.
Recognizing & Preventing Youth Violence

- Epidemiology of Violence

- Primary Prevention
  - Infants & Preschool Children
  - School-Age Youth
  - Adolescents
  - Preventing Sexual Abuse

- Violence History

- Prevention of Re-injury

- Special Populations
Recognizing & Preventing Youth Violence

- Epidemiology of Violence
- Primary Prevention
  - Infants & Preschool Children
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Developmental Progression of Anti-Social Behavior

Early Childhood
- Poor parental discipline & monitoring
- Child conduct problems

Middle Childhood
- Rejection by normal peers

Late Childhood & Adolescence
- Commitment to deviant peer group
- Delinquency

Academic failure


Recognizing & Preventing Youth Violence
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Risk Factors

• Ineffective parenting styles
• Child abuse
• Corporal punishment
• Impulsive temperaments
• Hyperactivity
Clinical Approaches

- Screen for family violence and substance abuse
- Discuss discipline strategies
- Child-centered play
- Ask about handguns in the home
- Parental role modeling
- Reduce TV viewing
- Provide appropriate referrals: parenting programs, early intervention programs or mental health professionals

Recognizing & Preventing Youth Violence
TIP CARD

Raise Your Child with Praise

• The straightforward language and examples show parents how to use positive words and actions to teach young children what behaviors are expected.

• Helps parents to use praise in setting clear rules and to teach appropriate behaviors in positive ways.
TIP CARD
Time-Out!

- Explains what a time-out is and why it is used.
- Prescribes time limits by age.
- Emphasizes a behavioral, rather than a physically punitive, approach.
Recognizing & Preventing Youth Violence

- Epidemiology of Violence
- Primary Prevention
  - School-Age Youth
- Violence History
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TIP CARD
Bullying – It’s Not O.K.

• Provides general facts about bullying and tips on how to approach the issue with:
  – Victim
  – Bully
  – Bystander

• Encourages the involvement of school administrators in bullying prevention.
Clinical Approaches: *Child*

- Understand child’s need to assume greater responsibilities.
- Teach importance of anger management and conflict resolution skills.
- Encourage children to engage in after-school activities: sports, music, theater, and recreational and community projects.
Clinical Approaches: *Parent*

- Ask parents about their own childhood experiences with violence
- Help parents understand the importance of family rules and consequences
- Encourage consistent discipline
- Remind parents that they are role models
- Suggest that parents to spend 1-on-1 time with child
How is Violence Portrayed?

- Socially Acceptable
- Common
- Without Consequence
Media Violence

• Maximum of 2 hours/day total screen time (AAP recommendation)\textsuperscript{11}

• Encourage parents to use age-appropriate alternatives:
  – after-school activities
  – playing sports and/or a musical instrument
  – listening to music
  – writing in a diary
  – mentoring programs
TIP CARD

Pulling the Plug on TV Violence

- Discusses how violence seen on television affects children.
- Enables parents to make personal decisions for their families about viewing TV violence.

Recognizing & Preventing Youth Violence
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- Epidemiology of Violence
- Primary Prevention
  - Adolescents
- Violence History
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Violent Adolescents Are:

- Often both victim and perpetrator
- Committed to a peer group with similar risk-taking behaviors
- Most likely to get hurt in fights, abuse drugs, be sexually precocious, and drop out of school
- Typically protected from multiple risk factors when they are enrolled in a youth development program

Recognizing & Preventing Youth Violence
Violence-Related Risk Factors\textsuperscript{14, 15}

- Violence at home
- Previous history of violence-related injury
- Drug use
- Poor performance at school
- Truancy
- Weapon carrying
Building Resilient Teens: Suggestions for Parents

• Supervise and monitor teens.
• Maintain involvement while fostering independence.
• Know where their child is at all times and find out if there is adult supervision.
• Get to know the parents of their child’s friends.
• Discuss difficult topics such as drug use and sex.
Recognizing & Preventing Youth Violence

- Epidemiology of Violence
- **Primary Prevention**
  - Preventing Sexual Abuse
- Violence History
- Prevention of Re-injury
- Special Populations
Sexual Abuse

- Sexual abuse takes many forms.
- 88,000 cases of child sexual abuse in the U.S. in 2001.\textsuperscript{16}
- No child is immune to sexual abuse.\textsuperscript{17}
- It rarely occurs in isolation.\textsuperscript{18}
Clinical Approaches: Preventing Sexual Abuse

- Include information about sexual abuse in well-child visits
  - During sex/personal safety education
  - During physical exam
- Encourage open communication between parents and children
- Educate parents
TIP CARD

Protecting Your Child from Sexual Abuse

Rules that even young children can be taught:

• No secrets.
• All body parts have names.
• Adults should not touch certain parts of your body.
• Adults don’t need help with their bodies.
Recognizing & Preventing Youth Violence

- Epidemiology of Violence
- Primary Prevention
- Violence History
  - Obtaining a Violence History
- Prevention of Re-injury
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Recognizing & Preventing Youth Violence

F I S T S

• Fighting
• Injuries
• Sex
• Threats
• Self-Defense

Recognizing & Preventing Youth Violence
FISTS: Fighting

- How many fights have you been in during the past year?\textsuperscript{19}
- When was your last fight?
FISTS: Injury

- Have you ever been injured in a fight?
- Have you ever injured someone else in a fight?
FISTS: Sex

- Has your partner ever hit you?
- Have you ever hit (hurt) your partner?
- Have you ever been forced to have sex against your will?
- Do you think that couples can stay in love when one partner makes the other one afraid?
FISTS: Threats

- Has someone carrying a weapon ever threatened you?
- What happened?
- Has anything changed since then to make you feel safer?
FISTS: Self-Defense

• What do you do if someone tries to pick a fight with you?
• Have you ever carried a weapon in self-defense?
Recognizing & Preventing Youth Violence

• Epidemiology of Violence
• Primary Prevention
• Violence History
  – Low-, Moderate-, & High-Risk Youth
• Prevention of Re-injury
• Special Populations
Low-Risk Youth

• Has not been in a fight in the past year
• Does not report use of drugs
• Is passing courses in school
• Does not carry a weapon
Low-Risk Youth: *Intervention & Prevention Ideas*

- Validate low-risk behavior.
- Ask how the teen resolves conflicts while successfully avoiding fights.
Moderate-Risk Youth

• Talk about recent fights.
• Talk about struggles with school work.
• Report other behavior that the healthcare professional identifies as risky.
Moderate-Risk Youth: *Intervention & Prevention Ideas*

- Consider a referral.
- Discuss the most recent fight and suggest strategies that will de-escalate future situations.
- Discuss anger management strategies.
- Offer information about community resources.
- With the teen’s consent, consider discussing intervention ideas with parents.
High-Risk Youth

- More than four physical fights in a year
- Failing or dropping out of school
- Carries a weapon
- Illicitly uses drugs
High-Risk Youth: 
*Intervention & Prevention Ideas*

- Circumstances may require intervention that is beyond the scope of primary care.
- Referrals to the appropriate mental health or social service resources may be required.
- Talk with the family and the youth about recent fights and discuss ways to avoid future confrontations.
Recognizing & Preventing Youth Violence

- Epidemiology of Violence
- Primary Prevention
- Violence History
  - Guns
- Prevention of Re-injury
- Special Populations
Guns in the Home

- Increase the risk of unintentional shootings, homicide, and suicide $^{20, 21, 22}$
- 35% of U.S. homes have at least one gun $^{23}$
- Many are accessible to children $^{24}$
- Many parents have *unrealistic beliefs* about guns and children $^{25, 26}$

Recognizing & Preventing Youth Violence
Clinical Approaches: Guns

- Discuss risks of keeping a gun in the home.
- Emphasize proper gun storage.
- Encourage parents to make sure that the homes where their children visit are safe.
TIP CARD
Protecting Your Child From Gun Injury

• “My brothers both admitted…[they] would actually find the clip.”

• Guns need to be inaccessible to children – teaching does not work.

• Asking Saves Kids
  Encourage parents to ASK

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- Epidemiology of Violence
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  - Dating Violence
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Recognizing & Preventing Youth Violence
Girls who report dating violence are more likely to: 27, 28

- Attempt suicide
- Engage in risky sexual behaviors
- Report substance abuse
- Become pregnant
- Experience forced sex
- Ride in a car with a drunk driver
Perpetrators of dating violence are more likely to:

- Demonstrate risky sexual behaviors (including those with same-gender partners)
- Engage in forced sex
- Threaten with physical violence
TIP CARD
Teen Dating Violence

Describes common myths about
– dating violence
– warning signs of becoming either a victim or a violent partner
– how parents can communicate with their teen about this
– reasons why teen dating violence is often difficult to detect.

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Implementing Prevention Ideas: Everyone is Involved!

- Educate your administrative staff.
- Have educational materials available.
- Develop and use lists of referrals.
Recognizing & Preventing Youth Violence

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Recognizing & Preventing Youth Violence
This is the time to gather information regarding other risk factors

- Previous weapon use
- Alcohol and drug abuse
- Mental health history
- Ongoing family violence
- Life at school
- Criminal history
Find out if the conflict is settled

• Do you feel safe leaving the hospital?
• Is there a safe place to go while things cool off?
• What plans do you have? Are you thinking about revenge?
• Is there an adult who can help mediate the fight? Is there a peer mediation program in your school or community?
Clinical Approaches

• Prior to discharge, connect children and teenagers with appropriate services:
  – Long-term counseling
  – Community outreach programs

• A history of abuse or neglect requires notification of the appropriate Social Services Department.

• To protect a third party, legal counsel should always be consulted before the police are contacted.
TIP CARD
Street Violence: Your Child Has Been Hurt — What You Can Do

- For parents of children who required medical attention after being injured in a fight, robbery, or assault
- Guides parents in what they can say and do for their injured child
- Helps parents use an injury as an opportunity to prevent future, and possibly more serious, injuries
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Special Populations

• Gay, lesbian, bisexual, transgender (GLBT) youth\textsuperscript{29}
• Pregnant teens\textsuperscript{30}
• Juveniles in the justice system
• Acutely violent patients
Recognizing & Preventing Youth Violence
If you would like more information about the Massachusetts Medical Society’s Violence Education Materials, please call: (800) 323-2303 x7373 or e-mail dph@massmed.org