

Young females are victims of violent injury

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A new study from Rhode Island Hospital shows that a large proportion of victims of community violence treated in its emergency department are female. Injured adolescent females are more likely than males to be injured by a relative or intimate partner, and are more likely to be injured by a single assailant. Among females aged 10 to 19 who suffer an injury, however, most of the injuries are inflicted by a non-partner; these injuries are also more likely to have been caused by blunt force than a weapon. The study is now published online in advance of print in the *Journal of Emergency Medicine*.

In 2007, almost 485,000 violence-related injuries among adolescents aged 10 to 19 years were seen in emergency departments across the United States. While males are well known to be associated with community [violence](#), the researchers report there is an increasing incidence of non-partner violence among [young women](#). To date, little is known about the characteristics of assaulted young women. As a result of this knowledge gap, the National Institutes of Health and [Centers for Disease Control and Prevention](#) have called for greater attention to the attributes of young women with violent injuries.

Lead author Megan Ranney, M.D., M.P.H., of the department of emergency medicine at Rhode Island Hospital, and her colleagues conducted a retrospective chart review to begin to fill this gap. They studied the charts of all non-traffic related injuries among youth ages 10 to 19 who were seen in a three-year period in either the hospital's adult or [pediatric trauma center](#), a Level I trauma center located in an urban area in Rhode Island's capital city of Providence.

In total, 828 charts were reviewed, and the researchers found 385 of the 828 injuries were caused by what they classify as "[interpersonal violence](#)" (meaning, that the injured person was intentionally hurt by someone else). Of the 385 violent injuries, 150 (40 percent) occurred among females, while 235 were among males. Female and male victims had similar race, age or insurance status.

Several key findings emerged from the study:

- Females were more likely than males to be documented as being injured by an intimate partner or relative, injured by only one person, and injured during the daytime.
- A higher percent of injured females were hurt by someone who was not an intimate partner (e.g., a friend, sibling or acquaintance) than by a partner.
- Overall, females were significantly more likely than males to be injured by someone known to them (57 percent of females versus 28 percent of males)
- Females were less likely to be documented as being injured by weapons (4 percent females versus 16 percent males)

Ranney says, "Where male and female victims of [community violence](#) differed in this chart review was in the circumstances of their injury. Our study shows that adolescent females are more likely than males to be injured by a relative or intimate partner, and equally likely to be injured by friends or strangers. "

She adds, "Although only adolescent females reported suffering an injury at the hands of an intimate partner, overall, more adolescent

females were injured by a non-partner than by a partner. And they were more likely to be injured by blunt force than by a penetrating weapon such as a knife. To our knowledge, these distinctions have not been previously reported in the literature. These findings have important implications for preventing violent injury among young women; although dating violence is an important cause of injury, so are fights with friends. "

The researchers also had a second goal for the study: to examine the completeness of the documentation within the charts and the accuracy of the coding for those injuries. Their review found, in agreement with previous literature, that relying on hospital-provided data on the deliberateness for adolescent females' injuries may result in erroneous conclusions. The chart review found that large numbers of injuries were miscoded, and, more importantly, crucial demographic and injury-related information was missing from many charts.

Ranney says, "These inaccuracies suggest that alternative modes of intentional injury surveillance for adolescents should be created. The large amount of missing information, especially in terms of race/ethnicity, is particularly concerning and deserves further study. "

Of note, however, Ranney adds, "Interestingly, females' circumstances of injury, particularly the perpetrator of their injuries, were consistently better documented than males'. Nonetheless, our findings on missing information suggest that emergency physicians should be better educated as to the value of assessing the circumstances in which youth are injured, and, by extension, the importance of charting the youths' responses. "

The researchers conclude that while most existing violence prevention programs focus on either female victims of intimate [partner violence](#) or on violence among males, this review suggests that adolescent female non-partner violence deserves further attention. Ranney notes, "Violent

injuries caused by friends and strangers account for greater numbers of [emergency department](#) visits for young women than [intimate partner](#) or dating violence. In addition, because female adolescents seem to be injured under different circumstances than males, the [injury](#) prevention methods that work to prevent male youth violence many not work for females, and further research into those risk factors is needed. "

Provided by Lifespan

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