

ADOLESCENT VIOLENCE: AN EMERGING CHALLENGE

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<p>Article history Received 2 Jan, 2011 Received in revised form 20 Feb, 2011 Accepted on 6 March, 2011 Available online March 25, 2011</p>	<p>Abstract Interpersonal adolescent violence is one of the most prevalent and visible forms of violence, evidenced by a rise in the premature death in many children and youth between the ages of 10 and 20 years. There is a great concern about the incidence of violent behavior among children and adolescents. This complex and troubling issue needs to be carefully understood by doctors concerned, parents, teachers, and other adults and health staff. This has proved to be epidemic these days. So it's very necessary to confront the problem of youth violence systematically. This article includes prevalence, the risk behaviors of adolescents, factors leading to adolescent violence and various strategies adopted for its prevention. This article may be of help to disciples of Forensic medicine (forensic psychology) Psychiatry, Pediatrics and Preventive medicine to reduce the problem and to promote healthy development among teenagers.</p>
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Introduction

Today, violence is one of the leading causes of death between the ages of 15 and 24. Depression, according to the National Institutes of Health, occurs with greater frequency among teenagers today than in the past. Because many adolescents behaviors are often not identified as troubled and do not get the help they need.[1] Violence peaks during the second decade of life. The youths who first became violent in childhood escalate their violence in adolescence, and a larger group of young people embarks on violence in adolescence. Most cease their involvement in serious violence. Only about 20 percent of serious violent offenders continue their violent careers into their twenties.[2]

Violent behavior in children and adolescents can include a wide range of behaviors: explosive temper tantrums, physical aggression, fighting, threats or attempts to hurt others (including homicidal thoughts), use of weapons, cruelty toward animals, fire setting, intentional destruction of property and vandalism. [3]

Adolescent violence a public health problem: an epidemic

Adolescent violence is the second leading cause of death for young people between the ages of 10 and 24. in USA.[4] It accounts for the rise in the premature death in many children and youth.

Deaths resulting from youth violence are very common. Many young people seek medical care for violence related injuries. These injuries can include cuts, bruises, broken bones, and gunshot wounds. Some injuries, like gunshot wounds, can lead to lasting disabilities.

Violence can also affect the health of communities. It can increase health care costs, decrease property values, and disrupt social services. The cost of youth violence exceeds \$158 billion each year.

Prevalence of adolescent violence

Patton's study found that two in five deaths worldwide in this age group were due to injuries and violence, with young men in low and middle-income regions such as Eastern Europe and parts of South America at particularly high risk.

The top cause of adolescent male deaths was road traffic accidents at 14%, followed by violence and suicide.[5]

Research of adolescent violence in India

Research on adolescent violence in India is limited. Fifteen hundred high school students were investigated to study the prevalence and demographic

characteristics of witnesses, victims and perpetrators of violence and to see the impact of violence exposure. Sixty nine percent of students had witnessed violence in real life and 28% were of serious nature. Media violence exposure was universal. The prevalence of victims and perpetrators was 27% and 13% respectively. Bullying was prevalent. Male sex was the most important predictive risk factor for witnessing and perpetrating violence ($P < \text{or} = 0.001$). Victims were predominantly females. Those having exposure to violence had poorer school performance and adjustment scores ($P < \text{or} = 0.05$). Thus violence exposure is prevalent even in the lives of Indian adolescents and gender differences exist. [6]

Warning signs of depression in adolescents: risk behaviors

A careful scrutiny of such adolescents is necessary for the diagnosis of depression. The following signs must be observed over a 1year period in adolescents.

- Irritability rather than depression
- Poor appetite or overeating.
- Insomnia or hypersomnia.
- Low energy or fatigue.
- Poor concentration or difficulty making decisions.
- Feelings of hopelessness.
- Self-criticism, with the self-concepts of being uninteresting, incapable, or ineffective.[7]

Risk factors

- History of violent or aggressive behavior.
- Serious drug or alcohol use.
- Gang membership or strong desire to be in a gang.
- Access to or fascination with weapons, especially guns.
- Threatening others regularly.
- Trouble controlling feelings like anger.
- History of discipline problems or frequent run-ins with authority.[8] Exposure to violence in the home and/or community in other criminal acts. Being the victim of physical abuse and/or sexual abuse
- Ties to antisocial or delinquent peers
- Genetic (family heredity) factors
- Brain damage from head injury
- Presence of firearms in home[9]
- Broken home or poor parent-child relations. Poor monitoring or supervision, and involvement by parents
- Male gender
- Poor attitude toward or performance in school
- Crime, drugs, and disorganization in the neighborhood

- Abusive parents or Antisocial parents and Antisocial attitudes, beliefs
- Low family socioeconomic status or poverty
- Family conflict (males only)
- Provoking, and demeaning interactions - can spark unplanned violence. The presence of a gun in provoking situations can raise the level of violence.
- Serious mental disorders who also abuse substances or have not received treatment may be at risk for violence.[10]
- Exposure to media violence can increase children's aggressive behavior, attitudes and emotions.
- Religion, Ethnicity, Race play major role in increasing prejudices and violence.

Common reactions of adolescents after trauma

Posttraumatic Stress Disorder (PTSD): PTSD is a condition that can develop after someone has experienced a life-threatening situation.

- Depression
- Self-blame, guilt and shame
- Suicidal thoughts
- Anger or aggressive behavior
- Alcohol/Drug abuse

Prevention of adolescent violence

- Parent- and family-based programs improve family relations. Parents receive training on child development. They also learn skills for talking with their kids and solving problems in nonviolent ways.
- Social-development strategies teach children how to handle tough social situations. They learn how to resolve problems without using violence.
- Mentoring programs pair an adult with a young person. The adult serves as a positive role model and helps guide the young person's behavior.
- Changes can be made to the physical and social environment. These changes address the social and economic causes of violence.[11] Prevention and intervention programs must reflect the different patterns of violence typical of early and later onset.
- Early childhood programs that target at-risk children and their families are important to prevent the onset of a chronic violent career.
- Programs must be developed to identify patterns, causes, and prevention strategies for violence.
- A comprehensive community prevention strategy must determine the causes and risk factors of adolescent violence.

- Serious violence is an element of a lifestyle that includes drugs, guns, early sex, and other risky behaviors. Successful interventions must focus on the risky lifestyle of the adolescent person.
- Educate others about the devastating consequences of youth violence.
- Help your community to provide a support network for youth affected by violence.
- Volunteer for organization working to alleviate adolescent violence.

Prevention of adolescent violence: a who report

Life skills and social development programs for adolescents are important for reducing violent behavior. Supporting teachers and parents in problem solving and non-violent disciplining is also effective. If and when violence does occur, actions to make health systems more responsive, and to build the competence of health workers, can help ensure that adolescents who experience violence, including sexual violence, get effective and sensitive care and treatment. Psychological and social support can help adolescents overcome the long term effects of violence, and to reduce the likelihood of their becoming perpetrators of violence in the future.[12]

Role of parents

The parents must give love and attention to their children. They must act in an appropriate way in front of them and be role models. They must develop an open, trusting relationship with them. They must know whereabouts of their children, what they are doing, and with whom. They must communicate with teachers and be involved children's school. They must know children well enough to discern the warning signs of unusual behavior. They must make sure the children do not have access to guns, drugs, or alcohol. Children must be told the ways to avoid becoming either a victim of violence or a bully. They must make them learn about and use anger-control techniques, if necessary. Media to which children are exposed must be monitored.[13]

Summary

The greatest need is for the Nation to confront the problem of adolescent violence which is one of the leading causes of premature death and serious injuries between the age groups of 15 and 24. Solution to this is quite challenging. Many effective prevention and intervention programs are now in place. We must understand how to reduce, or even prevent, the most serious problem of youth violence. We must also monitor warning behaviors that may lead to violence among the adolescents. If ignored, it may lead to serious consequences.

Conflict of interest

None declared

References

1. M. Allan Cooperstein; The Storms of Youth: Depression and Violence in Adolescence; http://members.tripod.com/allanpsych/http://www.expertlaw.com/library/psychology/depression_violence.html; (accessed 4 Oct 2009).
2. Youth Violence Facts; <http://www.safeyouth.org/scripts/faq/youthviolfacts.asp>; (accessed 4 Oct 2009).
3. http://www.aacap.org/cs/root/facts_for_families/understanding_violent_behavior_in_children_and_adolescents; (accessed 4 Oct 2009).
4. <http://www.cdc.gov/ncipc/pub-res/YVFactSheet.pdf>; (accessed 4 Oct 2009).
5. Violence, accidents are killing world's youth: Study; <http://www.indianexpress.com/news/violence-accidents-are-killing-worlds-youth-study/515822/2>; (accessed 4 Oct 2009).
6. Munni R, Malhi P; Adolescent violence exposure, gender issues and impact. Indian Pediatr. 2006 Jul;43(7):607-12. PMID: 16891680 [PubMed - indexed for MEDLINE]; (accessed 4 Oct 2009).
7. http://www.aacap.org/cs/root/facts_for_families/understanding_violent_behavior_in_children_and_adolescents; (accessed 4 Oct 2009).
8. M.Allan Cooperstein, The Storms of Youth: Depression and Violence in Adolescence; http://www.expertlaw.com/library/psychology/depression_violence.html; [http://members.tripod.com/allanpsych/Submitted December, 1999](http://members.tripod.com/allanpsych/Submitted%20December,%201999); (accessed 4 Oct 2009).
9. http://www.aacap.org/cs/root/facts_for_families/understanding_violent_behavior_in_children_and_adolescents; (accessed 4 Oct 2009).
10. What You Need to Know about Youth Violence Prevention <http://mentalhealth.samhsa.gov/publications/allpubs/SVP-0054/pathways.asp>; (accessed 4 Oct 2009).
11. Preventing Youth Violence: Program Activities; Guide. <http://www.cdc.gov/ncipc/pub-res/YVFactSheet.pdf> 2008; (accessed 4 Oct 2009).
12. http://www.who.int/child_adolescent_health/topics/prevention_care/adolescent/dev/en/; (accessed 4 Oct 2009).
13. What Can Parents Do. <http://mentalhealth.samhsa.gov/publications/allpubs/SVP-0054/parents.asp>; (accessed 4 Oct 2009).