

An Exploration of Youth Violence Surveillance in Colorado

Daniel J. Schober, M.A.

Master of Public Health Student

University of Kansas Medical Center

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Colorado Department
of Public Health
and Environment

Correspondence

This presentation was given on Friday,
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correspondence to:

Dan Schober

University of Kansas

dschober@ku.edu

Phone: (785) 864-0533

Today's Presentation

1. Present findings from "An Exploration of Youth Violence Surveillance in Colorado"
2. Questions
3. Discuss the implications and future directions as a group

Internet Information Statement

Thank you for your participation in this Webinar to discuss the study: “An Exploration of Youth Violence Surveillance in Colorado.” This Webinar will be recorded and archived on the Colorado Department of Public Health and Environment, Division of Injury, Suicide, and Violence Prevention Web site (<http://www.cdphe.state.co.us/pp/injuryprevention/>).

Part of this Webinar involves a question and answer period and a discussion about how this study can improve youth violence surveillance, both in Colorado and nationally. Participation in these parts of the Webinar is voluntary.

Background

- Violence Prevention in Colorado
 - » The Violence Prevention Advisory Group (VPAG)
 - » Enhancing State Capacity to Address Child and Adolescent Health through Violence Prevention (ESCAPE)
- “An Exploration of Youth Violence Surveillance in Colorado”
 - » Take action - strengthen Colorado Youth Violence Surveillance System
 - » Conducted 22 qualitative interviews

What Does a Good Surveillance System Look Like?

National Public Health Performance Standards Program (NPHPSP)

1. Assessment of health status and its threats and the determination of health service needs.
2. Attention to the vital statistics and health status of specific groups that are at higher risk of health threats than the general population.
3. Identification of community assets and resources, which support public health surveillance in promoting health and improving quality of life.
4. Utilization of technology and other methods to interpret and communicate health information to diverse audiences in different sectors.
5. Collaboration in integrating and managing public health related information systems.

Source:

<http://www.cdc.gov/od/ocphp/nphpsp/EssentialPublicHealthServices.htm#es1>

1. Assessment of health status and its threats and the determination of health service needs.

“So we just did a run for the state on intentional injury and we’ve got five data points that are out of the 2010 adolescent health objectives and are related to injury. I’m going, okay, well, we’ve gotta keep up the good work we’re doing in the other areas, but...what needs to be focused on in terms of this red area [unmet health objective]. Why aren’t we getting there?...This, to me would be a place to start some discussion with program folks around, “what are we doing?”

-Participant 14 from the State Public Health Department

2. Attention to the vital statistics and health status of specific groups that are at higher risk of health threats than the general population.

“We’ve looked at suicide in the jail setting, cause that was one of the things that struck me - when I first started working on the Violent Death Reporting System - was how many deaths occurred in a jail setting....we started working with some of the law enforcement agencies...[on] what can we do to prevent these suicides that are happening in the jail setting.”

-Participant 11 from the State Public Health Department

3. Identification of community assets and resources, which support public health surveillance in promoting health and improving quality of life.

“We use it [surveillance data] in grant reports, we use it in grant applications, we use it in stats sheets, you know those kinds of things. You know [we are] just are in the process of completing a needs and resources [assessment] to drive the completion of a strategic plan. Both the BRFSS and the YRBS data is in there.”

-Participant 2 from the State Public Health Department

4. Utilization of technology and other methods to interpret and communicate health information to diverse audiences in different sectors.

“I’ll also get calls, sometimes from people just asking from communities what the rates are, or from media. I get probably...ten to twelve media inquires a year, where I will just go and quickly run some data from CoHID [The Colorado Health Information Dataset] to give them an idea of where they are at, depending if they are calling from Denver, or Colorado Springs, or anywhere in the state.”

-Participant 10 from the State Public Health Department

5. Collaboration in integrating and managing public health related information systems.

“The Colorado Coalition Against Domestic Violence has been most helpful in gathering that [surveillance] data, so we’re not going to find the national sources, they save us a lot of time gathering all that information, so we can get summaries from them. So, that collaboration between other agencies is helpful, so we’re not seeking all those numbers...”

-Participants 19A & 19B from a Community Organization

How Did I Take Action?

1. Members of the Colorado Violence Prevention Advisory Group (VAPG) were contacted
 - » 26 individuals across 16 organizations
 - » If a VPAG member left the organization, his or her replacement was contacted
2. 22 interviews were conducted
 - » 21 in-person (1 by phone)
3. IRB consent obtained prior to the start of the interview
4. Interviews were audio recorded
5. Each interview was transcribed verbatim
6. Interviews reviewed and classified into themes
7. Consensus established with site mentor
8. A report that describes youth violence surveillance is being developed

What questions were asked in the interviews?

- Open-ended questions (N = 4)
 1. Please describe how you have been able to **use secondary data.**
 2. What **strengths** do you see with public health data related to youth violence?
 3. What **limitations or barriers** have you faced with public health data available related to youth violence?
 4. If you could have **your own publicly available youth violence surveillance system,** regardless of cost, staff, or other resources, what would this system look like?

What questions were asked in the interviews?

- Closed-ended questions (N = 4)
 1. Types of violence you address
 2. Number of years in violence prevention
 3. Surveillance sources used
 4. Frequency of data use (per year or month)

Who Participated?

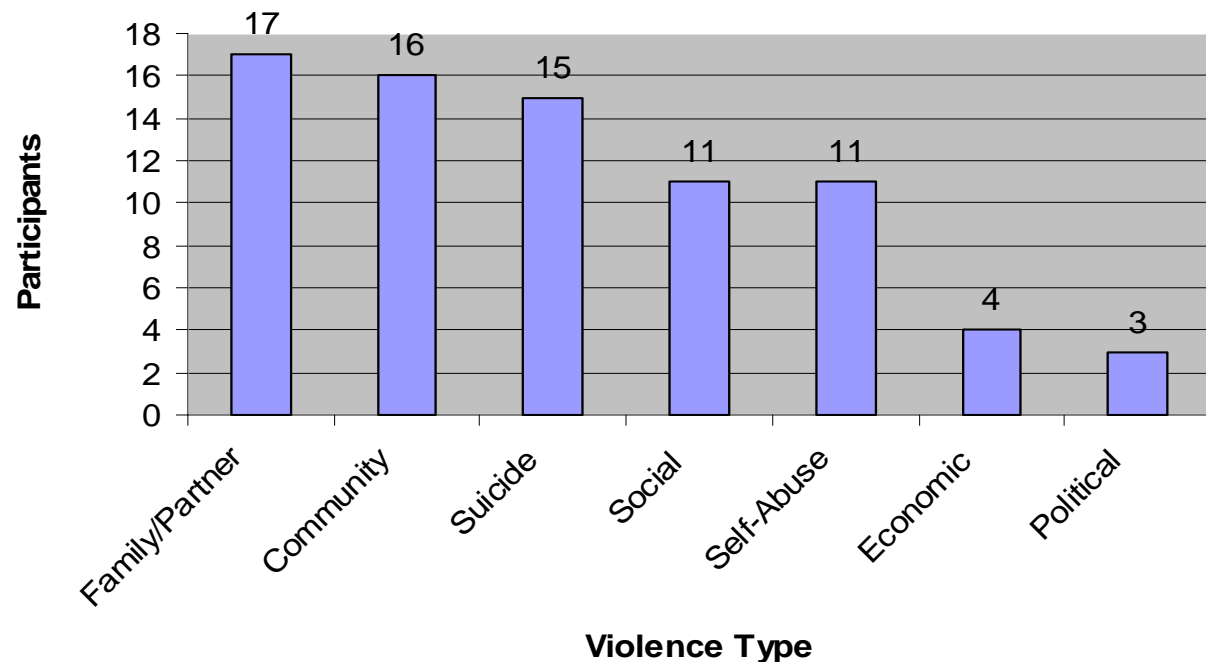
- Violence Prevention Advisory Group (VPAG)
 - » 19 of 26 (73.1%) of VPAG interviewed
 - Includes the Project Coordinator and Project Primary Investigator
 - » 3 additional (non-VPAG members)
 - » Participants (N = 20) reported working in violence prevention 15.35 years (Range = 3 to 32, SD = 9.64)

Organization Type	Count	Percent (Rounded)
State Department of Public Health	9	40.9%
Law Enforcement	3	13.6%
Education (University)	3	13.6%
Community Organization	3	13.6%
State Department (Human Services)	2	9.1%
Private Organization	1	4.5%
Independent Mental Health Practitioner	1	4.5%
Total	22	

What types of violence do the participants address?

- Typology of Violence
 - » World Report on Violence and Health identifies 7 types of violence
 - » All 7 types of violence were being addressed by participants
 - » Participants reported addressing an average of 3.62 types of violence

Type of Violence Addressed (N = 21)



The Colorado Youth Violence Surveillance System

- Participants identified 57 surveillance sources for violence prevention
 - » National (N = 26)
 - » State (N = 10)
 - » Local (N = 3)
 - » Unspecified/general (N = 18)
- 39 had Web sites that the author was able to track down

National Surveillance Sources

(N = 26)

1. U.S. Department of Justice * Office of Justice Programs Bureau of Justice Statistics Female Victims of Violence
2. The Office On Women's Health Quick Health Data Online
3. U.S. Census Bureau
4. YOUTH today
5. NAMI: National Alliance on Mental Illness
6. WISQARS
7. Connect for Kids
8. Behavioral Risk Factor Surveillance System
9. YRBSS: Youth Risk Behavior Surveillance System
10. Monitoring the Future
11. Pregnancy Risk Assessment Monitoring System (PRAMS)
12. Substance Abuse and Mental Health Services Administration (SAMHSA), Office of Applied Studies (OAS)
13. National Survey of Children's Health
14. America's Promise Alliance GALLUP Student Poll
15. U.S. Department of Education
16. National Violent Death Reporting System
17. Federal Bureau of Investigation Uniform Crime Report
18. U.S. Department of Justice * Office of Justice Programs Bureau of Justice Statistics Indicators of School Crime and Safety
19. U.S. Census Bureau Data Ferrett
20. U.S. Department of Justice * Office of Justice Programs Bureau of Justice Statistics Crime and Victim Statistics
21. U.S. Department of Justice * Office of Justice Programs Bureau of Justice Statistics Crime and Victim Statistics
22. Inter-University Consortium for Political and Social Research
23. USA.gov
24. AMCHP: Association of Maternal & Child Health Programs
25. KIDS COUNT
26. National Data Archive on Child Abuse and Neglect (NDACAN)

State Surveillance Sources (N = 10)

1. Colorado Coalition Against Domestic Violence
2. Maternal & Child Health County Datasets – Regions
3. ASPIRE
4. Colorado Health Information Dataset
5. Colorado Violent Death Reporting System
6. Healthy Kids Colorado Survey
7. Colorado Trails
8. ICON/Eclipse Case Management
9. The Colorado Department of Education
10. Colorado Bureau of Investigation

Local Surveillance Sources (N = 3)

1. The Piton Foundation
2. The Denver Post
3. Division of Youth Corrections

Unspecified or General Surveillance and Data Sources (grouped by sector) (N = 18)

Public Health:

1. Health data
2. Hospitalization data
3. Death certificates

Law Enforcement:

4. Violent crime reports
5. Local reports of crime
6. Police/law enforcement data
7. Criminal justice data
8. Public safety data
9. Juvenile justice data

Education:

10. Education system data
11. School attendance data
12. School level discipline action data (records of suspensions & expulsions)

Community Organization:

13. Data from nonprofit agencies
14. Data from victim services agencies

State Department (Human Services):

15. Data from departments of human or social services
16. Child welfare data

General/Other:

17. Coroner's reports
18. Listservs

How often is surveillance data accessed?

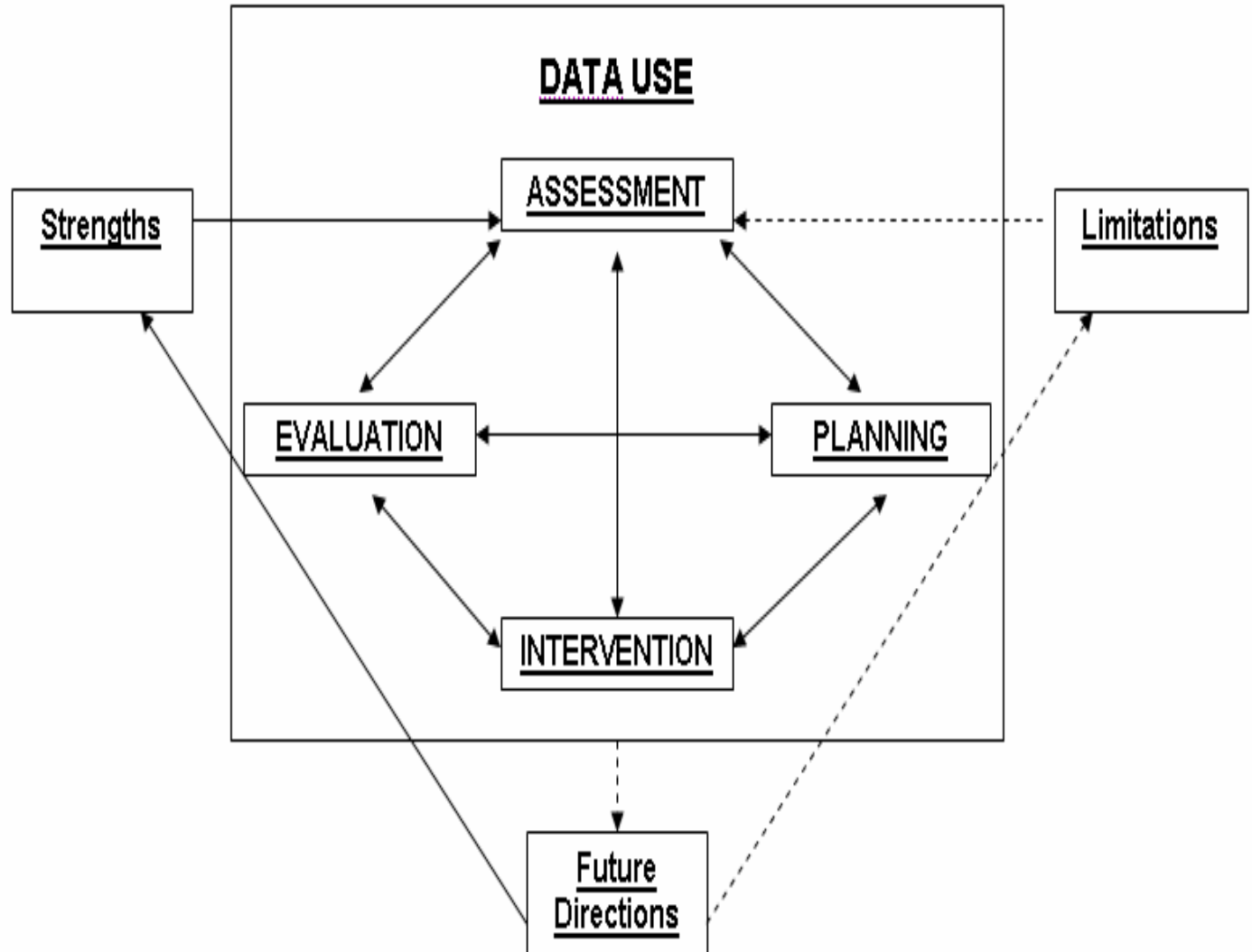
- Participants (N = 20) reported accessing surveillance data 28.5 times per year
 - » Participants in State Public Health (N = 9) accessed data 37.9 times per year
 - » Participants NOT in State Public Health (N = 11) accessed data 20.7 times per year

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 4. If you could have **your own publicly available youth violence surveillance system**, regardless of cost, staff, or other resources, what would this system look like?
- Interviews (N = 22)
 - » Average duration: 39:00 minutes
 - Range: 19:11 to 73:32

Youth Violence Surveillance Pathway



ASSESSMENT

- Assessment of youth violence
 - » By location
 - “for a project that we’re working on to start disseminating life skills, I was trying to find high, high risk areas in the southeast of the U.S” (Participant 3)
 - » By protective factor
 - “percentage of parents that read to their child everyday. And, it’s something like sixty-one percent...it’s like the number one determine, determining factors [of] a child’s school readiness” (Participant 22).
 - » By related behaviors
 - “...looking at the relationship between incidence of violence particularly in early childhood, [and the] the later onset of behaviors like smoking and obesity...” (Participant 23).
 - » By outcome
 - “minority overrepresentation in the system” (Participant 9).

PLANNING

- Vital to process
 - » Ask questions, drive discussion with others
 - » Leads to recommendations
 - » Inform group planning
- Resources allocation
 - » Determine need
 - “identify where there might be high need areas, so we could potentially set aside some of our funding to be need-based” (Participant 17).
 - » Establish key priorities
- Other types of planning
 - » Community Profiles
 - » Selection of community health indicators

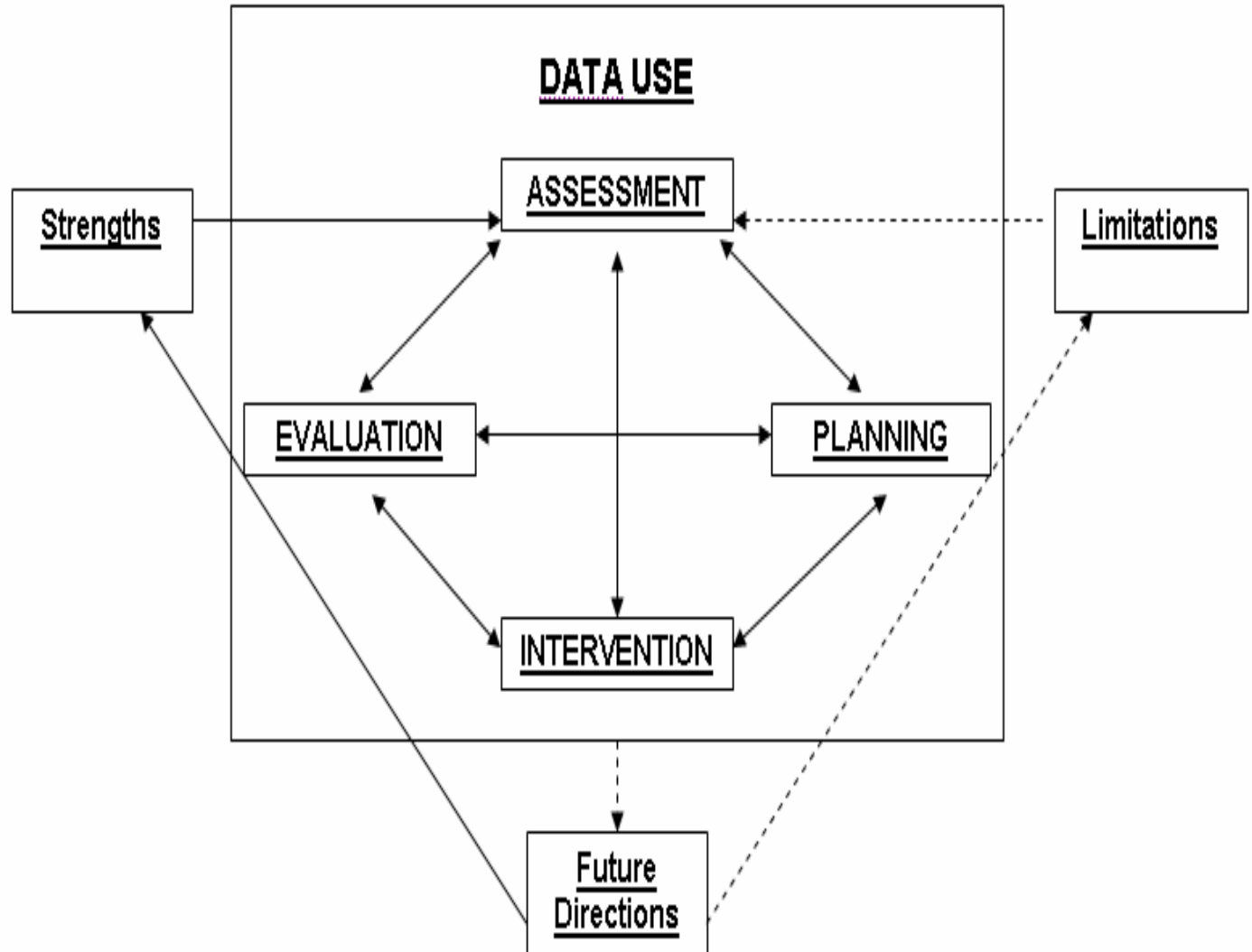
INTERVENTION

- Inform community education
 - » “do a regional presentation or town hall meeting...I include in some of that is county-specific data and then compare it to the state data so people who are at the presentation can see where their county or their region lies” (Participant 10).
- Launching targeted interventions
 - » Reaching out to at-risk populations
 - “When they [the BRFSS] ask adults if they have experienced sexual violence and at what ages...one and four adults are saying that they were sexually assaulted, prior to the age of eleven, so we can’t wait until high school to be talking with kids about seeking out...community resources” (Participant 21)
 - » Reaching victims
 - » Reaching offenders

EVALUATION

- Outcome evaluation
 - » Behavioral outcomes before and after the implementation of a state strategic plan
 - » Systems level-outcomes
 - “court proceedings, what happened in the court proceeding, what was the final disposition of the court case and where the kids have gone after the court case” (Participant 9)
 - » Statewide program outcomes
 - “we’re required to do an annual report to the state legislature on the effectiveness of our program...I’d like try to overlay some of the outcomes from the program with what’s happening in the community around that state” (Participant 17)

Youth Violence Surveillance Pathway



Strengths

- Range of information
 - » Broad
 - » Specific
- Human Infrastructure
 - » Listservs offered a current and trusted medium for a grassroots agency
 - » Could archive data that may be useful in the future
 - » “Hundreds of practitioners helped generate this data
 - » Also enabled a queries of hundreds of trusted sources

Limitations

- Poor magnitude approximations
 - » Underreporting
 - » Insensitivity
 - » Conceptually sound measurement
 - » Victim-focused
- Key types of data not being available
 - » Ownership of data
 - » Representative (weighted data)
 - » Lack of protective factor data
 - » Lack of ethnicity data
 - » Circumstance
 - Relationship of the perpetrator
- Individual outcomes

Future Directions

- Searching easier
- Specify key factor or factors
- Track over time
 - » Individuals
 - » Intervention outcomes
- Track individuals across systems
- Different levels
 - » “you can’t aggregate to that level of, even if its representative of the county, that doesn’t help the organization that’s doing the prevention work...it doesn’t tell me what to do. It tells me where people should be focusing their money, because that’s how the money comes down” (Participant 5).
- Positive data (Protective Factors)
 - » “But it doesn’t tell an organization what to do...there’s no picture that’s saying how many young people have a caring adult in their life, how many young people are involved in an engaging, reflective service activity in their community...those are the strategies that need to be complementing some of this prevention work, but there’s no one monitoring this, but these are the things that will tell you what to do” (Participant 5)

Next Steps

- Report to be released in 1-2 weeks
- What is your reaction to these findings?
- How might this project help improve youth violence surveillance (in Colorado and beyond)?
- Who needs to see this?
 - » How can this reach appropriate audiences?

Thank You

- Please contact me with any further comments or questions at:

Dan Schober

University of Kansas

dschober@ku.edu

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