

Evaluating a Legislated Serious Injury Reporting Program

Results from the First Six Months

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BACKGROUND

- As of July 1, 2023, all serious injuries (SI) affecting children, youth, and young adults who are receiving certain publicly funded services in Manitoba, Canada, must be reported to the Serious Injury Reviews and Investigations Program (SIRIP) of the Manitoba Advocate for Children and Youth (MACY).
- SI Programs are rare not only in Canada but around the world.
- SIRIP aims to identify re-occurring trends, risk factors, and systemic issues relating to SIs and make evidence-based recommendations to the government to improve public services and the well-being of young people.

Serious Injury (SI) definition

(a) life-threatening;

(b) requires admission to a hospital or other health care facility and is reasonably expected to cause serious or long-term physical or psychological impairment; or

(c) is the result of a sexual assault that causes serious physical harm or is reasonably expected to cause long-term psychological impairment.

OBJECTIVE

To examine SI investigative reports to **identify trends in serious injuries sustained by children and youth** in urban, rural, and northern/remote locations in Manitoba, **as well as the social circumstances surrounding those injuries.**

METHODS

- Quantitative: descriptive analysis.
- Qualitative: content thematic analysis.
- 66 SIRIP reviews, guided by a socio-ecological perspective.**



RESULTS



INDIVIDUAL LEVEL

- 45% of children 15–17 years.
- Neglect and non-accidental mainly in children <10.
- Pre-teen injuries mainly sexual assault and overdose.
- 50% of children had challenges with substance use, and a third with mental health.
- 57.5% cisgender females and were the majority of overdose, sexual assault, and accidental reports.
- Suicide and weapon-inflicted injuries were predominantly male.



INTERPERSONAL LEVEL

- Parental challenges: substance use, mental health, household IPV, and early death.
- Children had often experienced forms of victimization prior to the SI.
- Perpetrators mainly community members or same-aged peers (except for neglect).
- 66% of the female weapon-injury cases were IPV-related.
- Non-perpetrator peers were often present immediately before or after the SI occurring, and/or were aware that it had occurred.



SOCIAL DETERMINANTS LEVEL

- 91% of children were Indigenous.
- Many youth were in care, had been through cycles of removal and return, and/or had experienced multiple moves between care placements or wider family members.



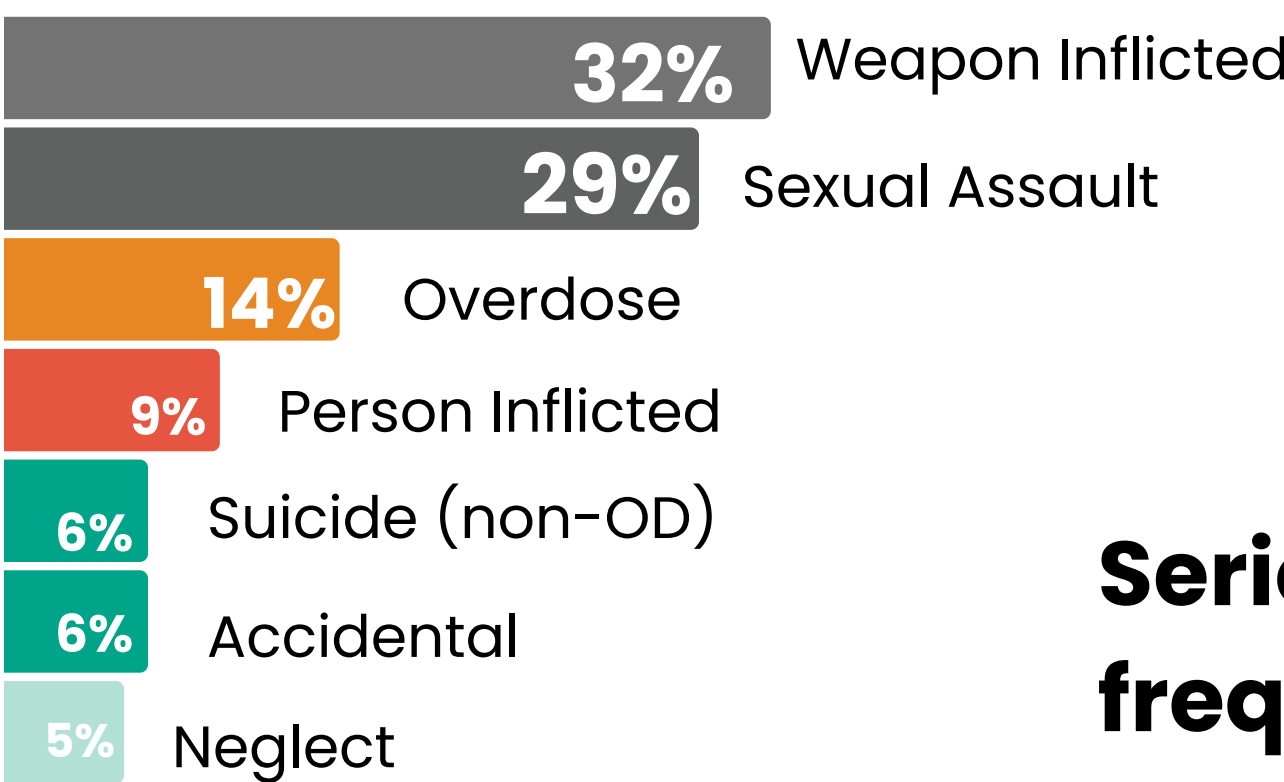
ORGANIZATIONAL LEVEL

- Multiple and active service responses, but evidence of meaningful connection to youth was often lacking.
- Youth did not always share full details of the SI and sometimes declined police and health involvement, and peers who were aware sometimes did not report the event.
- Service responses to neglect and cases with younger children did not appear robust and prevention opportunities were missed.



COMMUNITY LEVEL

- Notable gaps in services for remote and rural communities.
- Multiple care changes meant youth exposed to many and new social and physical environments, which could increase risk.



Serious Injury frequencies

CONCLUSION

An enhanced focus on social determinants of health and areas of the lives of children/youth that were sometimes minimal in current investigations, such as education or the involvement of paternal family, could strengthen the program.

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