



# Statistics that matter!

(From Child and Youth Mortality Reviewing)

**The Collaborative for Research and Training in Youth  
Health and Development**

23 June, 2011

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Canterbury Child & Youth Mortality Review Group

# ‘Laurie's Legacy’

*“Everyone has a piece of the puzzle  
but no-one has the overall picture...”*

Paraphrased from

Laurie O'Reilly

Former Commissioner for Children



# The work of Child and Youth Mortality Review

*“To identify, address and potentially decrease the numbers of infant, child and youth deaths in New Zealand”.*

**Nick Baker**

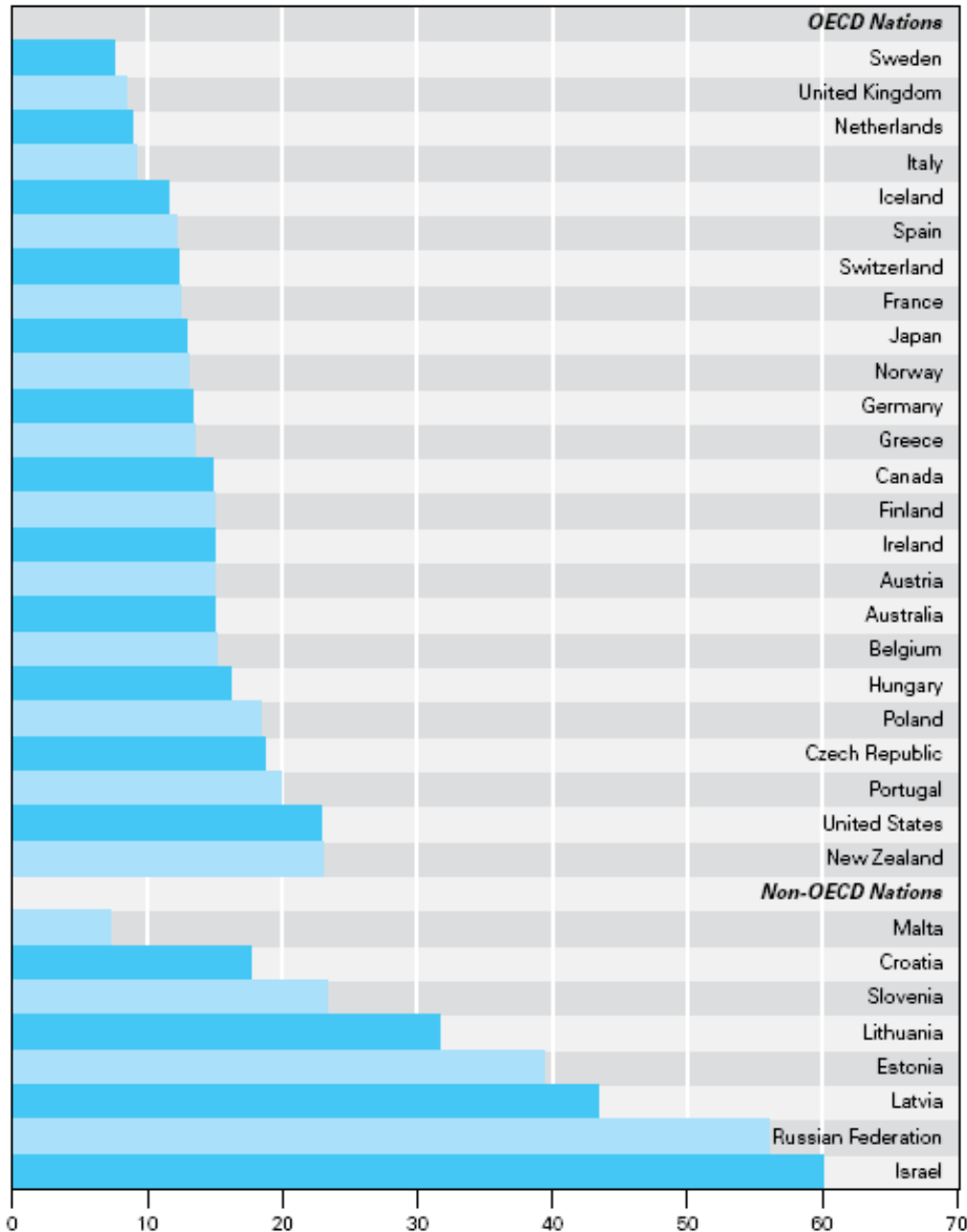
(Current Chair of CYMRC)

# Canterbury CYMRG Agents

- Paediatrics - Chairperson  
Clare Doocey
- CYFs
- Fire Service
- Forensic Pathology
- Health
  - Child and Family Safety
  - Public Health Nurses
  - Mental Health
  - Planning and Funding
  - Primary Health
- Maori
- Ministry of Education
- NZ Transport Agency
- Police
- Suicide Prevention
- Well Child
- Victim Support
- Change for our Children
- Agent for a day (specialist knowledge)



**Figure 2.3** Deaths from accidents and injuries per 100,000 under 19 years  
(average of latest three years available)

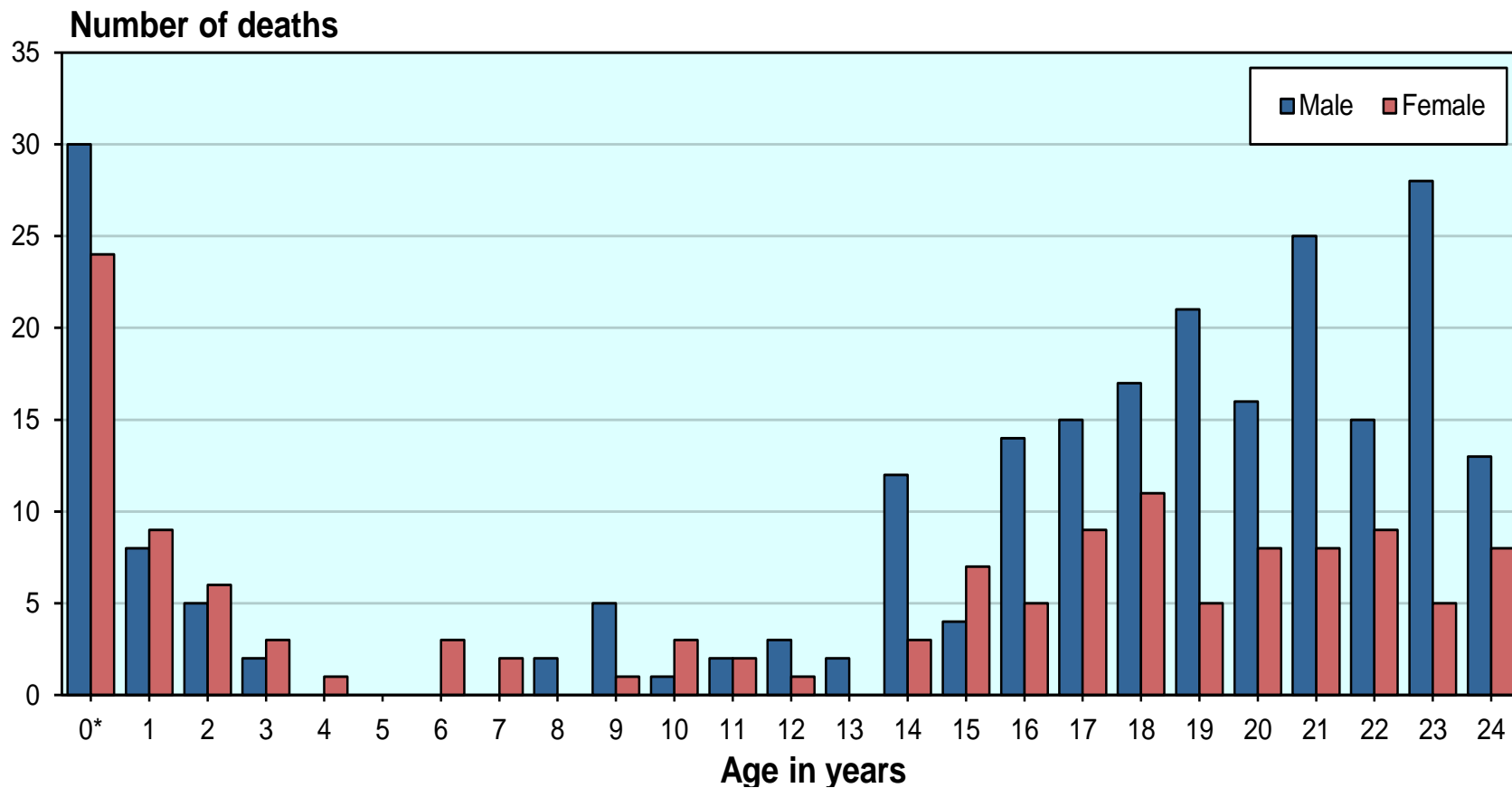


UNICEF Report  
Card 7- An  
overview of  
child well-being  
in rich countries  
2007



# Mortality (number of deaths) in children and young people aged 28 days to 24 years by gender and age in years

## Canterbury 2004–2009



# Canterbury 2003-2008

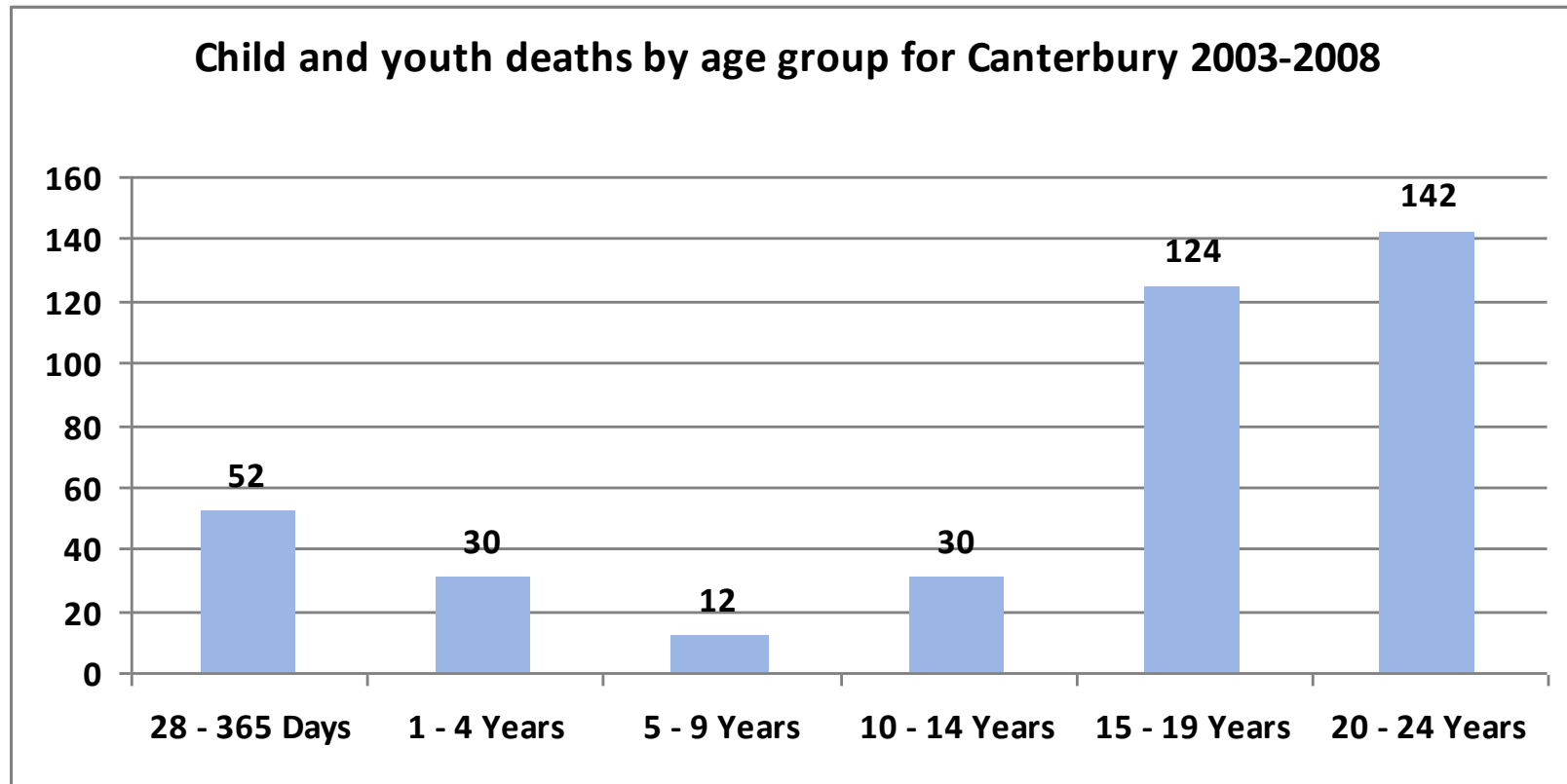
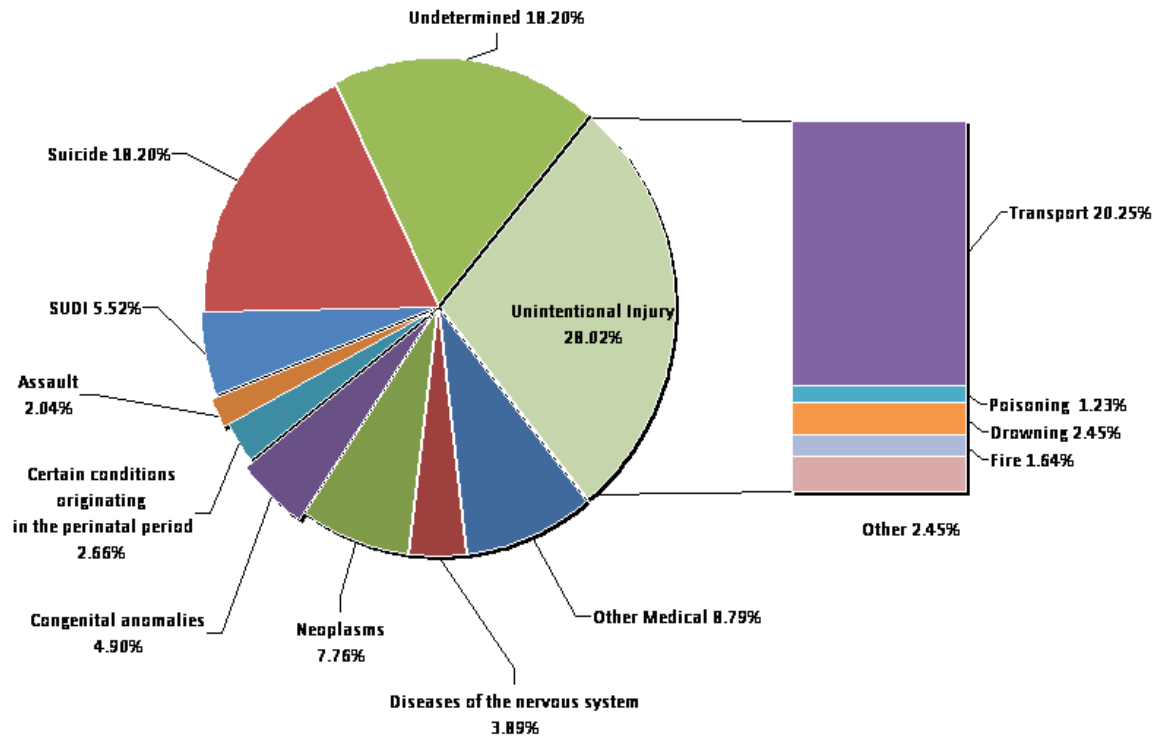
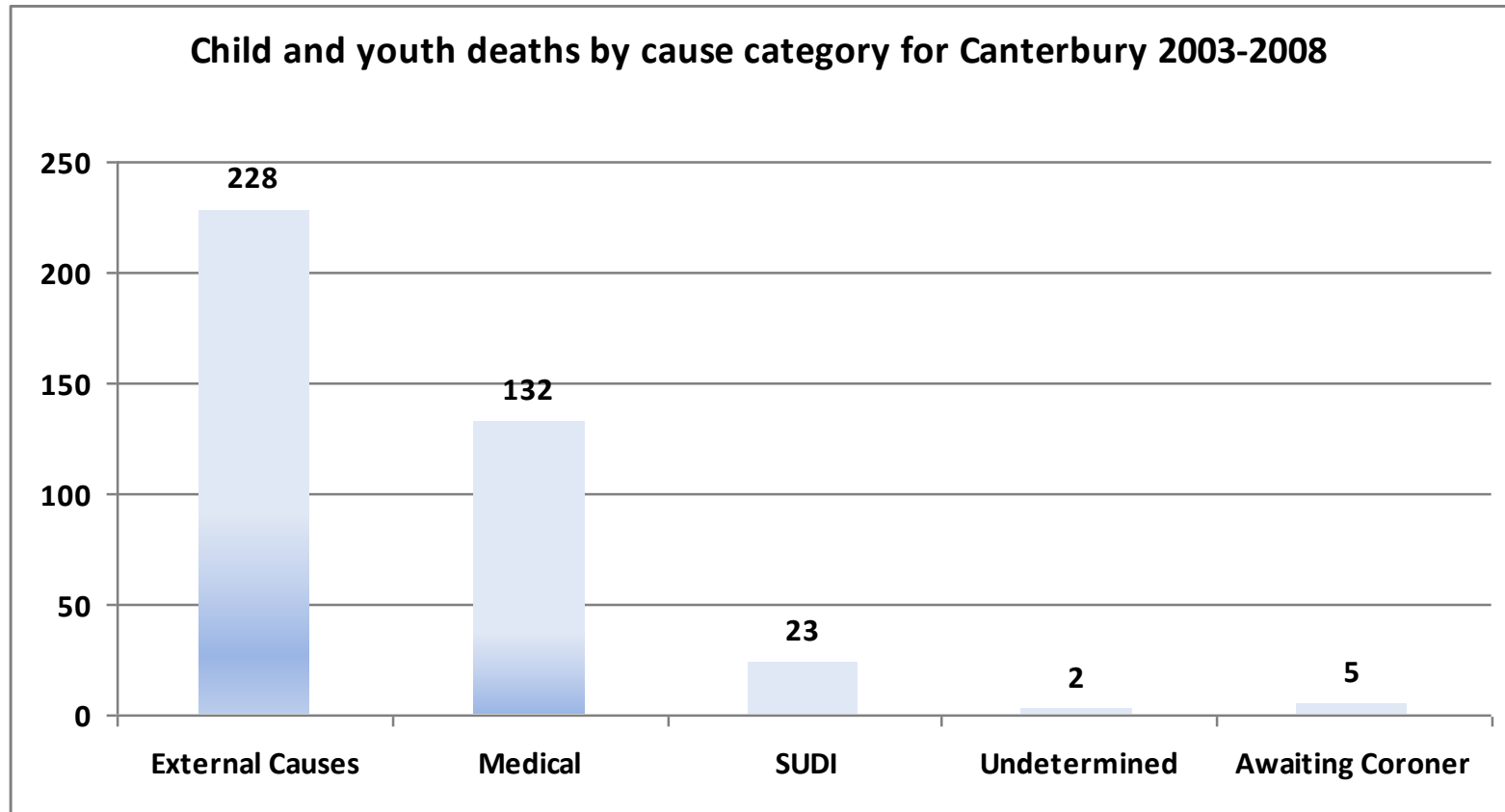


Chart showing main cause of child and youth death for Canterbury 2002-2009



# Canterbury Data



# Example of a review

A person in their late teens with a chronic disease.

Death as a result of poor compliance with medication, 10 years of not coming to terms with the chronic nature of the disease and family dysfunction

Questions:

- Timing of Transition to adult services
- What services exist for adolescents? Eg: Educator
- What is approach to multiple DNA to clinic appointments?
- Are Psychology services available?
- Are there models for managing 'complex family history +chronic disease'
- How is information shared between CYFs and medical teams?



# Issues

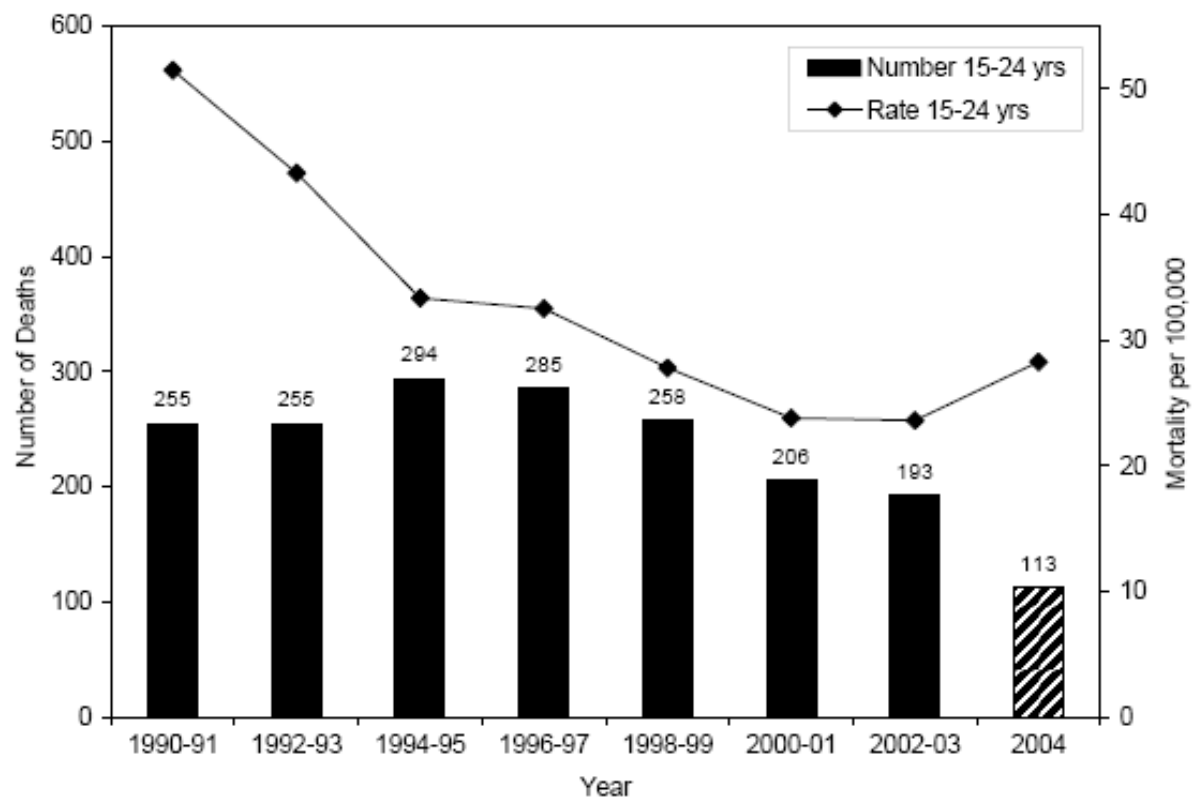
- Young adults with complex medical needs require comprehensive and coordinated rehabilitation services to ensure all aspects of their care are met.
- Families need to feel connected between primary and secondary services.

# Youth Suicide

- Public knowledge/education about mental health (suicide) issues so assistance can be provided is in tension with suicide information
- Screening for suicide risk in ED
- Role of cannabis in destabilising mood
- Reliance of using multiple contracts for behavioural issues



Figure 161. Suicide Mortality in Young People 15-24 Years, New Zealand 1990-2004



Note: Deaths for 1990-2003 are per 2 year period. Deaths for 2004 are for single year only.



# **‘At risk’ Youth while at University**

## **Actions:**

- 1. Discussions with the University about recognising the need for each Faculty to have a broader focus beyond just the academic part of students lives. Also, to support their development of more robust processes for identifying ‘at risk’ students.**
- 2. The introduction of the local Suicide Prevention Coordinator to a faculty where there is limited entry and high expectations for success. A Pilot Scheme has been initiated to monitor and proactively follow-up students who are identified as having ‘risk factors’ e.g. failing tests/exams and/or linked to non attendance at lectures. Also, integration of students after a significant episode of mental unwellness.**
- 3. Involvement of Suicide Prevention Coordinator in providing education, resources and staff training.**
- 4. National discussion with Suicide Prevention Coordinators about initiatives in other NZ Universities.**

# Alcohol and other drugs

- In 3 years from 2008 - 2010 in the 15 - 25yrs age group there were 91 non- medical deaths
- Not an exact science due to difficulty of data collection consistency. Alcohol and/or other drugs were a significant factor in approx. 33 of the deaths.



# SUDI = Sudden Unexpected Death in Infancy

(sometimes called Cot death/SIDS).

Many of these deaths involve known risk factors



# The Wahakura

- An 'acceptable to Maori' solution to the bed sharing+smoking risk
- A way to promote safe sleep, breastfeeding and bonding
- Comes with safe sleep rules of use and care
- Use encouraged for every sleep and place both in and out of the shared bed



From our online presentation

## **A Safe Sleep Option**

*that is promoted in the Maori community*



[www.maorisids.org.nz](http://www.maorisids.org.nz)

Wahakura means '*holder of what is precious*'. It is a traditional way to keep babies safe and close wherever they sleep – both in and out of the shared bed.

# Pepi-pods



# *pēpi-pod*

a safe space for babies more  
vulnerable to accidental  
suffocation

## Rules of Protection:

On the back, face clear

Only baby in here

Every sleep, everywhere

Always breathing smokefree air

Drugs and drinking nowhere near

Own space, best care.



# Change for our Children

respect for every child - hope for every future

## 'Baby Essentials Online'

- ..... a free online course for parents and professionals on essential ways to protect a baby's life.

[www.changeforourchildren.co.nz](http://www.changeforourchildren.co.nz)

# Examples of latest Recommendations in December 2009 Annual Report

- **LEGISLATION**

- Breath alcohol for young drivers be lowered to zero

- **POLICY**

- Regarding systems improvement the Government needs to continue to promote intersectoral communication, planning and review

- **PRACTISE POINTS**

- Health professionals need to support parents and acknowledge the importance they play in the well-being of teenagers in their care. This includes educating parents on the hazards associated with learning to drive and using motor vehicles.

- **COMMUNITY MESSAGES**

- Emotional and mental health problems can be serious and require professional attention. General Practice or youth health clinics are appropriate places to seek help.

**Canterbury**

District Health Board

Te Poari Hauora Ō Waitaha



# SUCCESSSES

- One LCYMRG has provided feedback to planners and developers in their area to counter a recent desire to put driveways behind houses so they are not on the streets, which is ugly. Data on drive way run-overs show they happen more often when the driveway is behind the house.
- One local district council has developed a pool fencing warrant of fitness programme as a result of data showing most young child pool drownings occur in pools that are fenced but not properly maintained, which gives a false sense of security.
- Another district has begun to paint arrows on their roads because many overseas tourists were dying in motor vehicle accidents as a result of driving on the wrong side.

# Canterbury

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