

**VIOLENCE IN SCHOOLS.**

**EXPERIENCE OF AN EMERGENCY DEPARTMENT  
FOR ASSAULTED PERSONS IN VAL-DE-MARNE,  
FRANCE**

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Violence in schools is a public health problem of growing concern. In an attempt to improve medical care, emergency units devoted to assaulted persons have been created in hospitals in France. In addition to medical care, information is given to teachers, nurses and social workers to facilitate access of children victims of this violence to these emergency units.

In the present study, we prospectively analyzed the socio-demographic and clinical findings in child victims of violence in school, examined in such a newly created emergency department since its opening in October, 1996. Were included children under the age of 18.

During the 5-year study period, between October, 1<sup>st</sup> 1996 and September 30<sup>th</sup> 2001, 607 children victims of violence in schools were examined, accounting for 3% of more than 20,000 assaulted persons during the same period, and 20% of all assaulted persons under the age of 18. Eighty-three assaults occurred during the first year, 120, 142, 148, and 114, during the following years. Seventy percent were boys. The children ranged in age from 3 to 17 years, mean age, 13.5 years, median age 14 years, in both sexes. Assaults occurred in the school in 56% of cases, in front of the school in 30% and on the way home in 14%. The child was beaten in most cases by another child or several ones. The assailant was known to the victim in 80% of cases. An instrument was used in 12% of cases. In 3 cases a handgun was used and in 18 cases, a knife. The motives of the assaults were difficult to determine. The victim was rarely stolen.

Regarding traumatic lesions, the face/head and arms/legs were most frequently involved. Twenty-three nose fractures were found. Forty-five percent of victims had only one lesion. Of note, 25% had no visible lesions, but only spontaneous or provoked pain.

In conclusion, approximately 120 children victims of assaults in school are examined each year at our emergency department. After a dramatic increase in the number of children examined during the first year, the number tended to stabilize thereafter. These results demonstrate that these units should still be developed, because being close to schools, and police stations, access to medical care is facilitated and information is provided to teachers, psychologists and social workers for a better follow-up of these children.