

The logo for the Harris County Child Fatality Review Team (CFRT) features the letters 'CFRT' in a vibrant green, hand-painted brushstroke font. The letters are thick and expressive, with visible texture and varying line thicknesses. The 'C' is a large, open loop, while the 'F', 'R', and 'T' are more solid but still show the brushwork. The entire logo is contained within a thin, rounded orange border.

Harris County
Child Fatality
Review Team

A Decade in Review: 2008 - 2017

Created by:

Angie Hayes, MS

Baylor College of Medicine

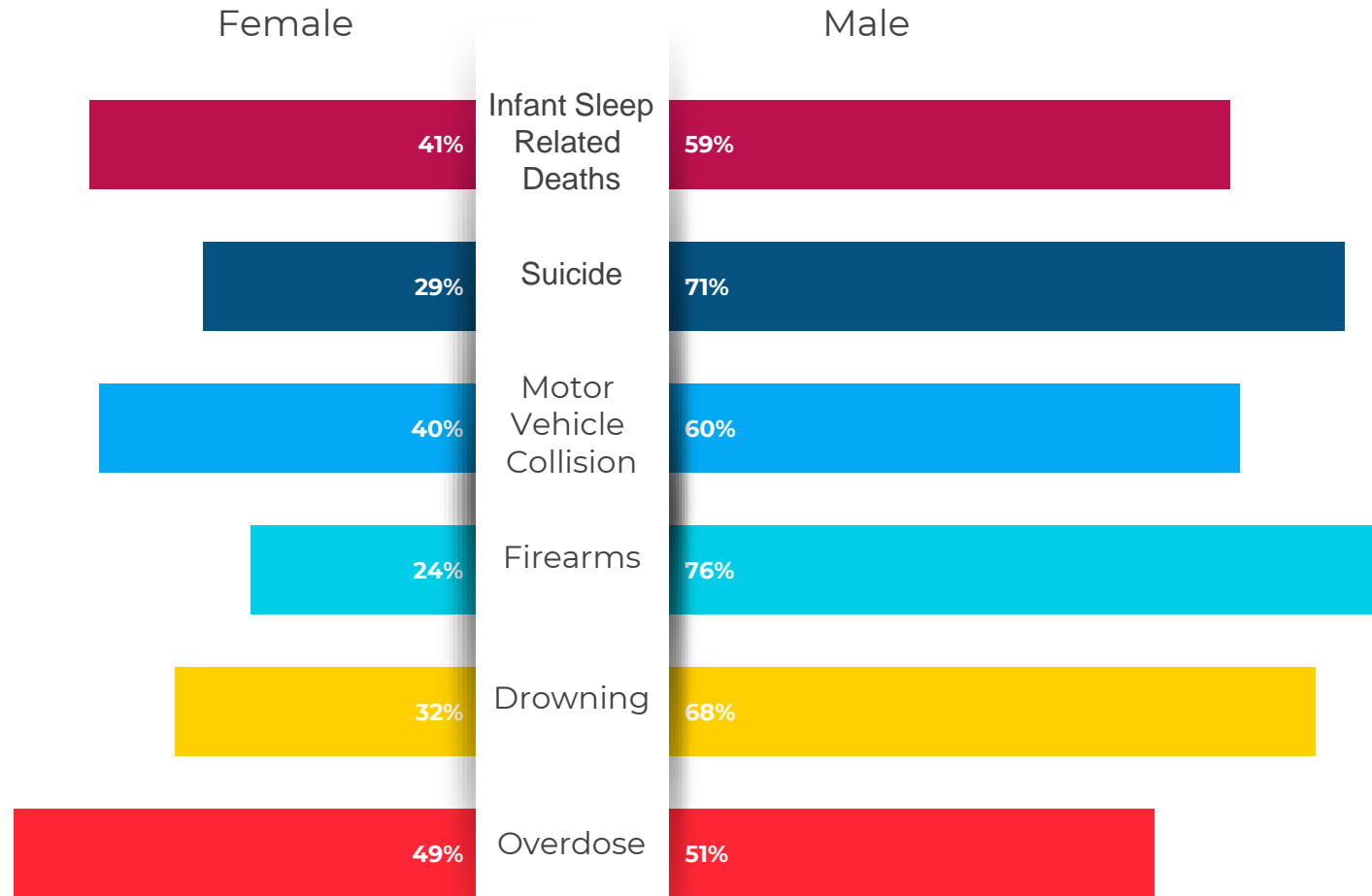
akhayes@bcm.edu



Read the full report at
bit.ly/cftrreport

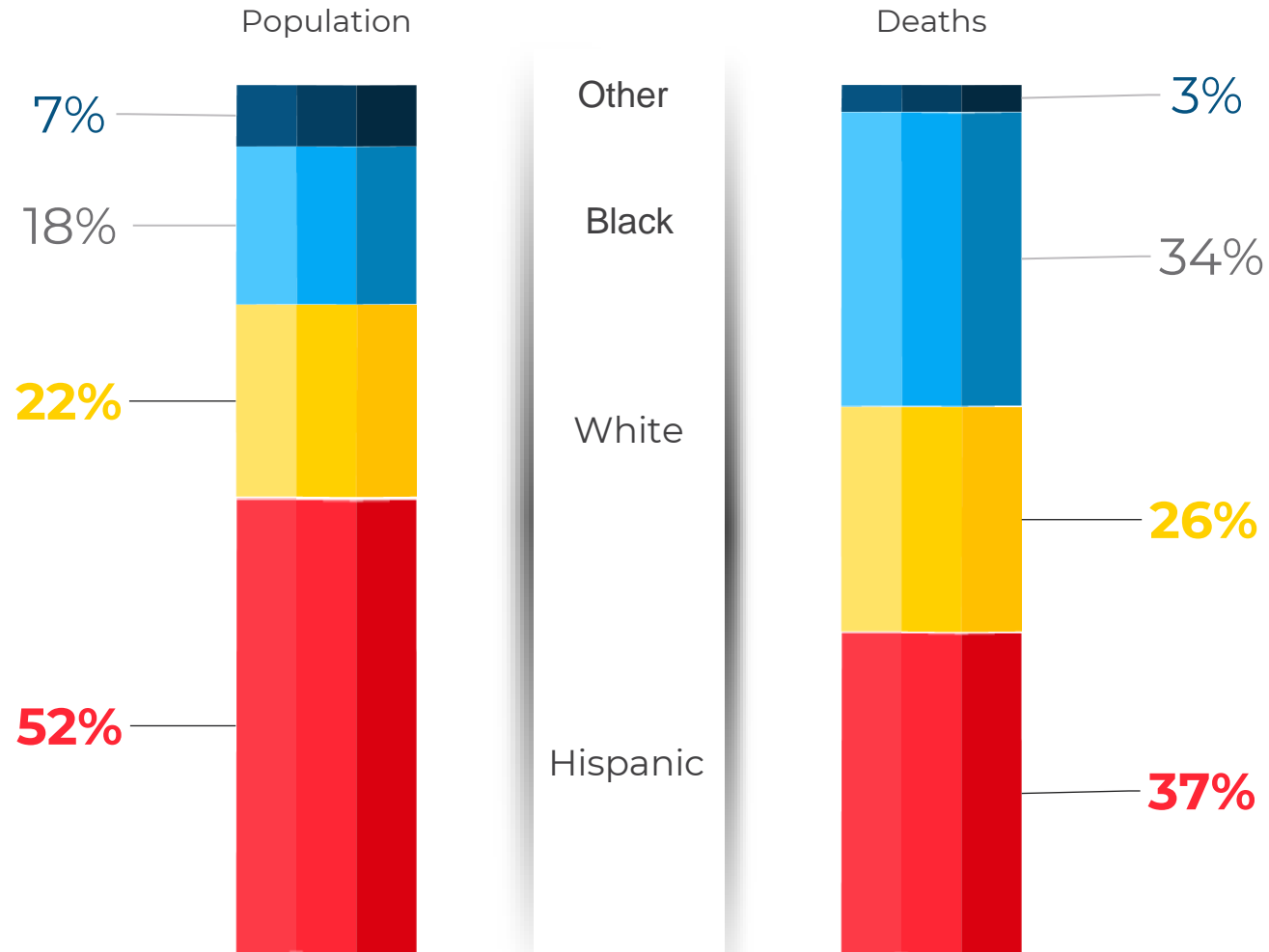
Leading Causes of Death by Gender

Percentage of deaths by each cause split by gender,
Children 0-17, Harris County, 2008-2017



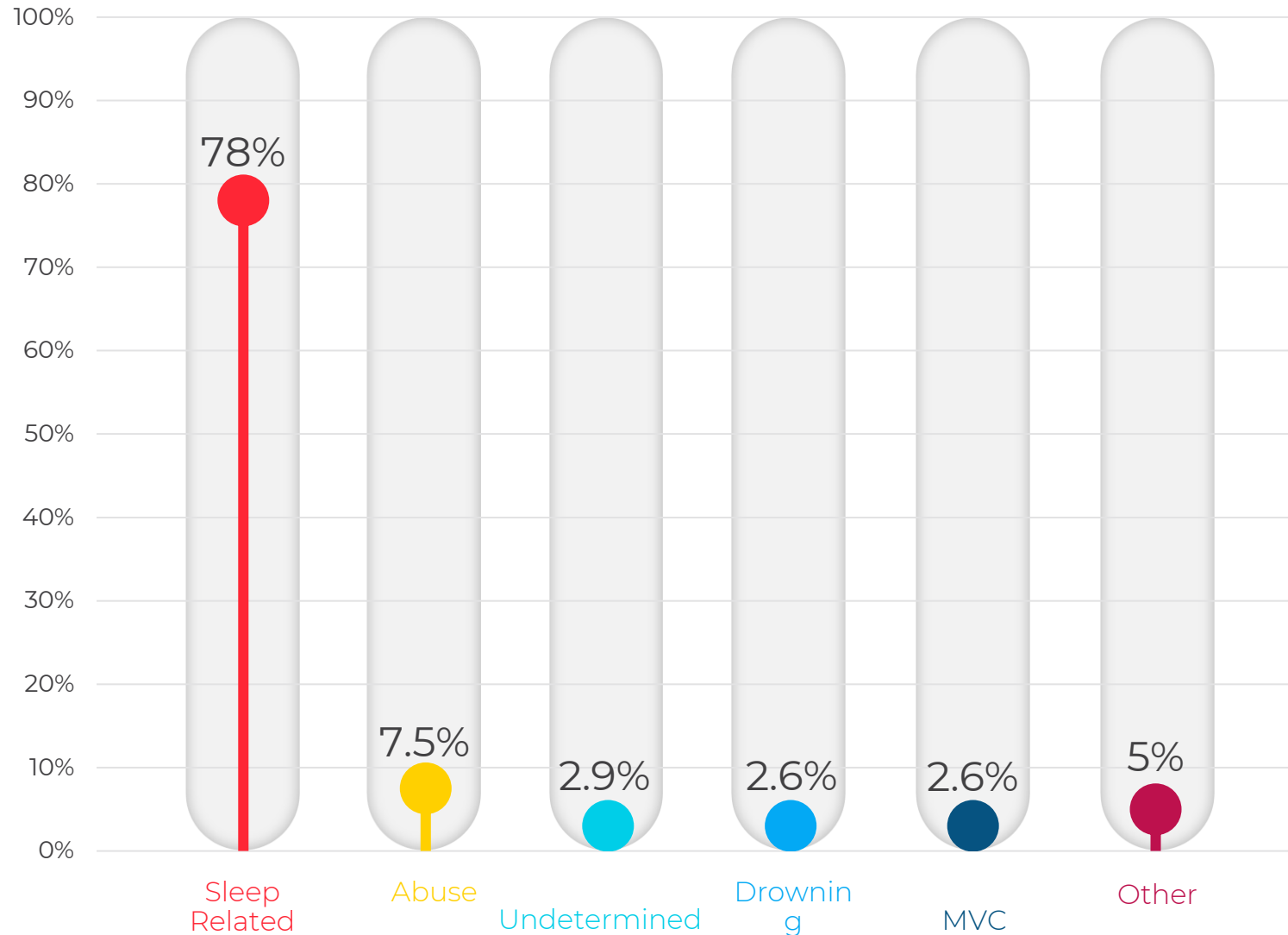
Deaths by Race

Percentage of population by race compared to percentage of deaths by race, Children 0-17, Harris County, 2008-2017



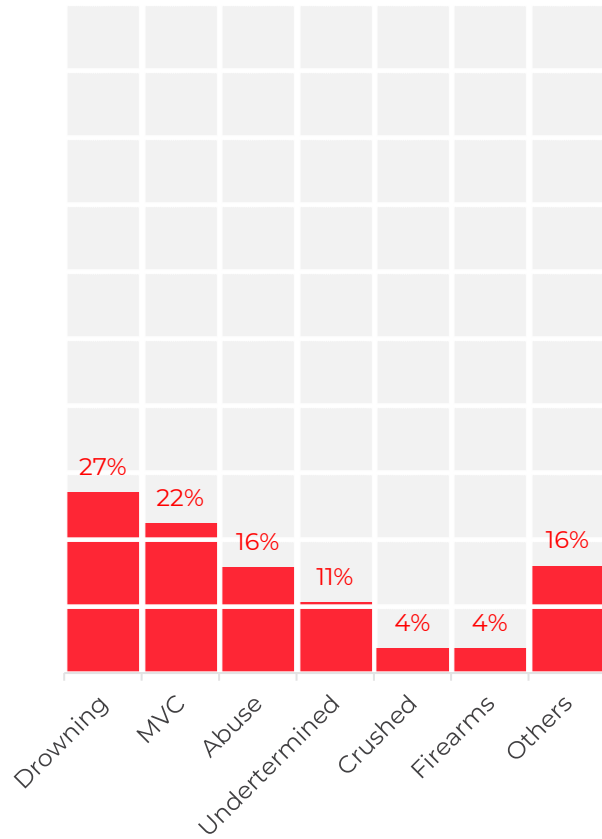
Leading Causes of Infant Death

Causes of death of infants 12 months and younger
Harris County, 2008-2017

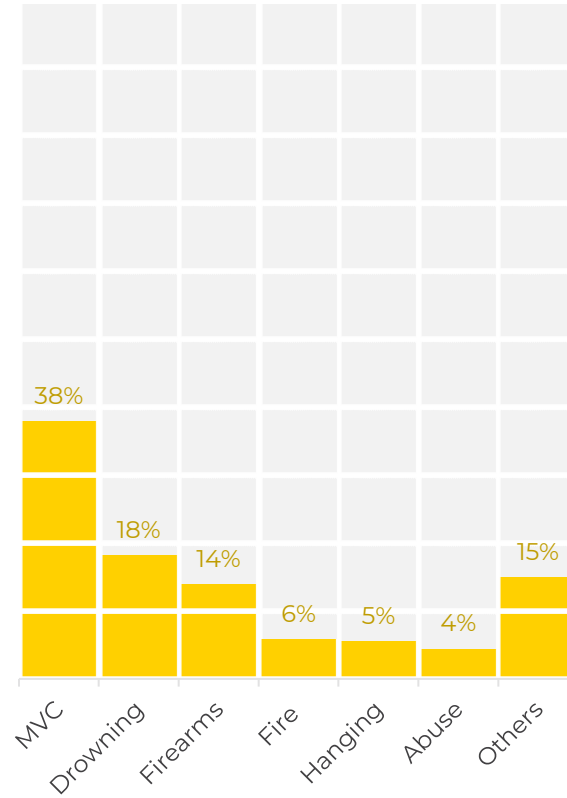


Leading Causes of Death by Age

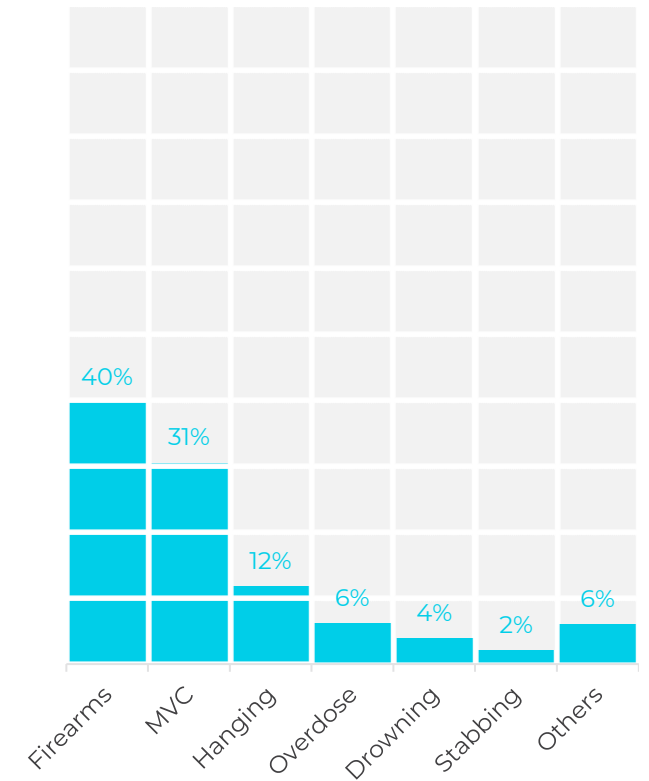
Percentage of deaths by each cause in age groups over 12 months, Harris County, 2008-2017



Children 1 to 4 years



Children 5 to 12 years



Children 13 to 17 years



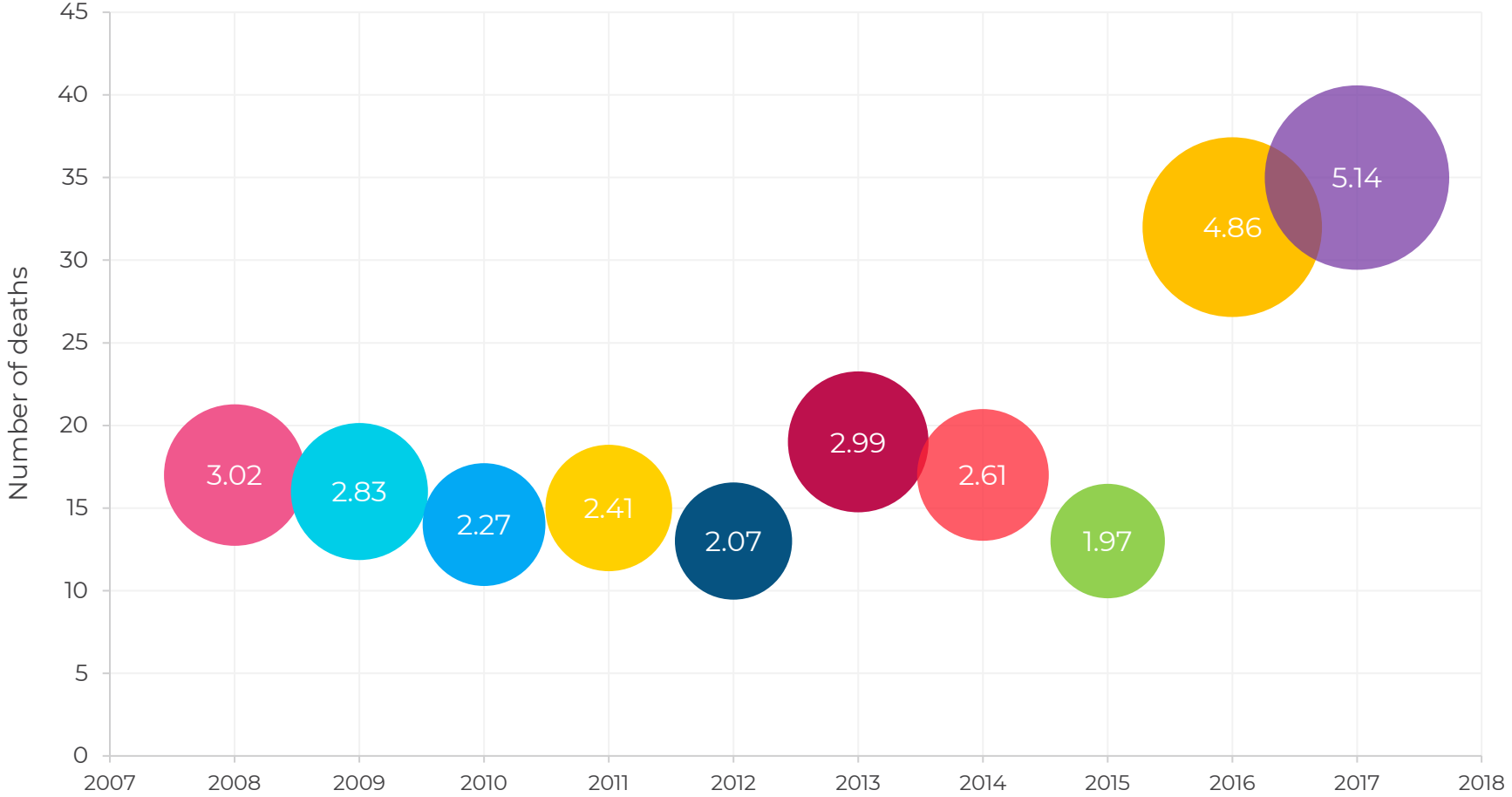
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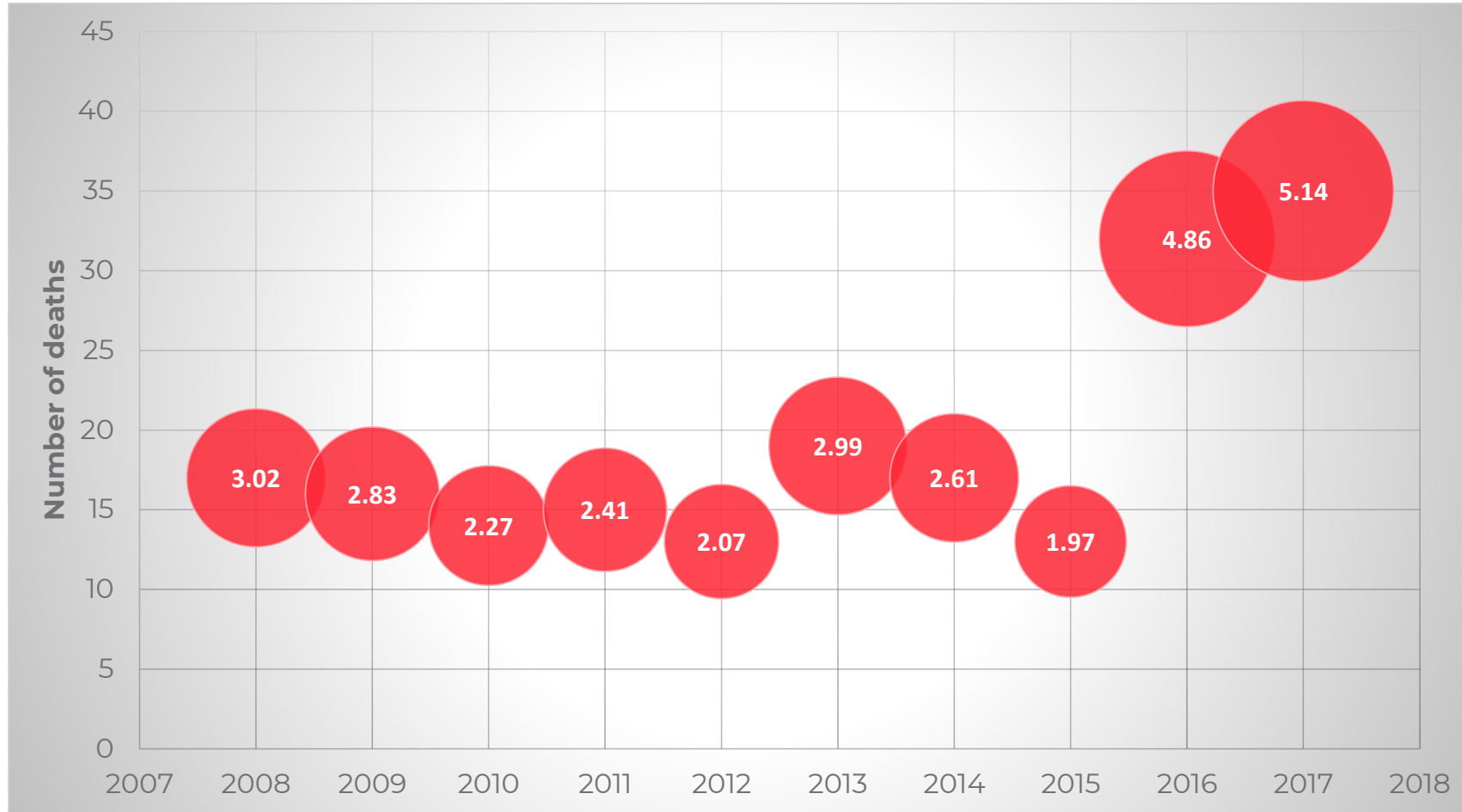
Youth Suicide

Deaths by Suicide

Number of deaths per year shown by rate per 100,000 children 8 – 17 years, Harris County, 2008-2017



Suicide Deaths in Harris County

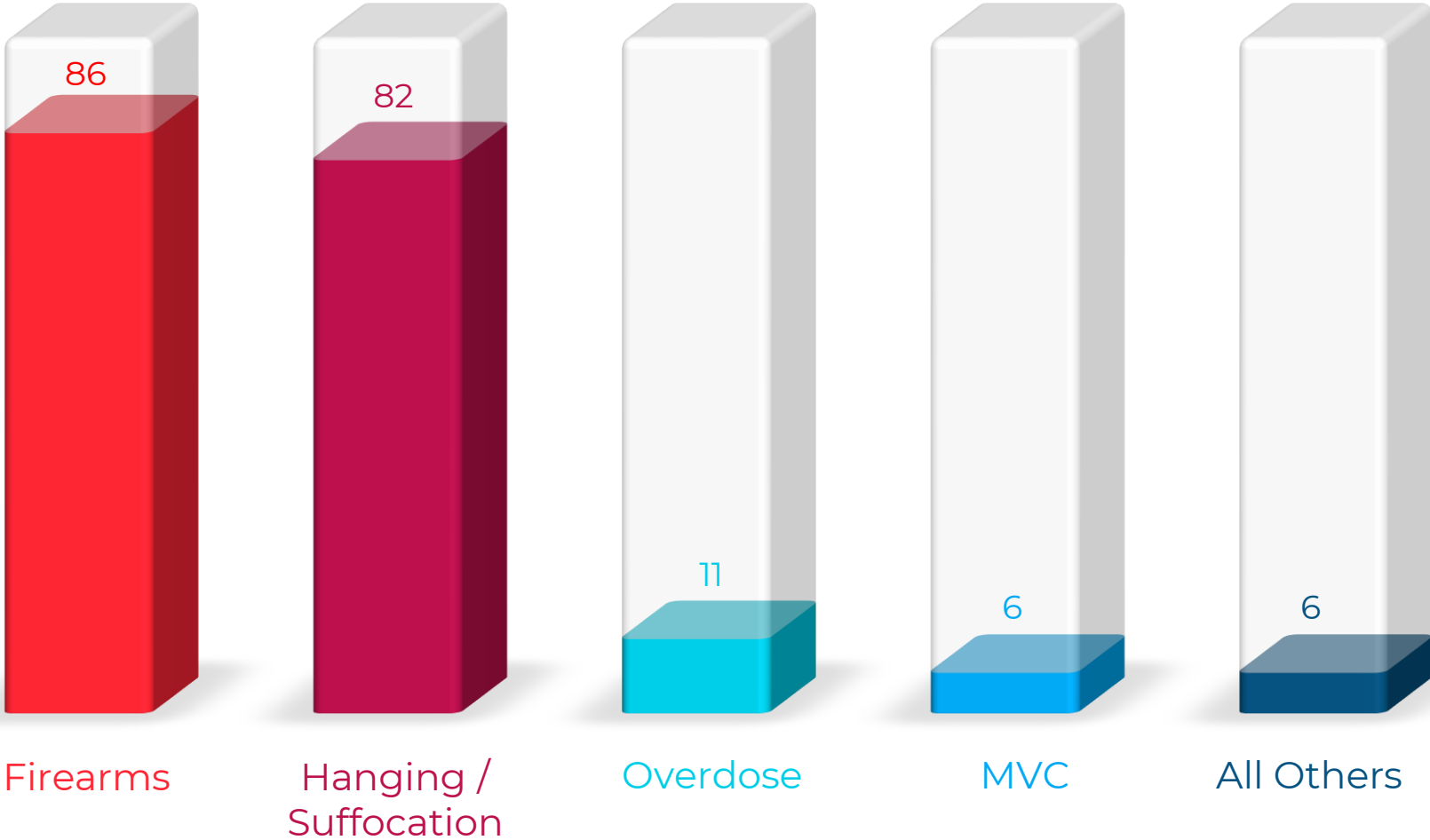


Suicide deaths per 100,000 8-17 year olds in Harris County 2008-2017

bit.ly/cftrreport

Causes of Death by Suicide

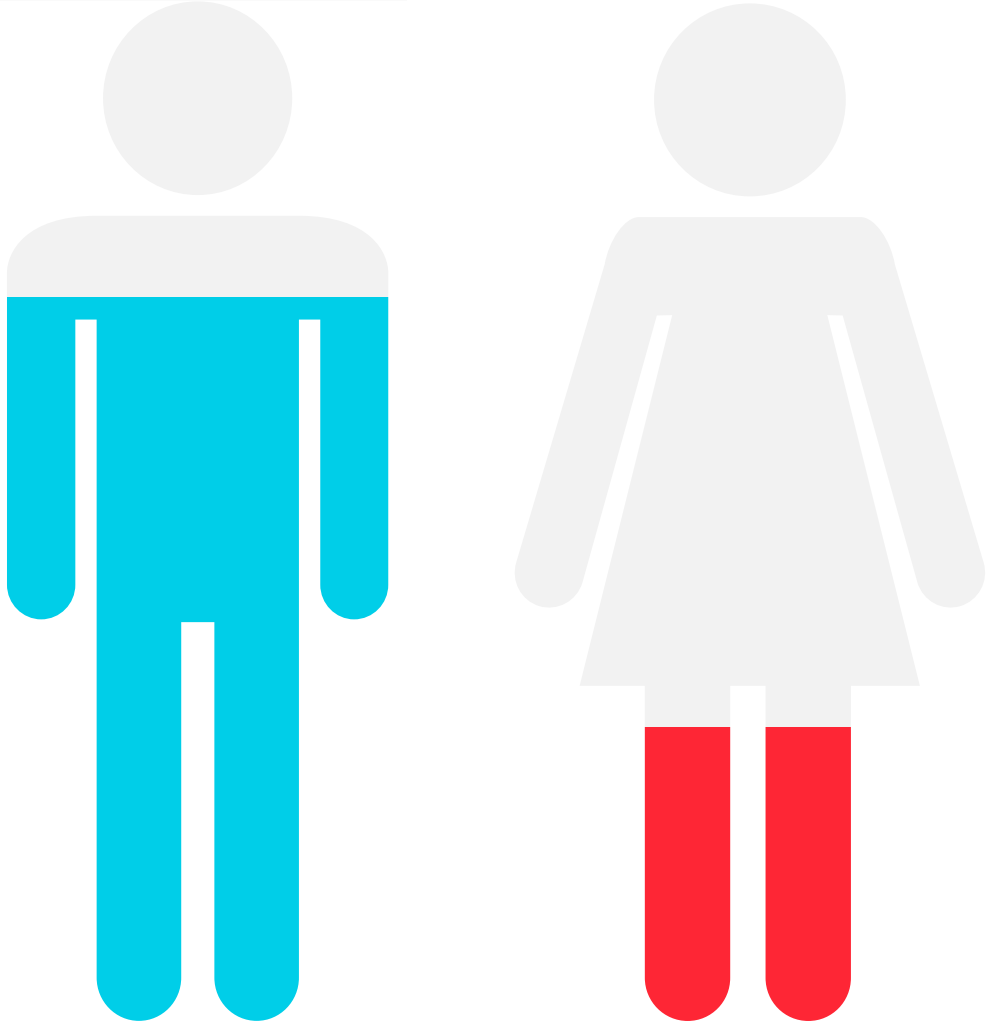
Number of suicide deaths by cause,
Children 8-17, Harris County, 2008-2017



Deaths by Suicide by Gender

Percentage of deaths by suicide by gender,
Children 8-17, Harris County, 2008-2017

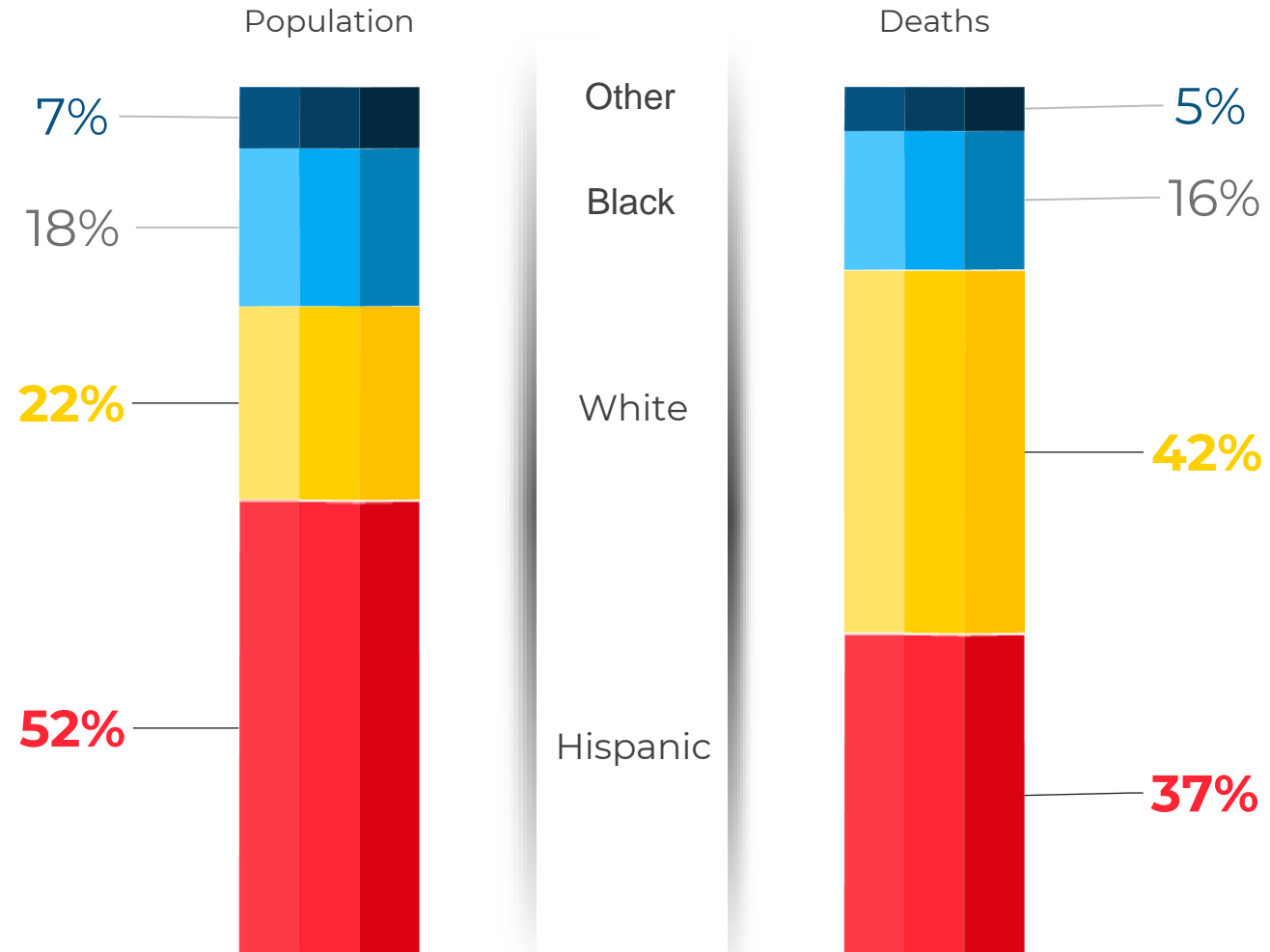
71%
MALE



29%
FEMALE

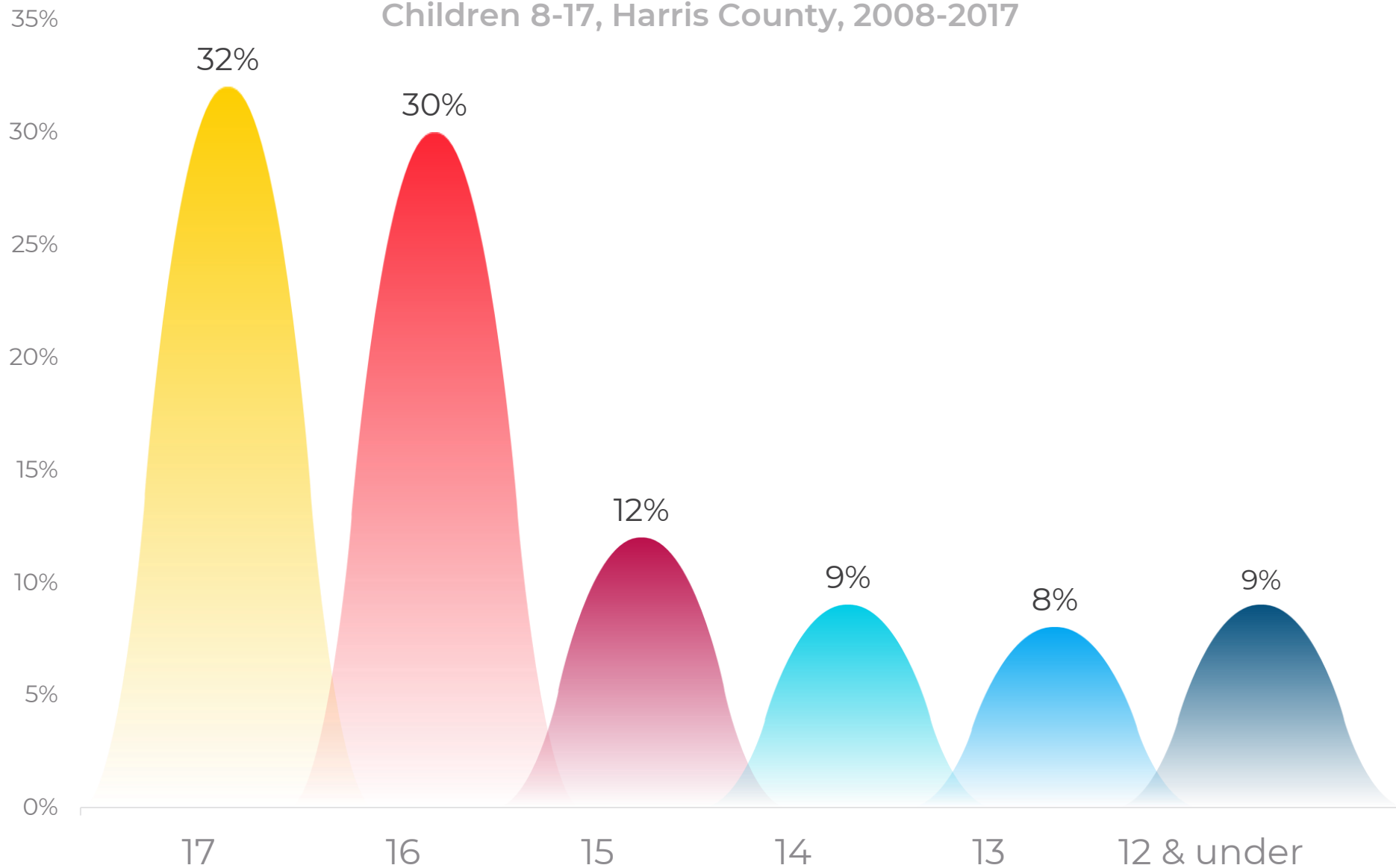
Suicide Deaths by Race

Percentage of population by race compared to percentage of suicide deaths by race, Children 8-17, Harris County, 2008-2017



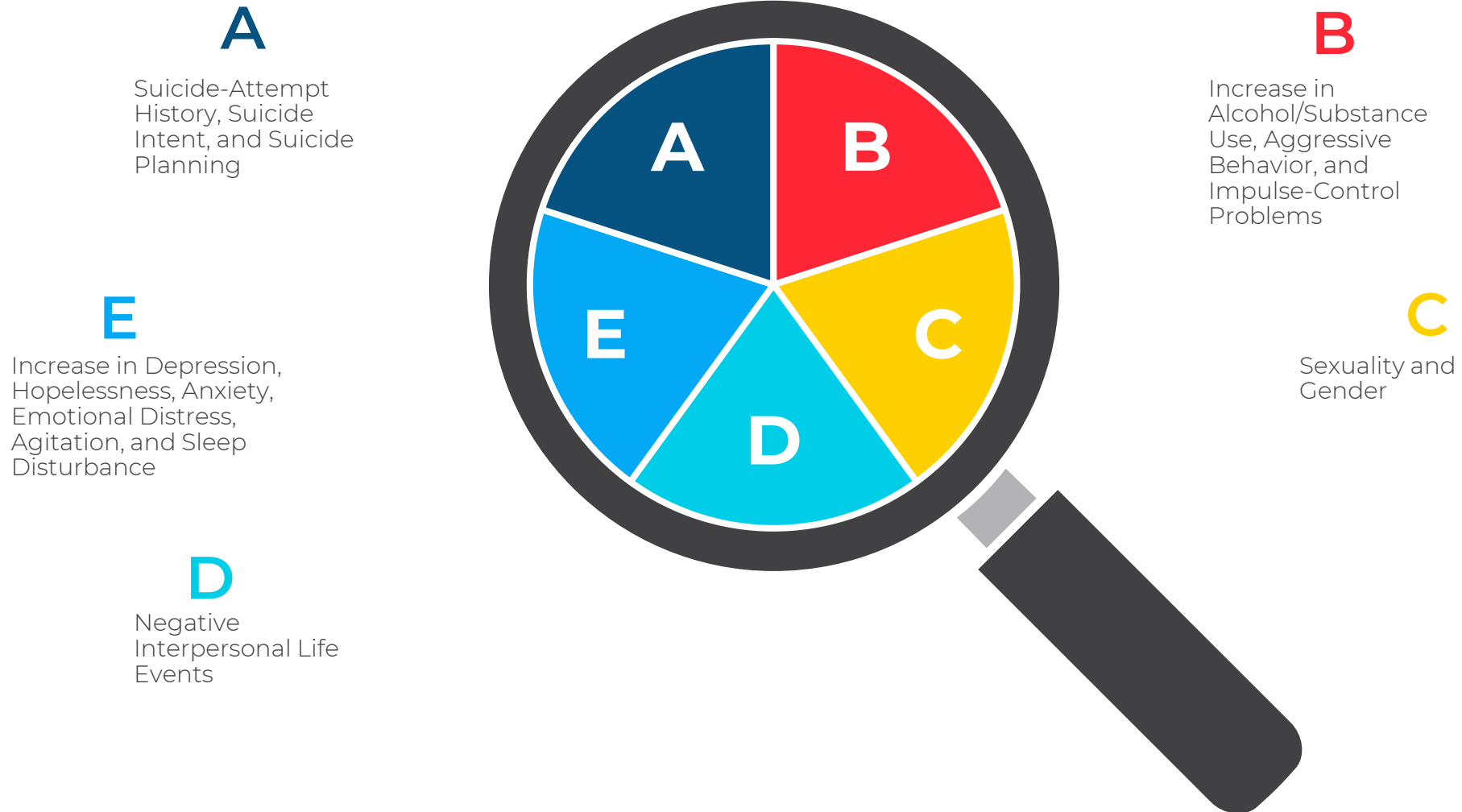
Suicide Deaths by Age

Percentage of deaths at each age,
Children 8-17, Harris County, 2008-2017



Suicide Prevention

Risk factors in youth suicide



Suicide Prevention

Protective factors in youth suicide



Low novelty seeking
and having high self-
esteem



Self-compassion or
feelings of kindness
toward one's
perceived
inadequacies



Connectedness

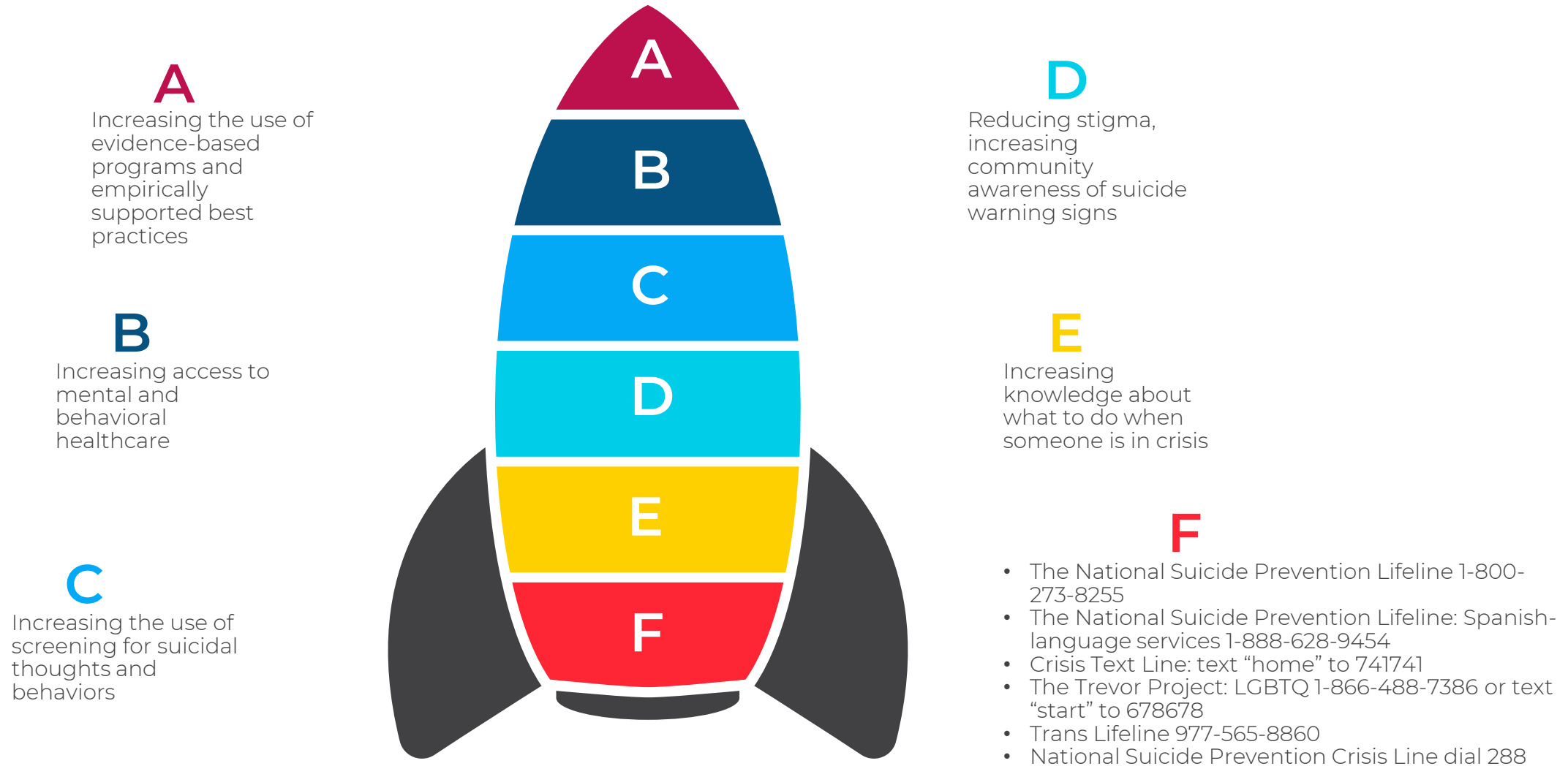


Ability to engage in
problem solving and
distraction



Suicide Prevention

Youth suicide prevention steps & resources

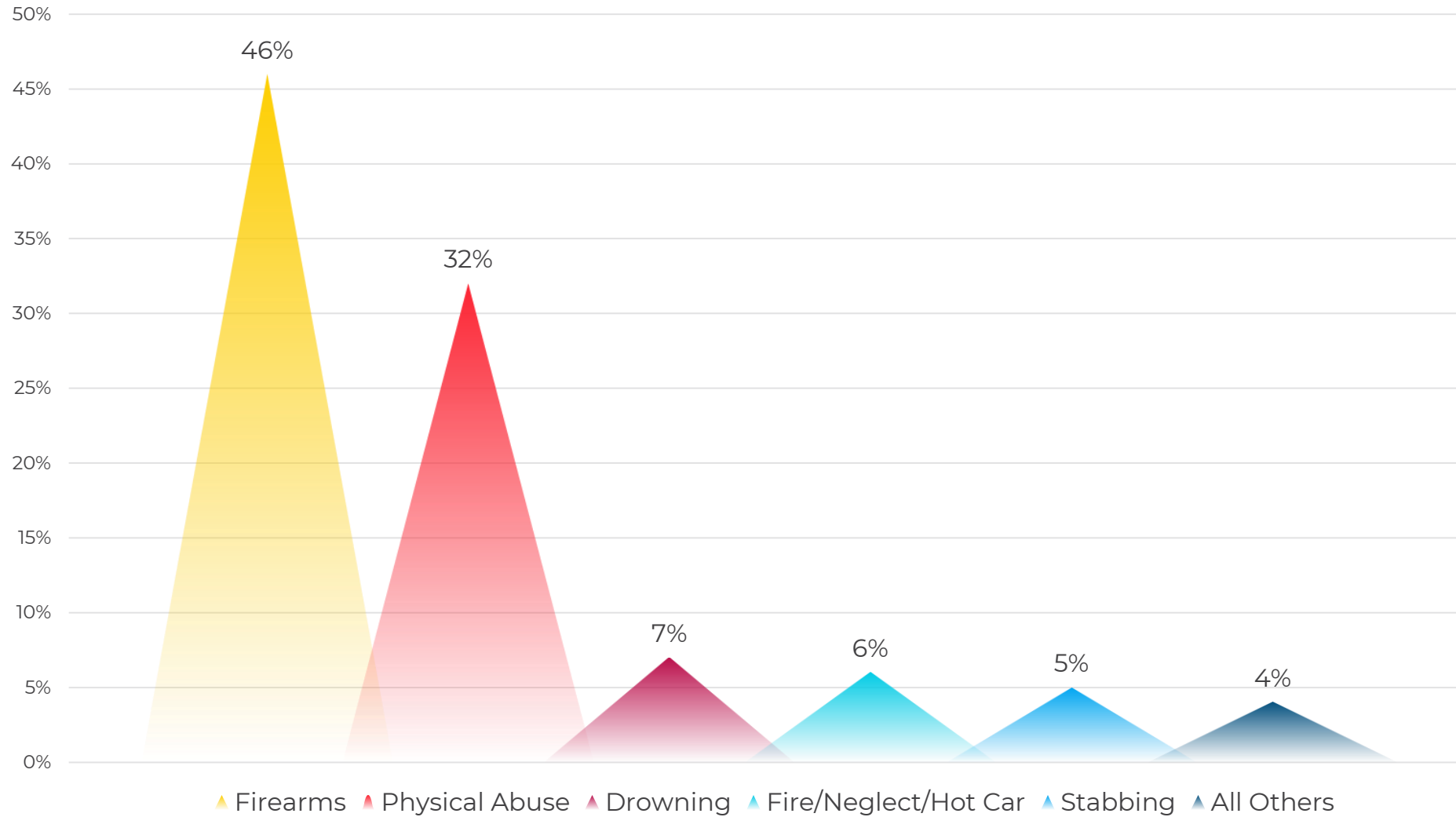




Homicide: Firearms & Child Abuse

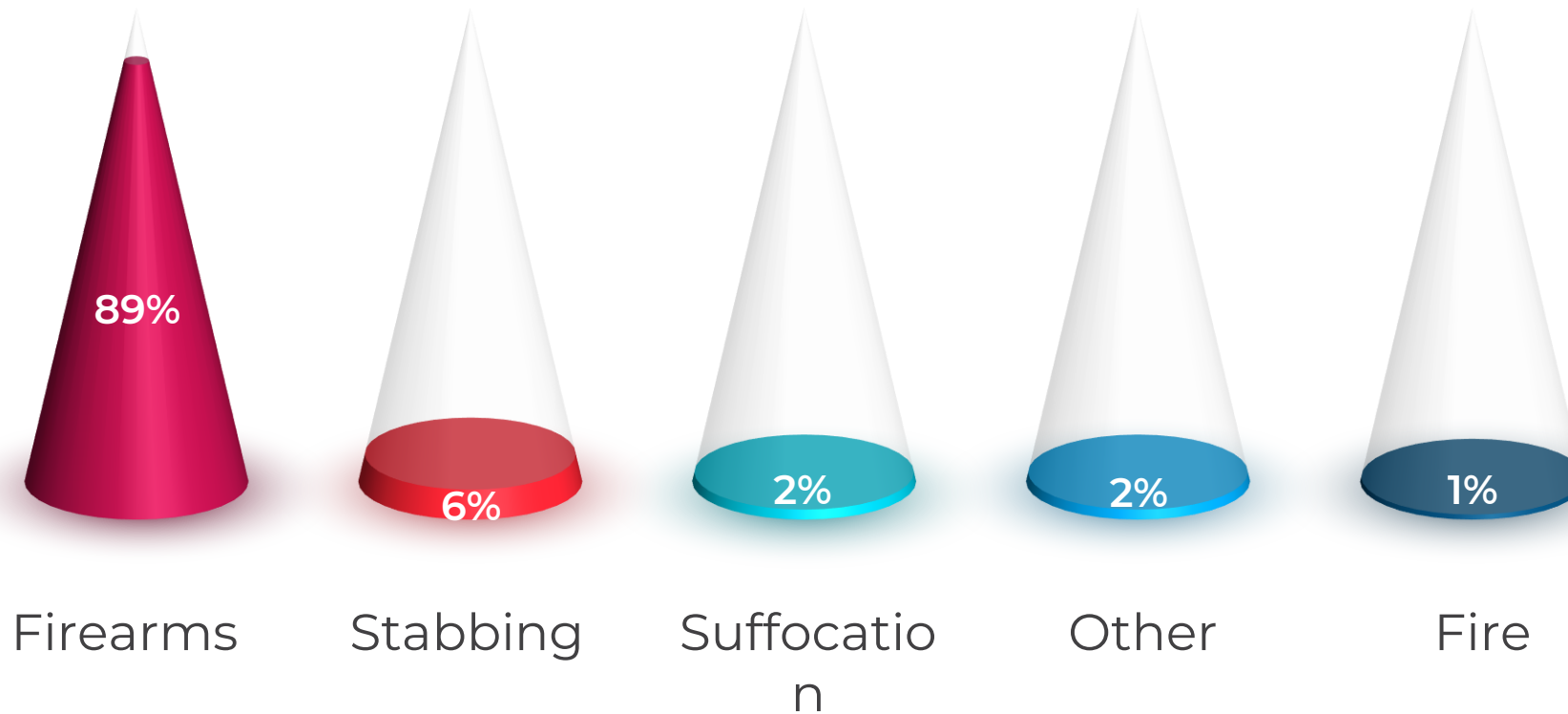
Causes of Death by Homicide

Percentage of homicide deaths by cause,
Children 0-17, Harris County, 2008-2017



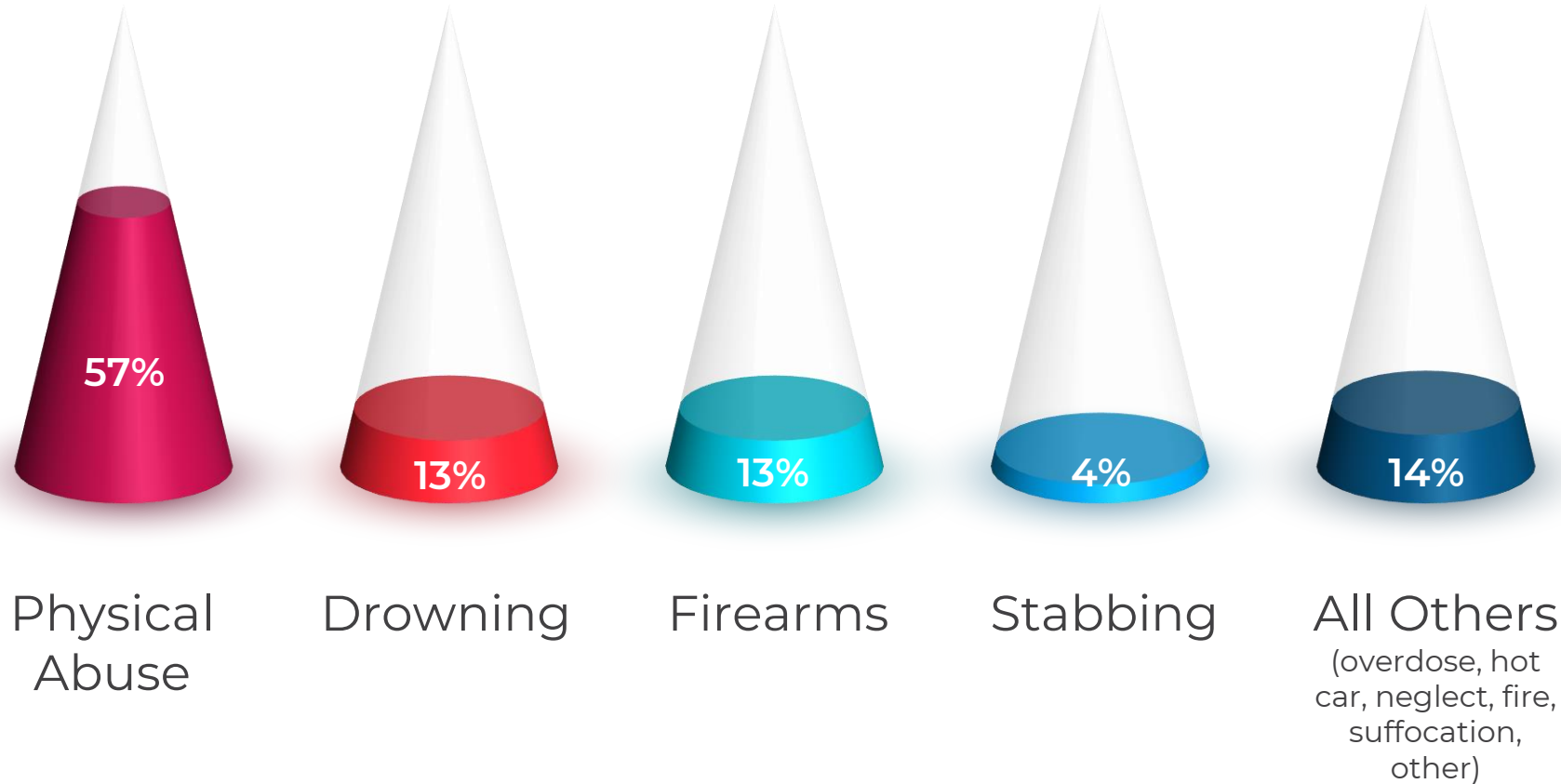
Community Violence Homicides

Causes of death in community violence homicides,
Children 0-17, Harris County, 2008-2017



Child Abuse Homicides

Causes of death in child abuse homicides,
Children 0-17, Harris County, 2008-2017





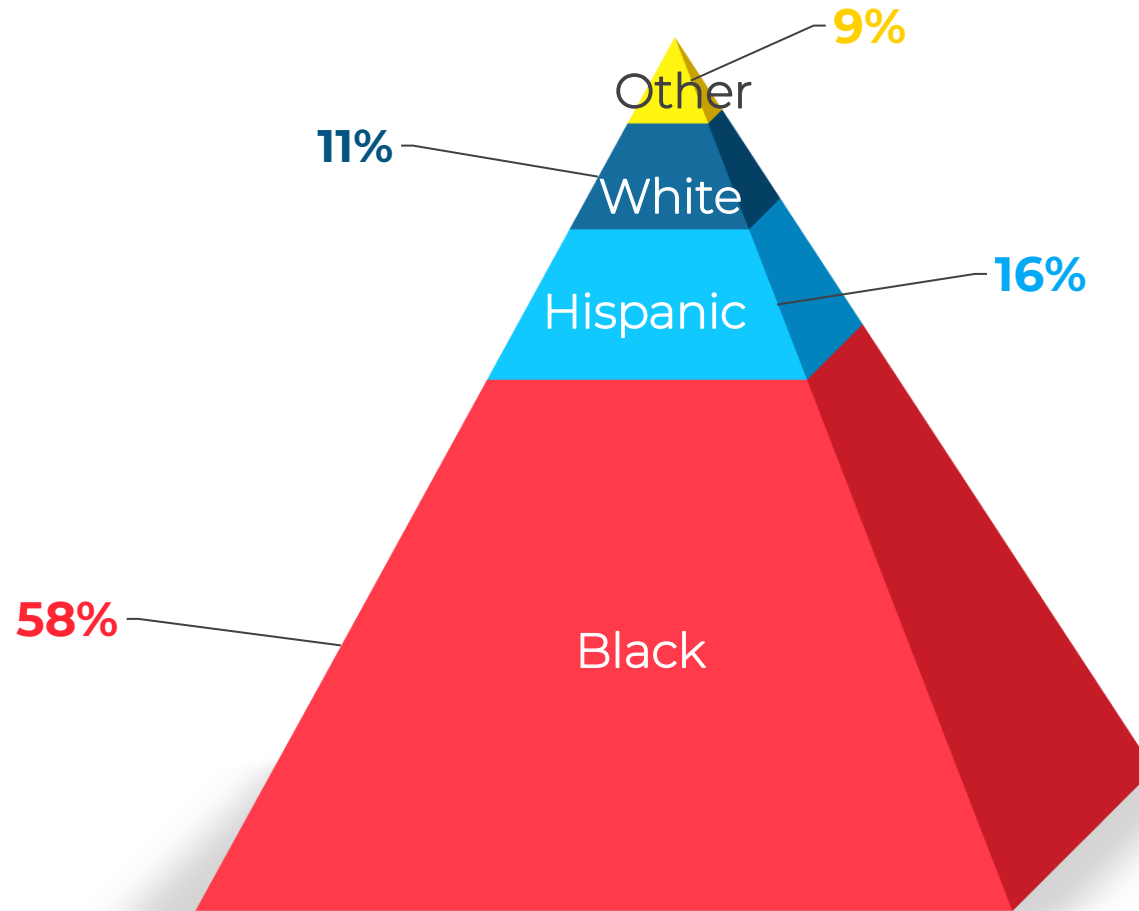
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Homicide: Firearms

Firearm Homicides by Race

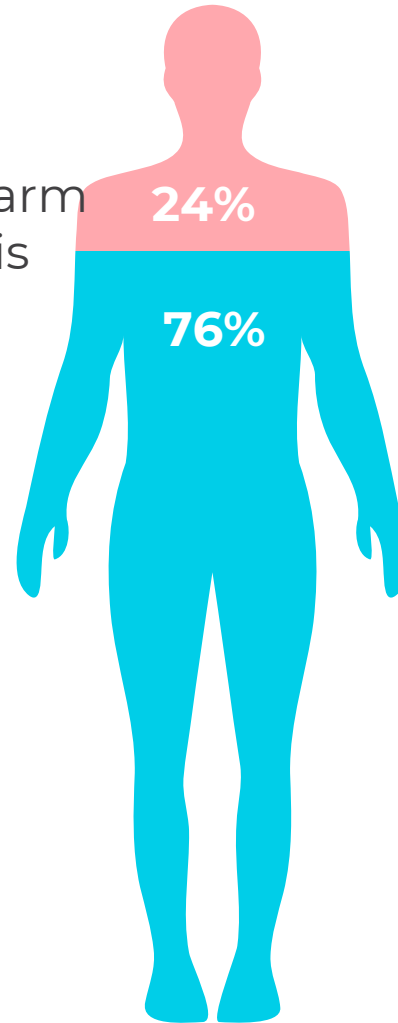
Percentage of firearm homicides by race,
Children 0-17, Harris County, 2008-2017



Firearm Homicides by Gender

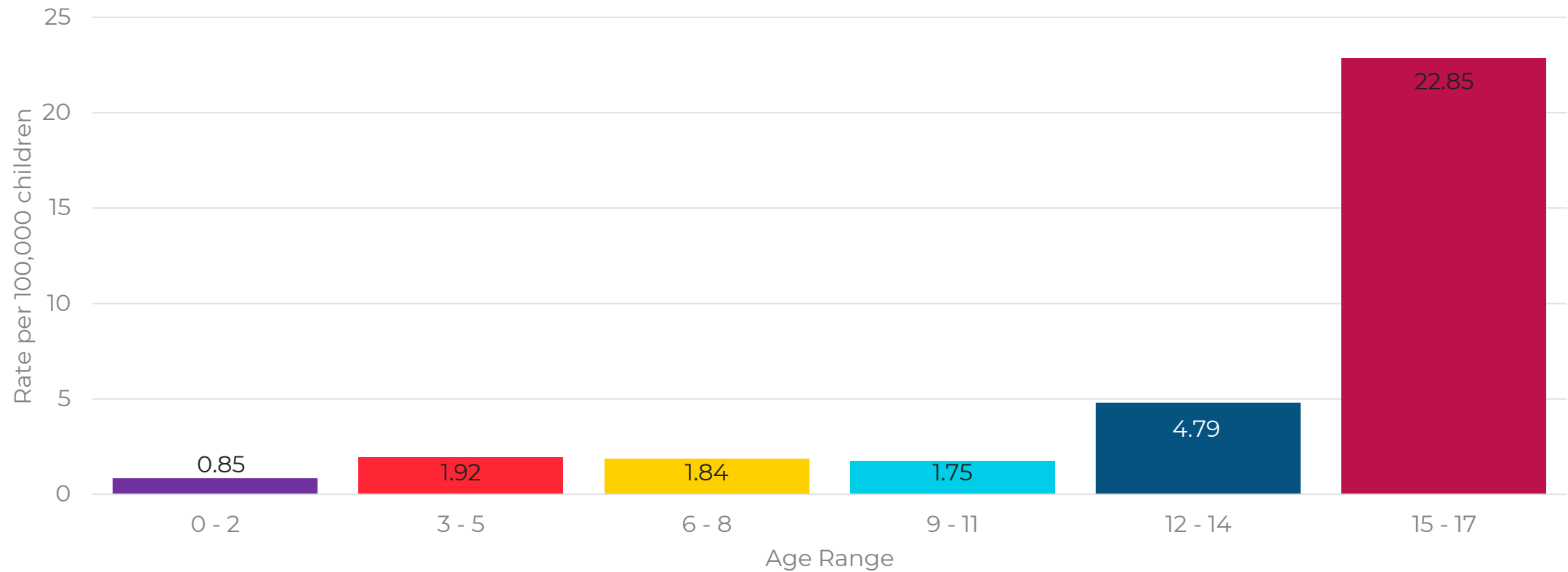
Percentage of firearm homicides by gender,
Children 0-17, Harris County, 2008-2017

3 out of every 4 child firearm
homicide victims in Harris
County were male



Firearm Homicides by Age Range

Rate per 100,000 children of firearm homicides by age range,
Children 0-17, Harris County, 2008-2017



Firearm Risk Factors

A

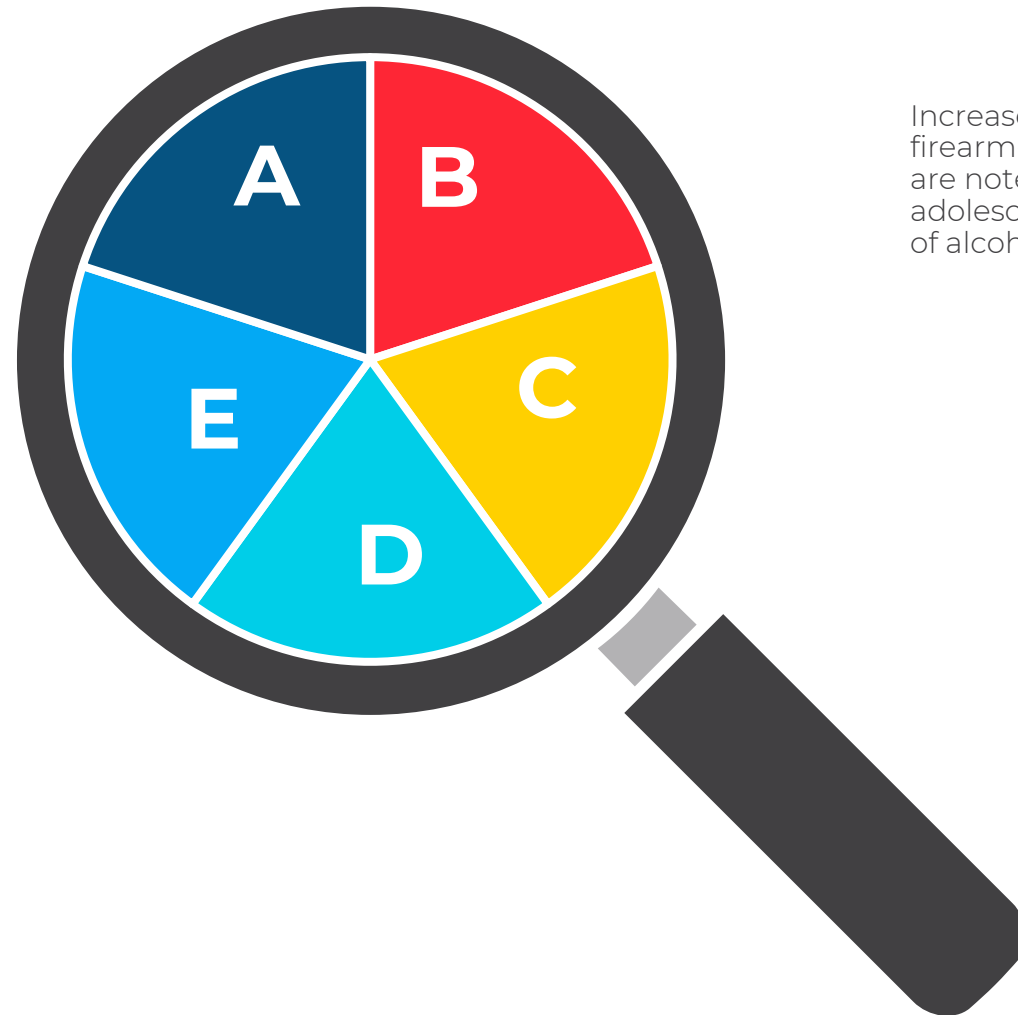
The common narrative that gun violence is linked to mental illness is not borne out in research

E

Most mass shootings occur in the home by a family member as part of escalated intimate partner violence in a murder-suicide situation

D

Increased levels of gun ownership in an area is correlated with higher homicide rates and firearm homicide rates



B

Increased odds of firearm-related homicides are noted among adolescents with a history of alcohol or drug use

C

The child mortality rates in urban areas are much higher than rural areas, likely due to increased density and therefore increased access to firearms



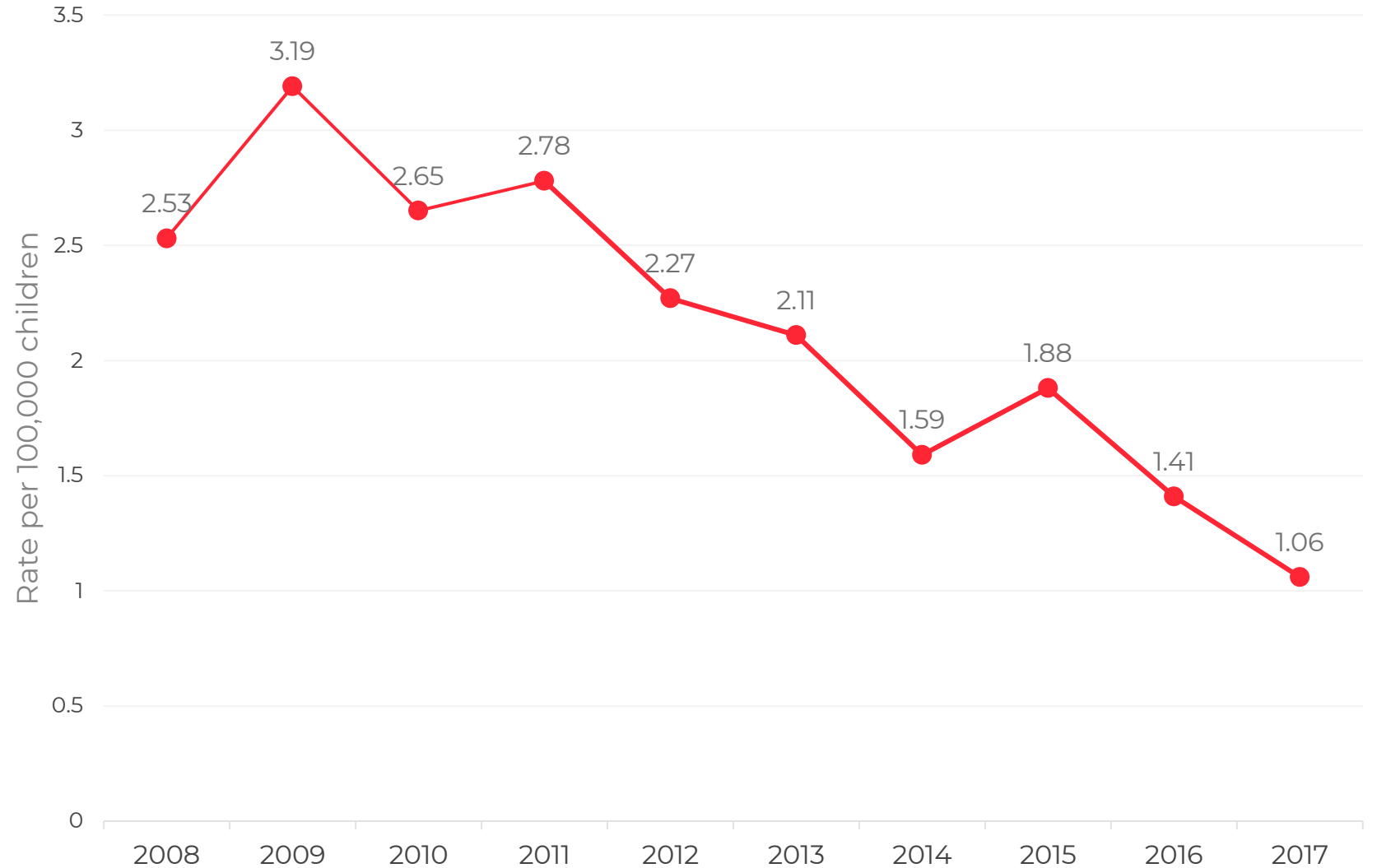
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Homicide: Child Abuse

Child Abuse Homicides

Rate of child abuse homicides per 100,000 children,
Children 0-17, Harris County, 2008-2017



There has been a 58% decrease in child abuse fatalities in Harris County over the last decade

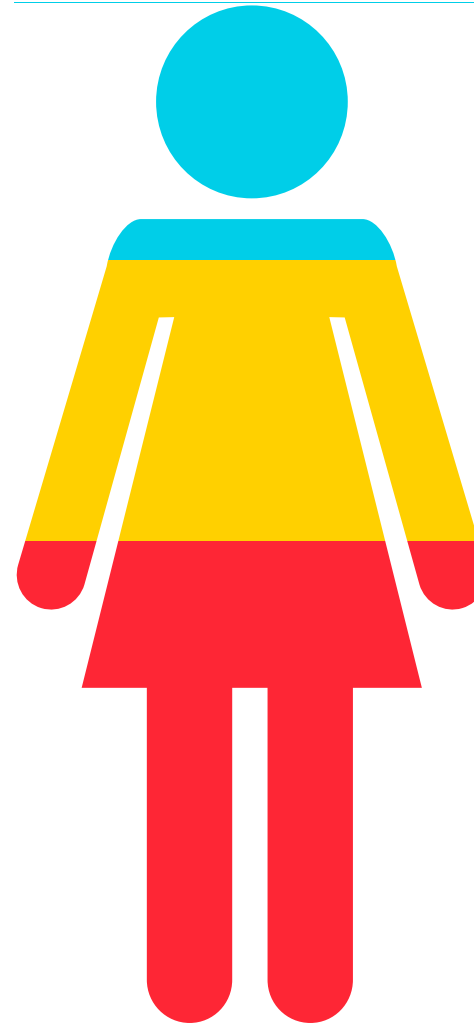
Rate of Child Abuse by Race

Rate per 100,000 children of child abuse homicides by race,
Children 0-17, Harris County, 2008-2017

5.1
Black



1.1
Other



1.2
Hispanic

2.1
White

Resources

A

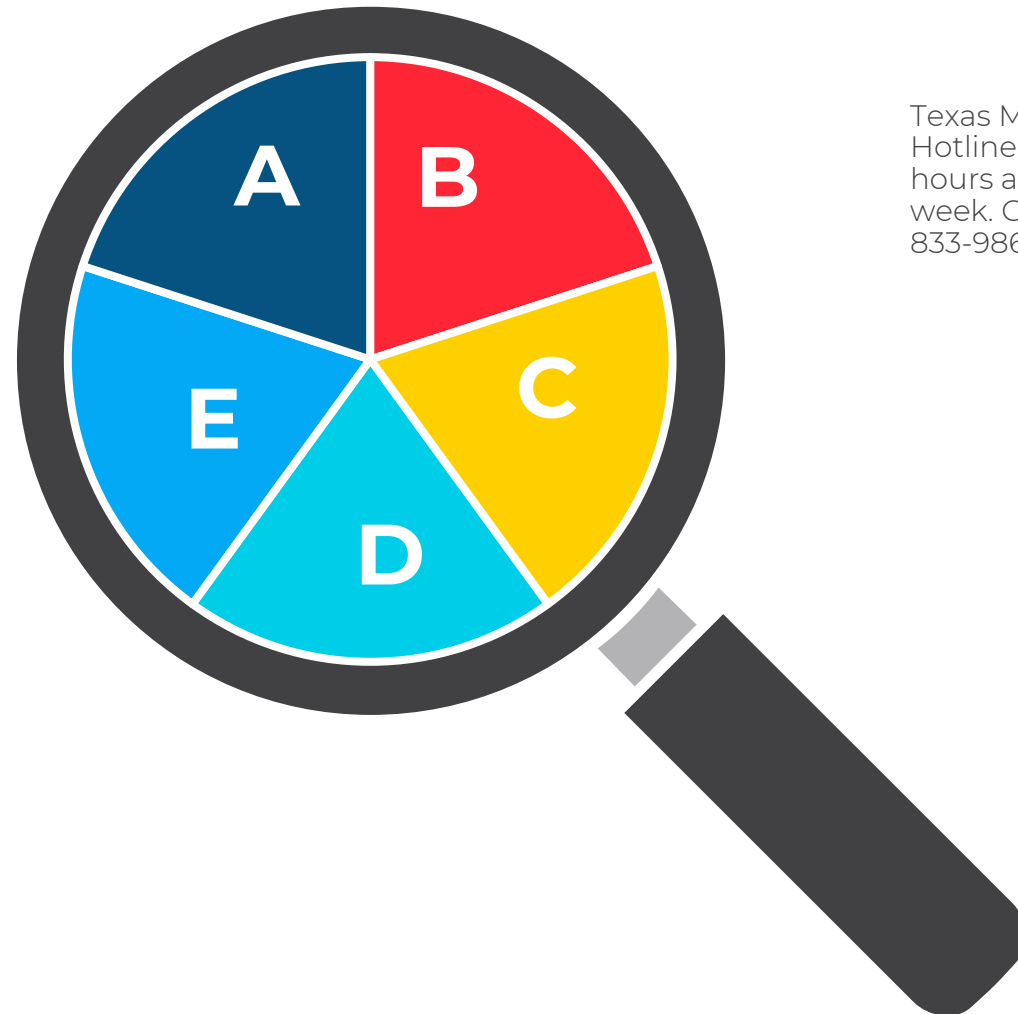
National Domestic Violence Hotline: 24 hours a day, call toll-free 1-800-799-7233

E

National Parent Helpline: Emotional support from a trained parent advocate. Call toll-free 1-855-427-2736

D

Texas Abuse Hotline: Report suspected child maltreatment and neglect. Call toll-free 1-800-252-5400



B

Texas Mental Health Hotline: open 24 hours a day, 7 days a week. Call toll-free at 833-986-1919.

C

Texas Association Against Sexual Assault: Information about rape crisis centers and online resources

<https://taasa.org/resources/>



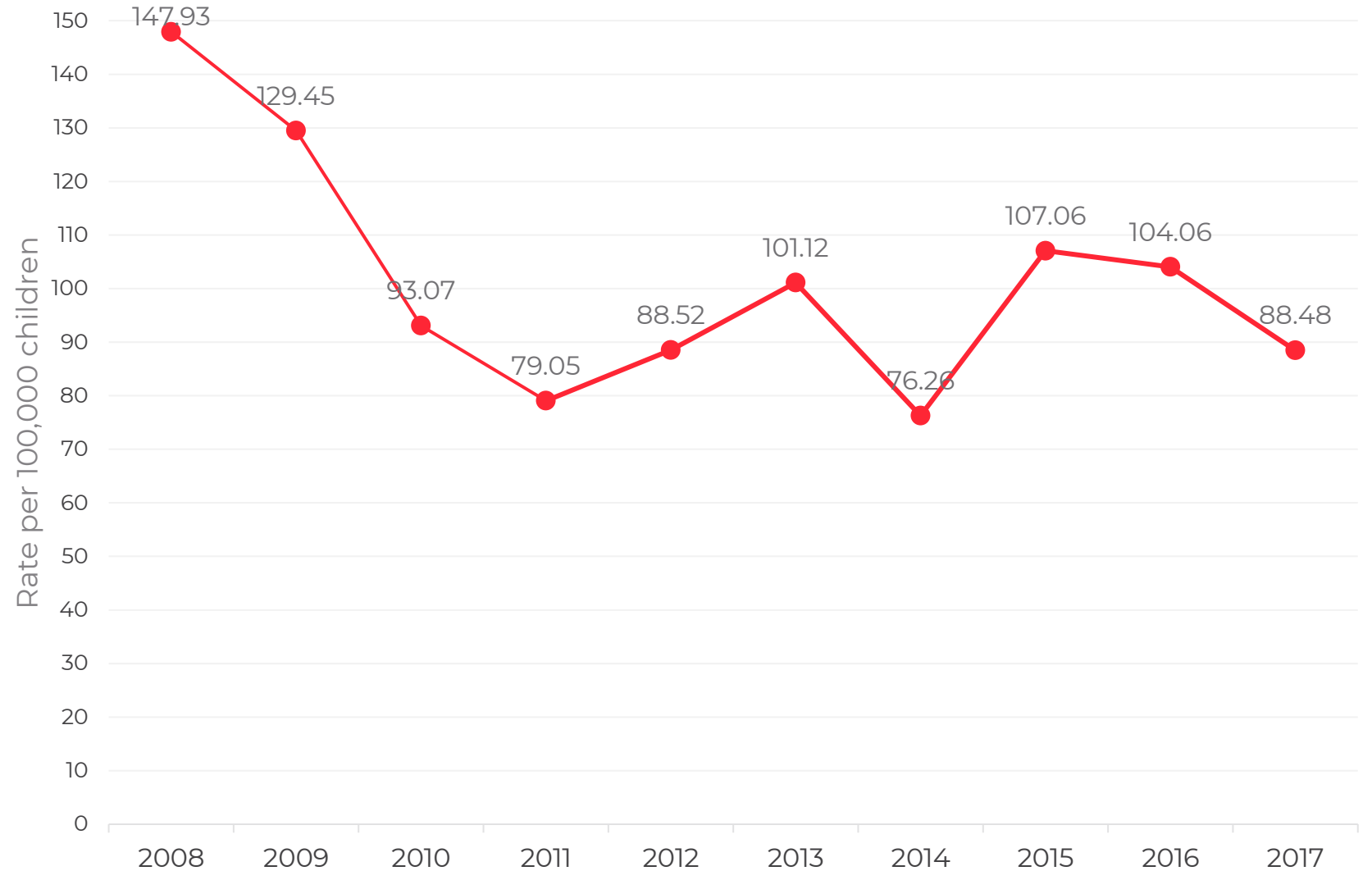
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Infant Sleep Related Deaths

Infant Sleep Related Deaths

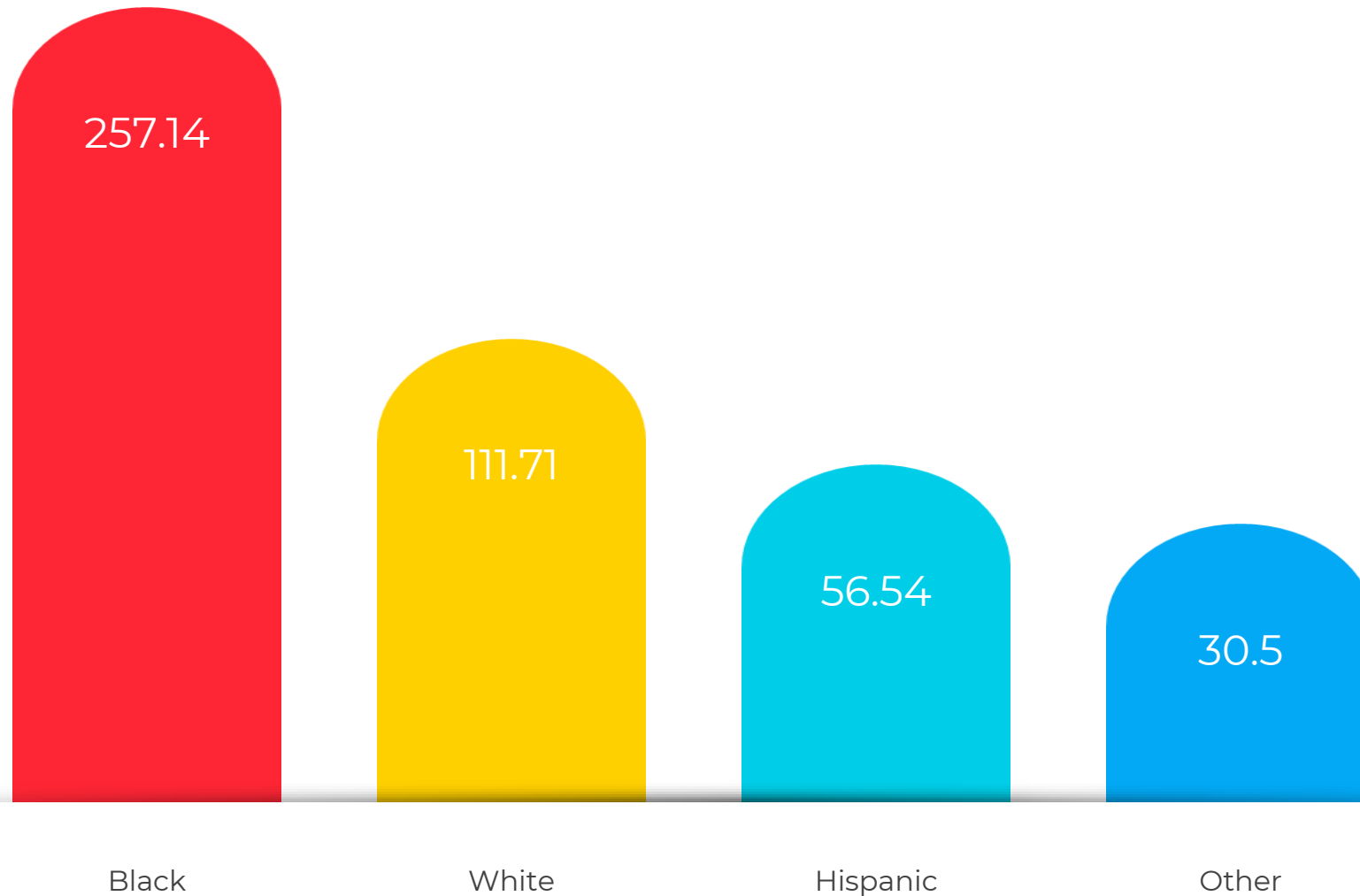
Rate of infant sleep related deaths per 100,000 live births, Infants under 12 months, Harris County, 2008-2017



Attributed in large part to safe sleep campaigns, Harris County has seen a 40% decrease in infant sleep-related deaths from 2008 to 2017

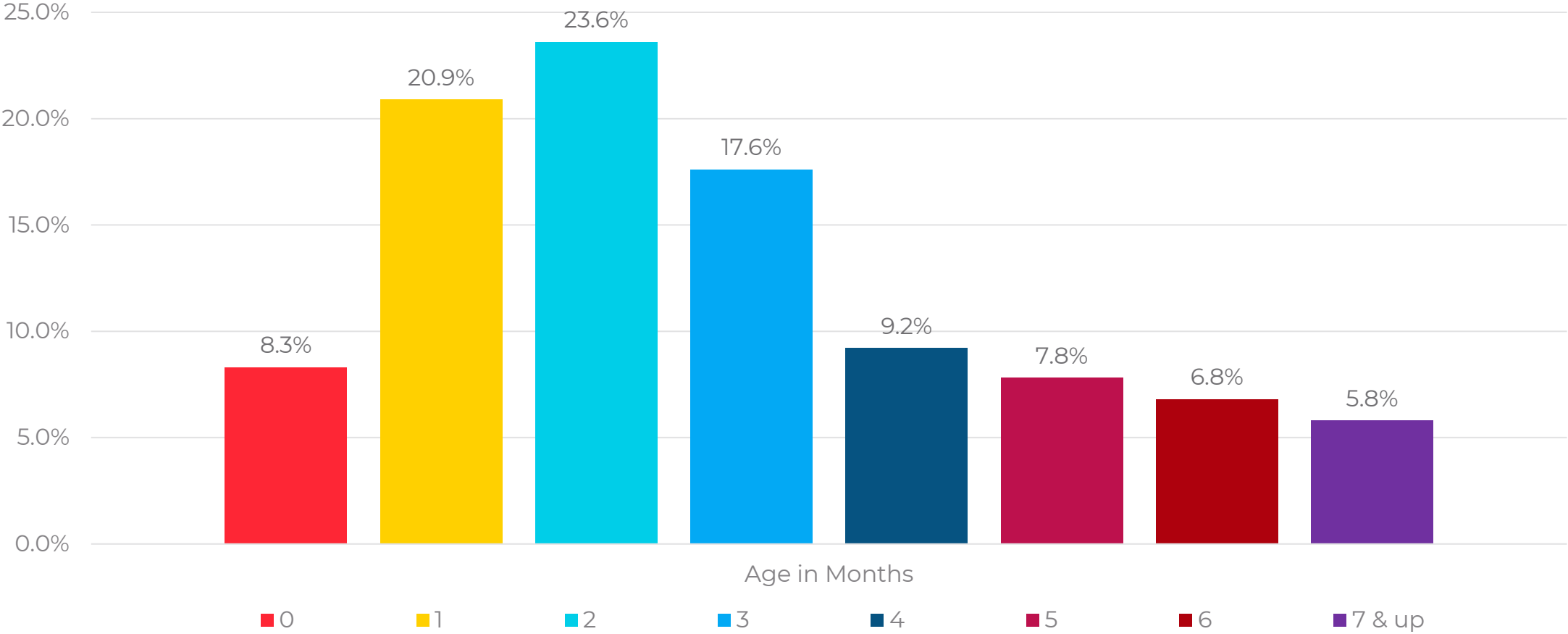
Infant Sleep Deaths by Race

Rate of infant sleep deaths by race per 100,000 live births, Infants under 12 months, Harris County, 2008-2017



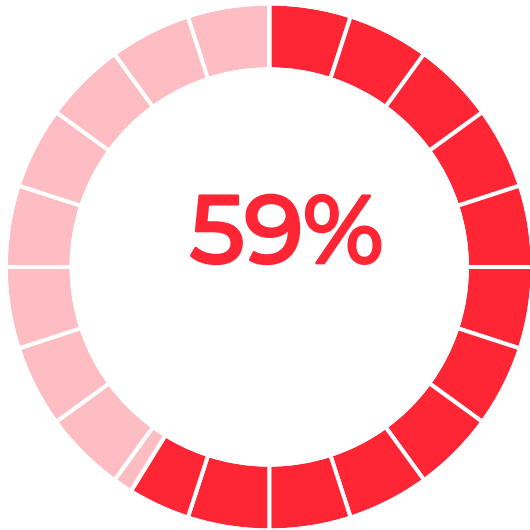
Infant Sleep Deaths by Age

Percentage of infant sleep related deaths by age in months, Infants under 12 months, Harris County, 2008-2017

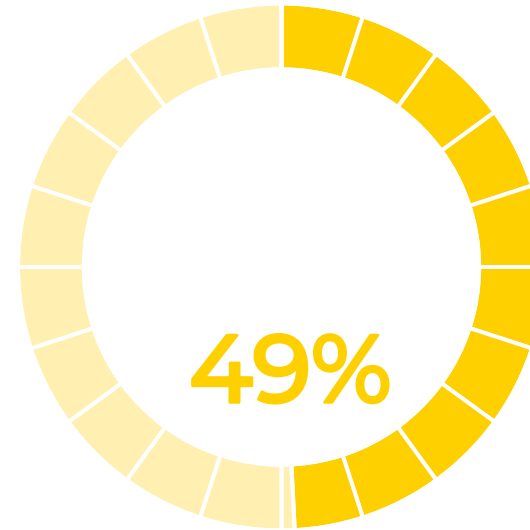


Infant Sleep Related Deaths by Gender & Environment

Percentage of infant sleep related deaths by gender and by sleeping environment, Infants under 12 months, Harris County, 2008-2017



More males are impacted by sleep related deaths than females



About half of sleep related deaths happen while co-sleeping/bed-sharing and the others in unsafe sleep environments like adult beds or with blankets

Infant Sleep Related Death Prevention Tips from the AAP

SIDS and Other Sleep-Related Infant Deaths: Updated 2016

1. Back to sleep for every sleep.
2. Use a firm sleep surface.
3. Breastfeeding is recommended.
4. It is recommended that infants sleep in the parents' room, close to the parents' bed, but on a separate surface designed for infants, ideally for the first year of life, but at least for the first 6 months.
5. Keep soft objects and loose bedding away from the infant's sleep area to reduce the risk of SIDS, suffocation, entrapment, and strangulation.
6. Consider offering a pacifier at nap time and bedtime.
7. Avoid smoke exposure during pregnancy and after birth.
8. Avoid alcohol and illicit drug use during pregnancy and after birth.
9. Avoid overheating and head covering in infants.
10. Pregnant women should obtain regular prenatal care.

11. Infants should be immunized in accordance with recommendations of the AAP and Centers for Disease Control and Prevention.
12. Avoid the use of commercial devices that are inconsistent with safe sleep recommendations.
13. Do not use home cardiorespiratory monitors as a strategy to reduce the risk of SIDS.
14. Supervised, awake tummy time is recommended to facilitate development and to minimize development of positional plagiocephaly.
15. There is no evidence to recommend swaddling as a strategy to reduce the risk of SIDS.
16. Health care professionals, staff in newborn nurseries and neonatal intensive care units, and child care providers should endorse and model the SIDS risk-reduction recommendations from birth.
17. Media and manufacturers should follow safe sleep guidelines in their messaging and advertising.
18. Continue the "Safe to Sleep" campaign, focusing on ways to reduce the risk of all sleep-related infant deaths, including SIDS, suffocation, and other unintentional deaths. Pediatricians and other primary care providers should actively participate in this campaign.
19. Continue research and surveillance on the risk factors, causes, and pathophysiologic mechanisms of SIDS and other sleep-related infant deaths, with the ultimate goal of eliminating these deaths altogether.



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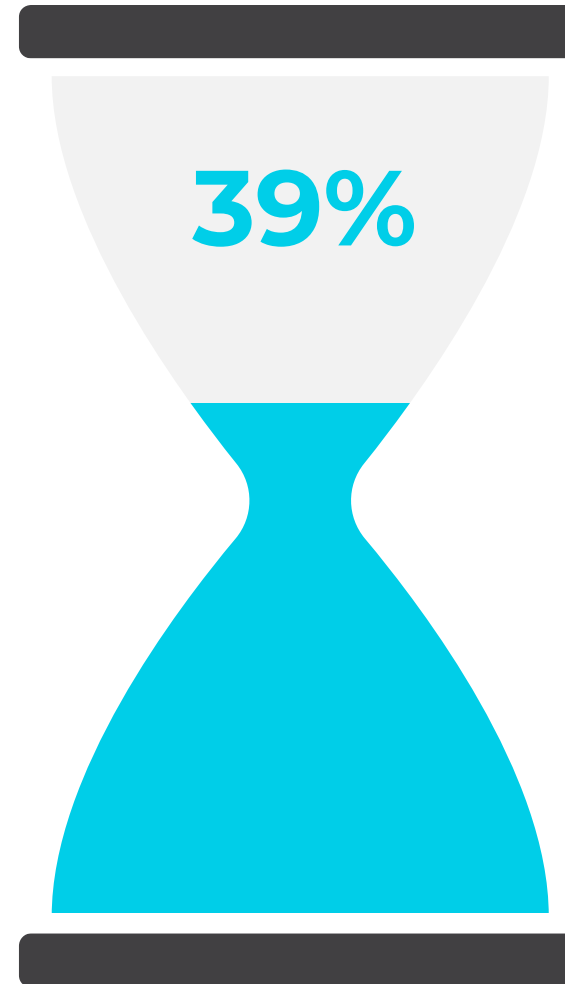
Motor Vehicle Collisions

Motor Vehicle Collisions

Decrease in overall rate from 2008 to 2017,
Children 0-17, Harris County

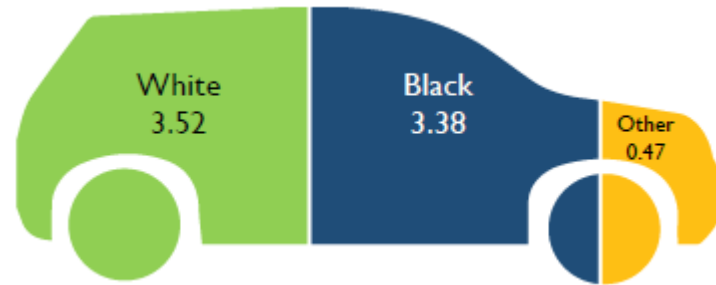
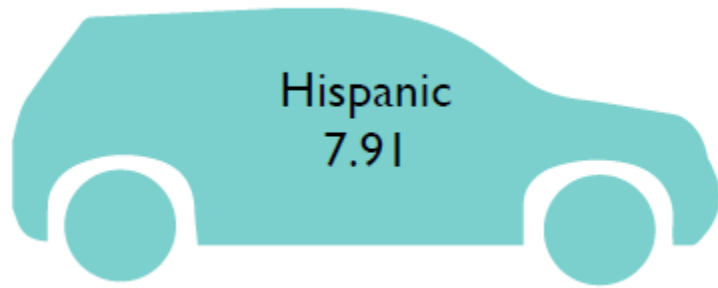
Decrease in MVCs

Child fatality rates from motor vehicle collisions
decreased 39% from 2008-2017



Motor Vehicle Collisions

Rates of motor vehicle collisions by race per 100,000 children,
Children 0-17, Harris County, 2008-2017

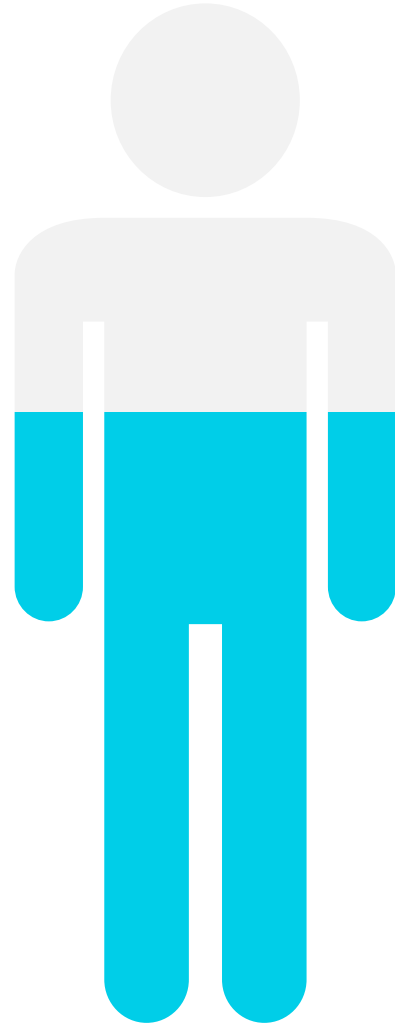


“Hispanic children are twice as likely to die from an motor vehicle collision than any other race/ethnicity.”

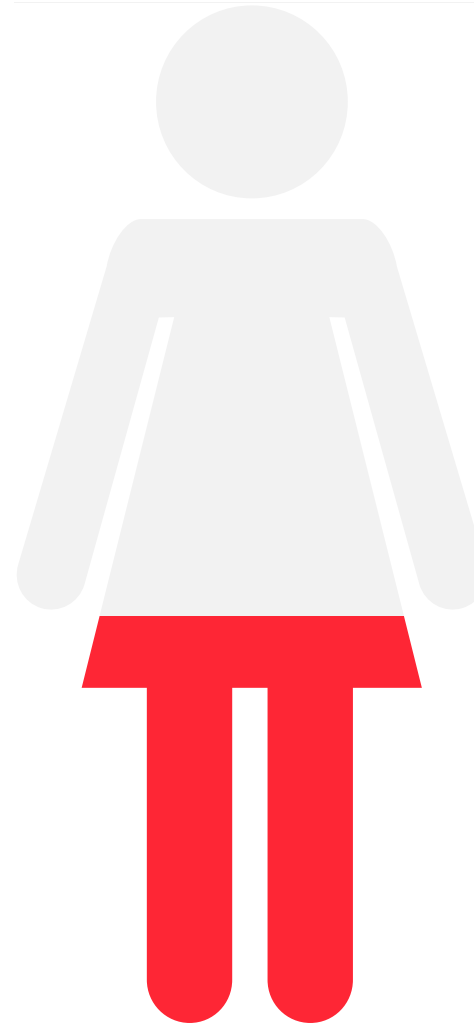
Motor Vehicle Collisions by Gender

Percentage of motor vehicle collision deaths by gender,
Children 0-17, Harris County, 2008-2017

60%
MALE

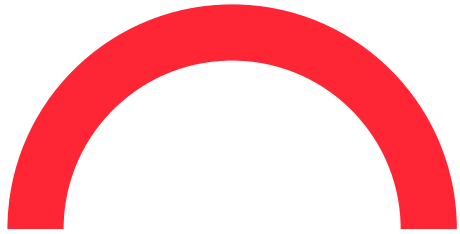


40%
FEMALE

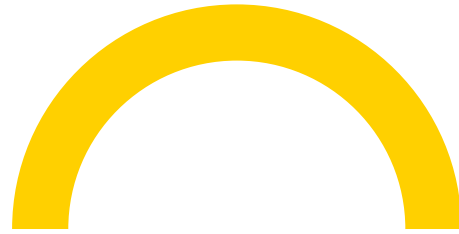


Motor Vehicle Collision

Prevention Resources



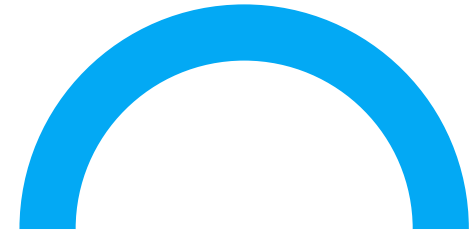
Vision Zero Network:
<https://visionzeronetwork.org/>



Texas Department of Transportation
Traffic Safety Division:
<https://www.txdot.gov/inside-txdot/division/traffic.html>



Texas Department of
State Health Services
Safe Riders Traffic Safety
Program:
<https://www.dshs.state.tx.us/saferiders/>



Safe Kids Greater
Houston Child Passenger
Safety:
<https://www.safekidsgreaterhouston.org/child-passenger-safety>



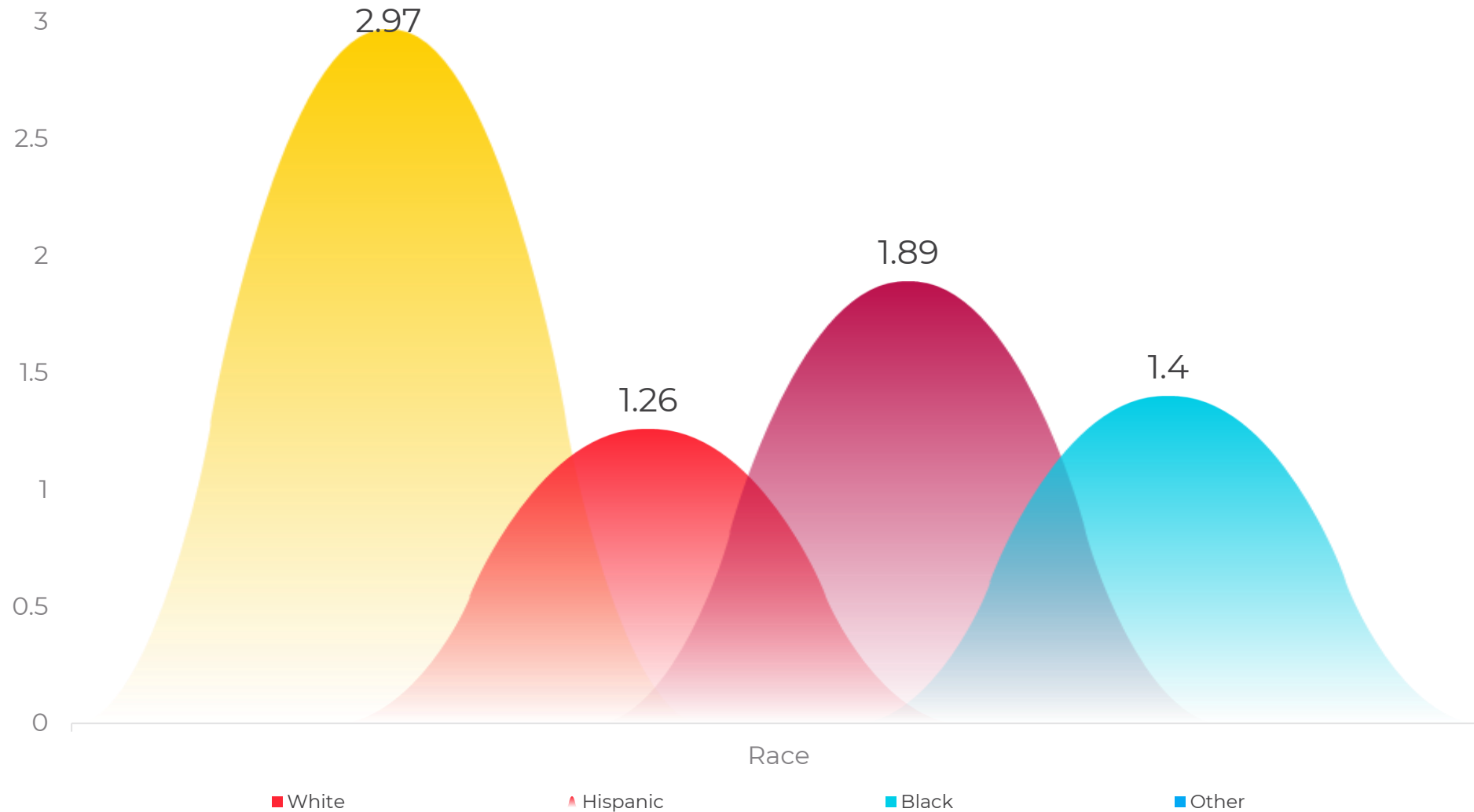
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Drowning

Drowning Deaths by Race

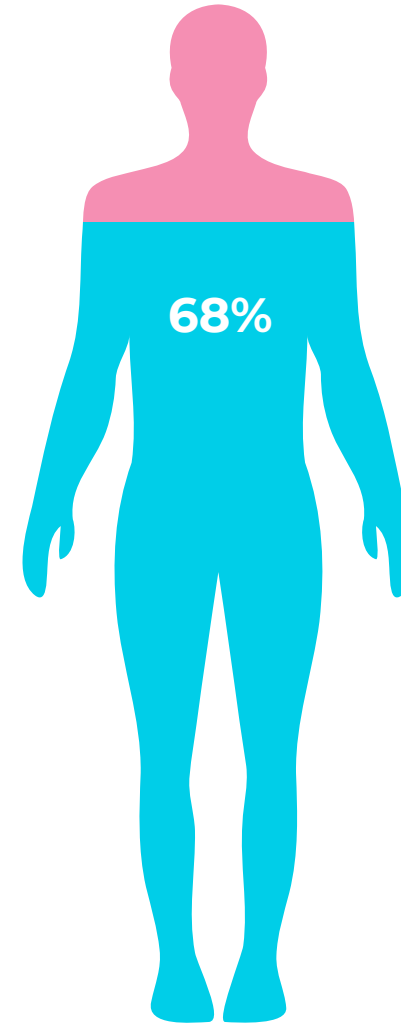
Rate of drowning deaths by race per 100,000,
Children 0-17, Harris County, 2008-2017



Drowning Deaths by Month and Gender

Most common months for drowning deaths and percentage of deaths by gender,
Children 0-17, Harris County, 2008-2017

“77.4% of all
drownings happen
between April
and September.”



68% of child
deaths by
drowning are
males

Drowning Prevention & Resources

THE CDC PROVIDES KEY PREVENTION TIPS FOR PARENTS AND CAREGIVERS⁹⁴:

- **Learn life-saving skills.**
Everyone should know the basics of swimming (floating, moving through the water) and cardiopulmonary resuscitation (CPR).
- **Fence it off.**
Install a four-sided isolation fence, with self-closing and self-latching gates, around backyard swimming pools. This can help keep children away from the area when they aren't supposed to be swimming. Pool fences should completely separate the house and play area from the pool.
- **Make life jackets a must.**
Make sure kids wear life jackets in and around natural bodies of water, such as lakes or the ocean, even if they know how to swim. Life jackets can be used in and around pools for weaker swimmers, too.
- **Be on the lookout.**
When kids are in or near water (including bathtubs), closely supervise them at all times. Because drowning happens quickly and quietly, adults watching kids in or near water should avoid distracting activities like playing cards, reading books, talking on the phone, and using alcohol or drugs.

National Drowning Prevention Alliance
<https://ndpa.org/>

Texas Drowning Prevention Alliance
<http://www.txdpa.com/>

Safe Kids Greater Houston:
<https://safekidsgreaterhouston.org/water-safety>

American Academy of Pediatrics:
Drowning prevention

For parents: Drowning Prevention for Curious Toddlers: What Parents Need to Know
<https://www.healthychildren.org/English/safety-prevention/at-play/Pages/Water-Safety-And-Young-Children.aspx>

For pediatricians: Drowning Prevention Toolkit <https://www.aap.org/en-us/about-the-aap/aap-press-room/campaigns/drowning-prevention/Pages/default.aspx>

Texas Drowning Prevention Alliance
<http://www.txdpa.com/>

Safe Kids Greater Houston:
<https://safekidsgreaterhouston.org/water-safety>



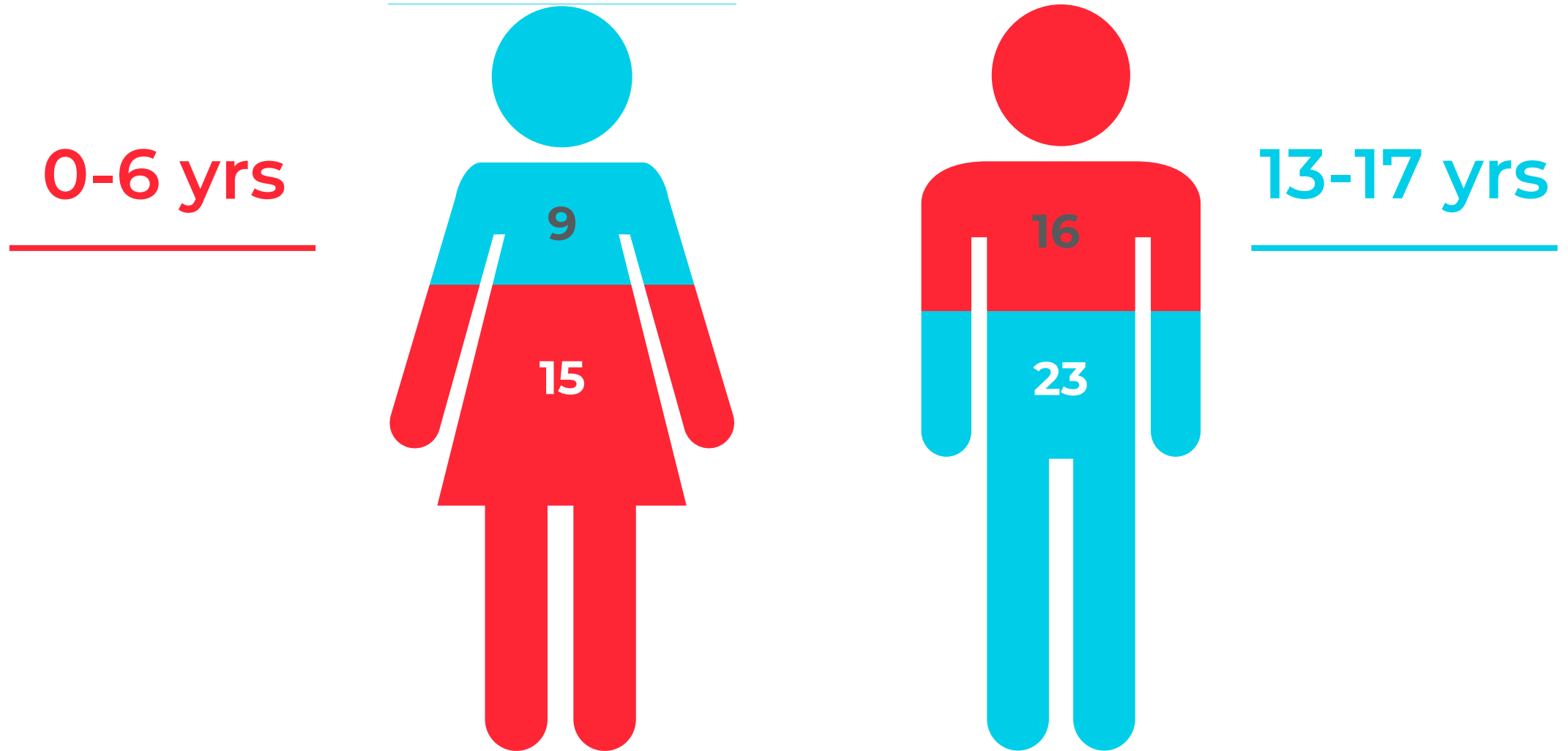
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Overdose

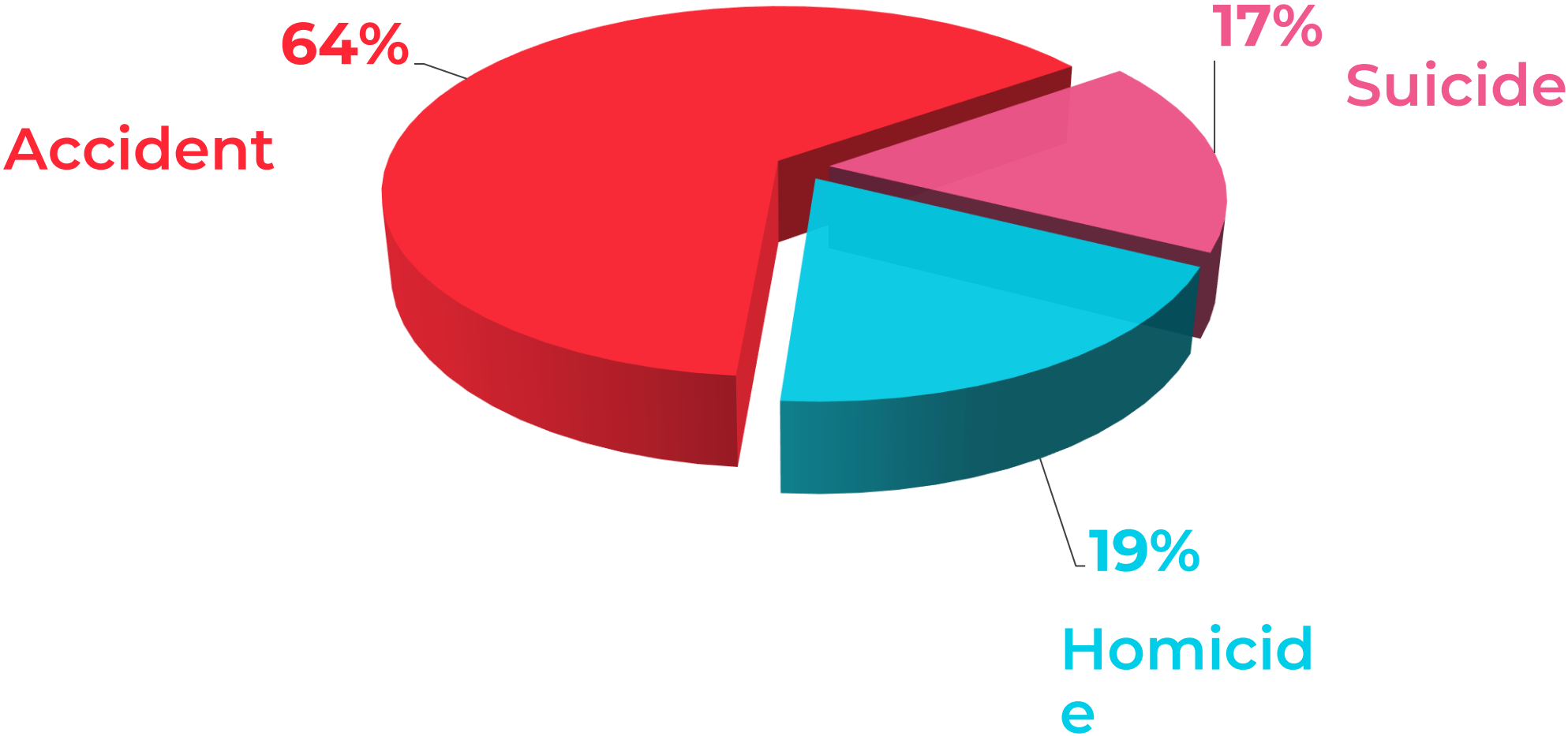
Overdose Death by Age & Gender

Number of deaths by gender in each age group,
Children 0-17, Harris County, 2008-2017



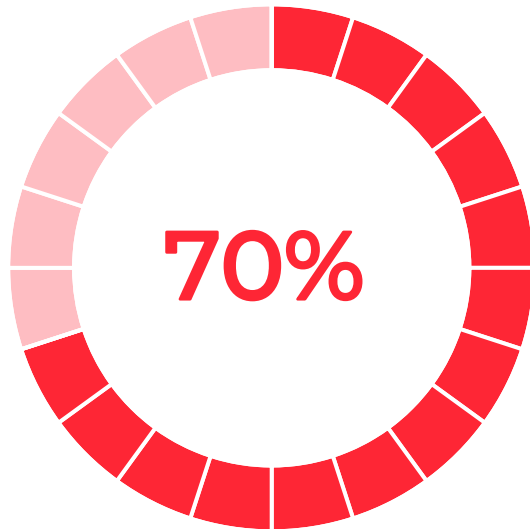
Overdose Deaths by Cause

Percentage of overdose deaths by cause, Children 0-17, Harris County, 2008-2017



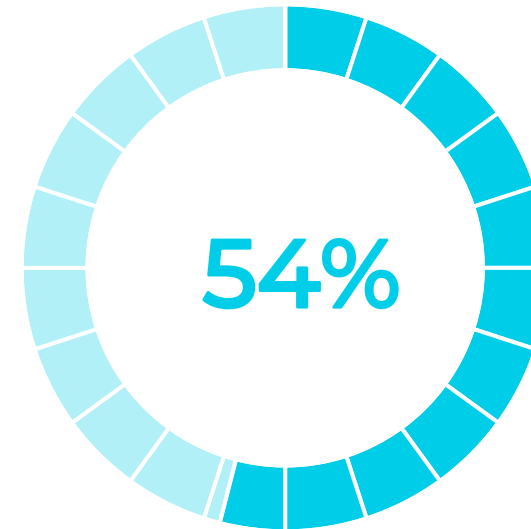
Overdose Manner by Age Group

Manner of overdose by age groups 0-6 & 13-17,
Harris County, 2008-2017



70% of overdose fatalities among adolescents were accidental.

This included teens ingesting both OTC and illicit drugs and unintentionally overdosing.



54% of overdose fatalities in children 0-6 were accidental.

This was caused by accidental overmedication by the caregiver or children accessing medications not securely stored.

Overdose Prevention Tips

03

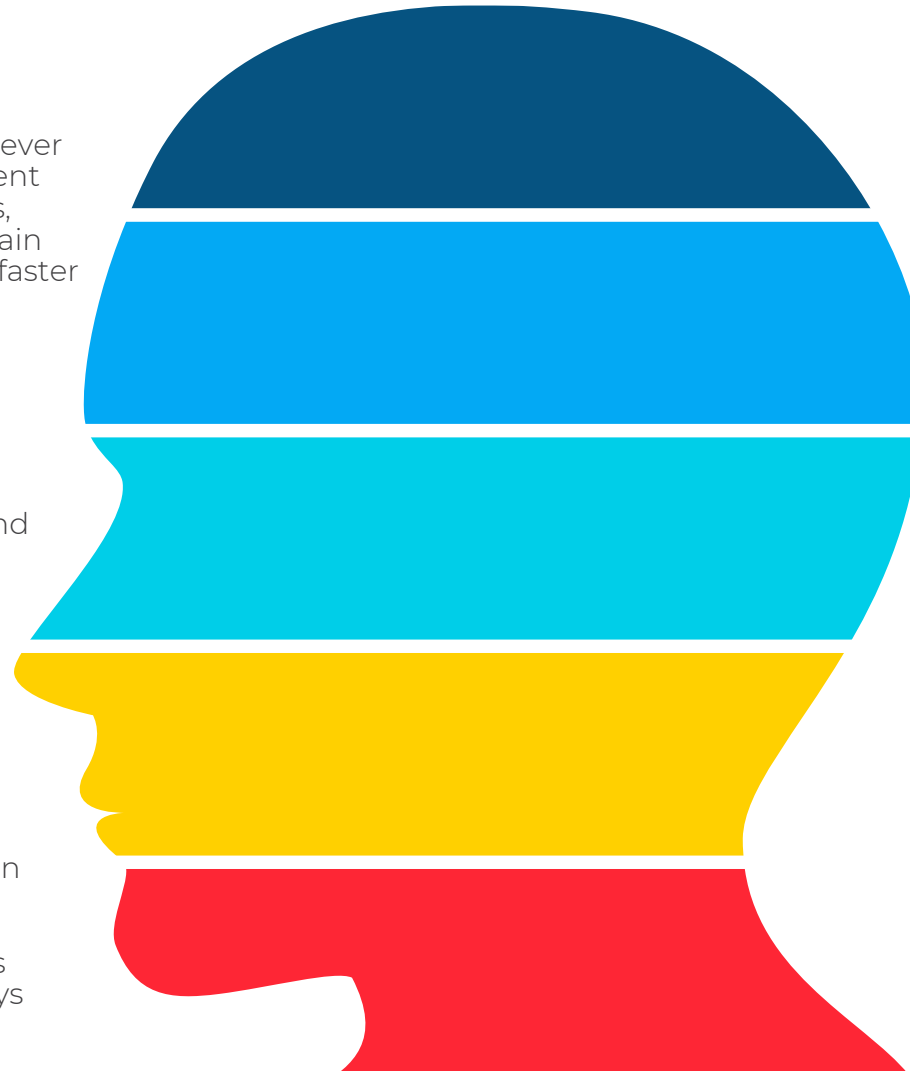
Only take prescription medications that are prescribed to you by a healthcare professional. Never take larger or more frequent doses of your medications, particularly prescription pain medications, to try to get faster or more powerful effects.

02

Store all medicines and household products up and away and out of sight in a cabinet where a child cannot reach them.

01

Put the poison help number, 1-800-222-1222, on or near every home telephone and save it on your cell phone. The line is open 24 hours a day, 7 days a week.



05

Find local substance abuse programs here:
<https://www.prc6.org>

04

The National Suicide Prevention Lifeline provides emotional support and crisis intervention and can be reached at 1-800-273-8255. For Spanish-language services, the National Suicide Prevention Lifeline can be reached at 1-888-628-9454.



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Other Unintentional Injury Deaths

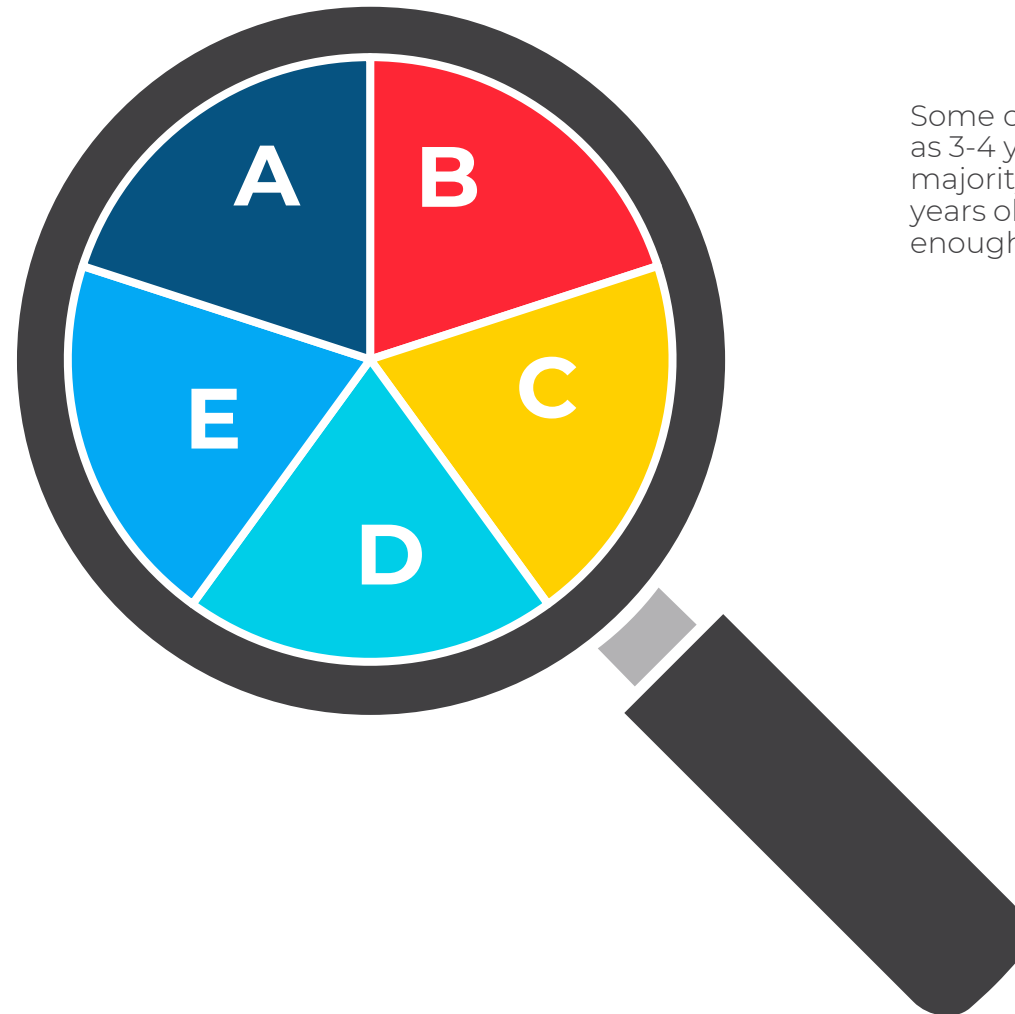
Unintentional Firearm Deaths

A

12.5% of firearm deaths in children under 10 were unintentional.

B

Some children as young as 3-4 years old, and a majority of children 5-8 years old are strong enough to pull a trigger.



C

The child mortality rates in urban areas are much higher than rural areas, likely due to increased density and therefore increased access to firearms

E

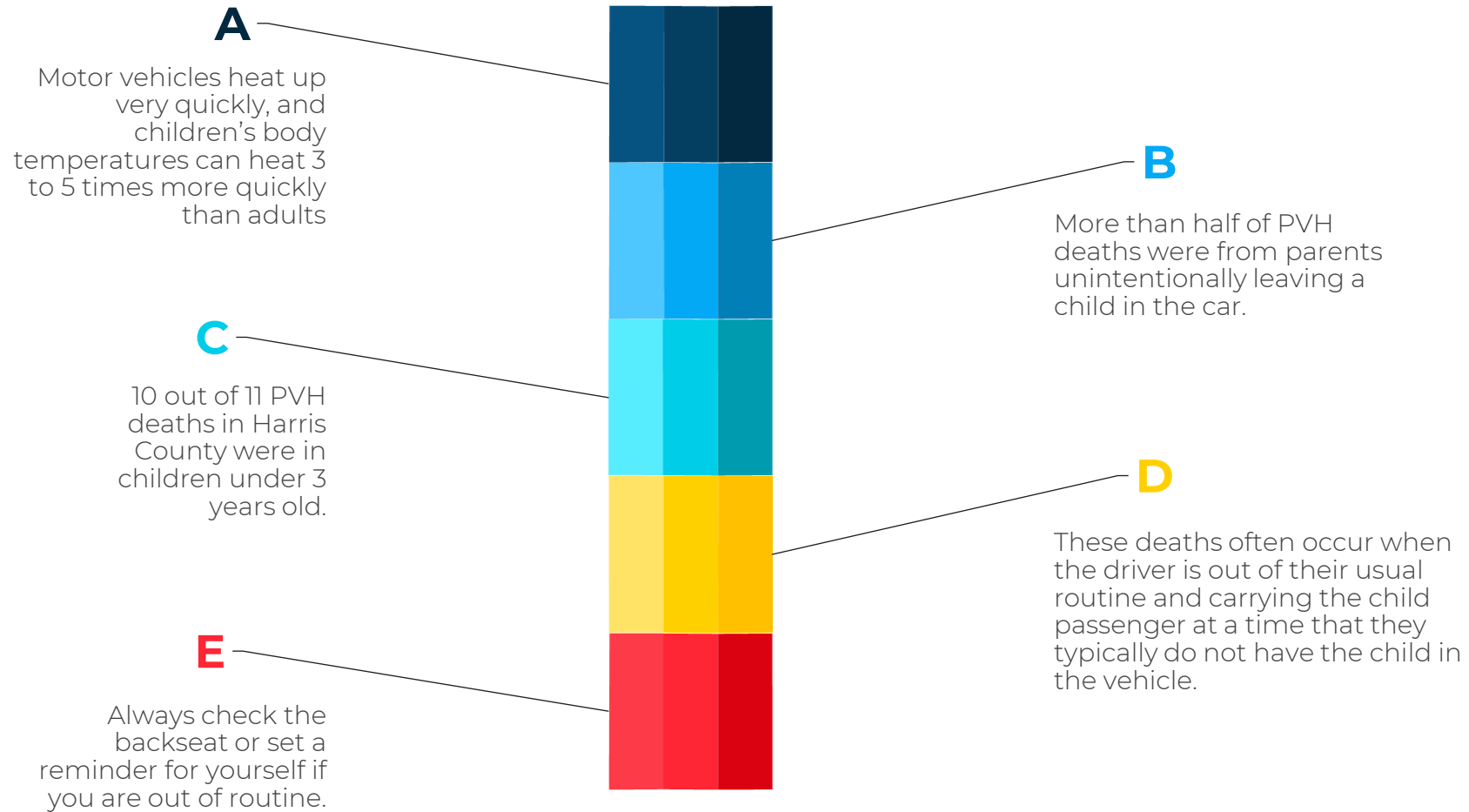
In many unintentional firearm-related deaths among younger children, the firearm was mistaken for a toy.

D

Approximately 75% of parents who own guns feel that their young child could distinguish a real gun from a toy gun, and almost 25% of parents stated they trusted their child with a loaded gun.

Pediatric Vehicular Heatstroke (PVH)

Sometimes called “hot car deaths”



Other Unintentional Deaths

Prevention Tips

Choking Deaths

Learn the Heimlich maneuver, know common food and toy hazards, and keep close supervision of young children

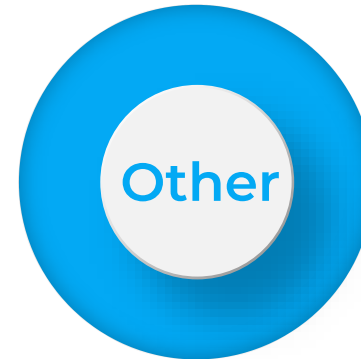


Suffocation, Strangulation, and Hanging

Increase caregiver supervision, child-proof your home so that young children and toddlers are less able to interact with potential hazards, such as empty appliances or other small spaces in which children could become trapped, plastic bags, and loose cords, straps, or strings

Fire and Burn Injuries

Check that you have functioning fire alarms and smoke detectors, safe storage of cigarettes and incendiary devices, adequate supervision of active fires, proper maintenance on household heating, and practice an age-appropriate fire safety plan with children



Crush Hazards and Home Safety

Anchor heavy furniture to the walls, use child locks, lock heavy and sharp objects out of reach, and supervise children with animals.



Read the full report at
bit.ly/cftrreport



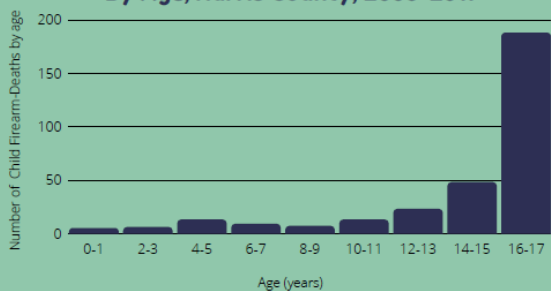
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Fliers and Print Outs

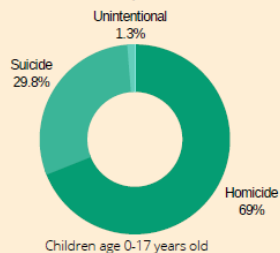
CHILD FIREARM DEATHS

Annual Firearm-Related Deaths By Age, Harris County, 2008-2017

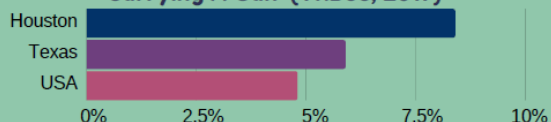


Intention Of Firearm-Related Deaths Among Children Age 0-17, Harris County, 2008-2017

Unintentional shootings are more common among younger children, whereas teenagers are more likely to be victims of intentional shootings.

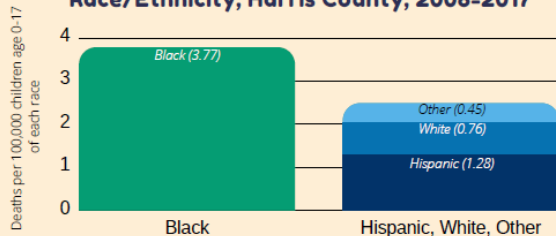


Percent Of High School Students Who Report Carrying A Gun (YRBSS, 2017)



Carried a gun on at least one day in the last 12 months, unrelated to hunting or sport

Annual Firearm-Related Deaths By Race/Ethnicity, Harris County, 2008-2017



FIREARM DEATH PREVENTION

Safe Storage

- 1 Unloaded
- 2 Locked
- 3 Store Firearm Separately From Ammunition

The safe storage of firearms can decrease child deaths by **70%**



It is against Texas law to allow or enable any child to access a firearm while unsupervised.

(Texas Penal Code § 46.13. Making a Firearm Accessible to a Child)

39% of parents who own firearms mistakenly thought their child did not know where the firearm was located...
...but 73% of children knew where it was!

22% of parents who own firearms mistakenly thought their child had never handled the firearm...
...but 36% of children had handled it unsupervised!

75% of parents thought their child could tell the difference between a real gun and a toy...
...but 16% accidental firearm deaths in young children were because they thought it was a toy!

Some parents may not think their child is strong enough to pull a trigger...
...but 25% of children 3-4 years old and 70% of 5-6-year-olds are able to!



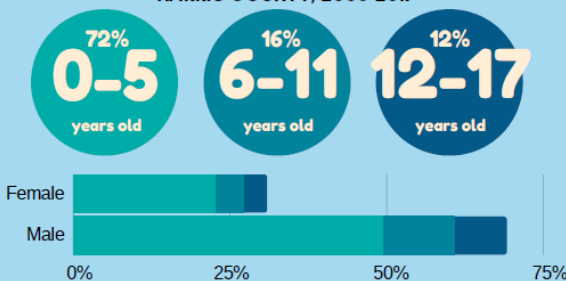
- Always supervise your children around firearms
- Ask other parents and caregivers about firearms in the house before play dates
- Talk to your children about firearm safety

Resources

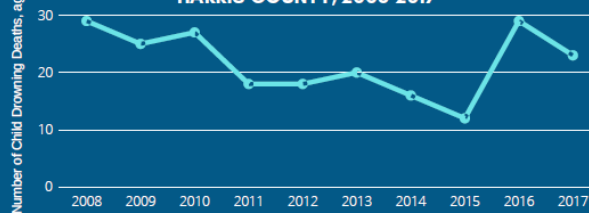
- Be Smart (BeSmartForKids.org)
- Keep 'Em Safe Texas (SafeGunStorageTexas.com)

CHILD DROWNING DEATHS

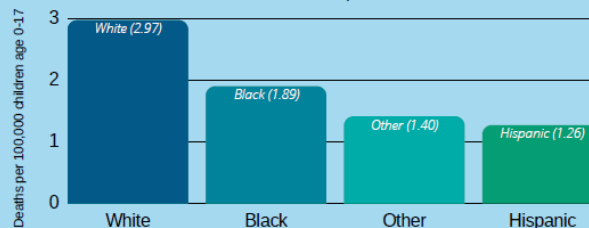
AGE & GENDER OF DROWNING DEATHS AMONG CHILDREN, HARRIS COUNTY, 2008-2017



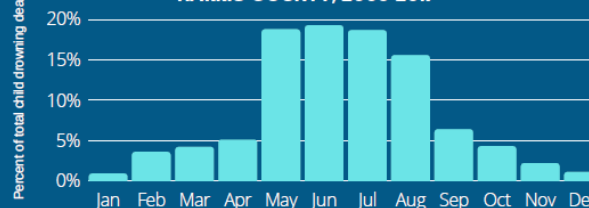
DECADE TREND IN ANNUAL DROWNING DEATHS, HARRIS COUNTY, 2008-2017



ANNUAL CHILD DROWNING DEATHS BY RACE/ETHNICITY, HARRIS COUNTY, 2008-2017



SEASONALITY: CHILD DROWNING DEATHS EACH MONTH, HARRIS COUNTY, 2008-2017



CHILD DROWNING DEATHS

LAYERS OF PROTECTION: MORE IS BETTER

- Sharpen your Skills**
Learn life-saving skills, like CPR and basic swimming
- Fence it Off**
Ensure physical barriers around water, such as gates, fences, and doors, are latched and locked
- Wear a Life Jacket**
Make sure it is properly-fitting, and US Coast Guard approved
- Be on the Lookout**
Never leave children unattended in water

DROWNING MOST COMMONLY OCCURS AT:

- Home, often in Bathing or Bucket**
Infants
- Swimming Pool or Hot Tub**
Toddlers
- Pond, Lake, Beach, or Stream**
Children and Adolescents



bit.ly/cftrreport

WATER WATCHER CARD, SAFEKIDS.ORG/WATER

"When children are swimming and there are several adults present, make sure kids are actively supervised at all times by choosing a Water Watcher. A Water Watcher is a responsible adult who agrees to watch the kids in the water without distractions and wear a Water Watcher card. After a certain amount of time (such as 15-minutes), the Water Watcher card is passed to another adult, who is responsible for the active supervision." (<https://www.safekids.org/other-resource/water-watcher-card>)

WATER WATCHER



While wearing this tag, I agree to supervise the children in the open water or pool, keeping them in sight at all times.

I will not leave the water area without finding an adult to replace me.

MOTOR VEHICLE COLLISIONS (MVC)



3 out of 4 children who died from MVC in the US were occupants or passengers & 1 out of 4 were pedestrians or bicyclists

Motor Vehicle Collisions (MVC) are the most common cause of death among children and adolescents in the United States

39%



From 2008 to 2017, the rate of annual MVC child deaths in Harris County decreased by 39%, from from 6.86 to 2.43 (per 100,000 children age 0-17)

RISK FACTORS LEADING TO DEATH

In the US and Texas, Motor Vehicle Collisions deaths occur most commonly in:



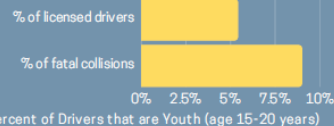
Rural areas



Teenagers



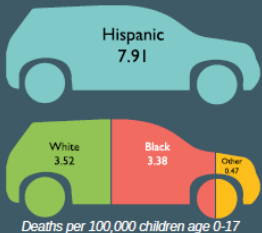
Boys



Youth ages 15-20 years old comprised 5.4% of licensed drivers, but are involved in 9.0% of all fatal collisions.

ANNUAL MVC DEATHS BY RACE/ETHNICITY IN HARRIS COUNTY, 2008-2017

In Harris County, Hispanic children are more than twice as likely to die from a Motor Vehicle Collision than children of any other race/ethnicity.



PREVENTION



1. Children should remain in a rear-facing car seat until they reach the maximum height or weight that the car seat manufacturer allows.

CAR SEATS & SEAT BELTS

Parents who do not use seat belts are less likely to make sure their child passengers are wearing seat belts

2. After outgrowing the rear-facing car seat, use a forward-facing car seat until the child reaches the height or weight limits of the forward-facing car seat and then promote to a belt-positioning booster seat.

3. The child should remain in the booster seat until the child reaches the height or weight limits of the booster seat (by Texas law this is at least until age 8 or reaching 49" in height).



4. Children under 14 years old should always sit in the back seat.



Among teenagers age 15-17 years old that died in a MVC, 40% were drivers, and less than 25% of those were wearing a seat belt.

35% of all MVC deaths among children 12 years old and younger were not properly restrained

PREVENT DISTRACTED DRIVING

Refrain from using your cell phone or other devices while driving, especially near pedestrian areas. Texas law prohibits texting while driving, and phone calls should be made using a hands-free option.



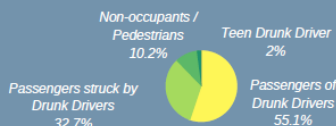
PREVENT IMPAIRED DRIVING

Call a taxi or designated driver if you have been drinking. Never drive under the influence of any substance.



42% of children who died and were passengers of a drunk driver were unrestrained

POSITION OF CHILD IN FATAL COLLISIONS INVOLVING DRUNK DRIVERS, NATIONALLY



PEDESTRIAN SAFETY

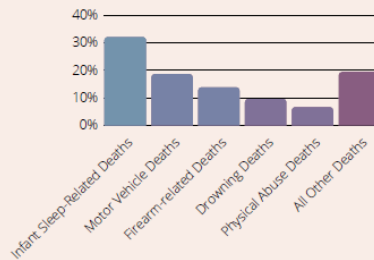


Teach children to:

- always use the sidewalk and protected crosswalks when possible
- look both ways - twice - before crossing the road
- avoid using the phone or headphones when near the roadway

With the popularity of increasingly large vehicles such as trucks and sport-utility-vehicles, children playing around or near a vehicle in the driveway may not be visible to the driver.

SLEEP-RELATED INFANT DEATHS

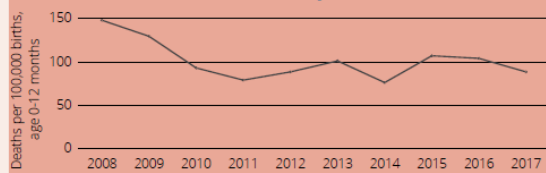


A LEADING CAUSE OF DEATH AMONG CHILDREN

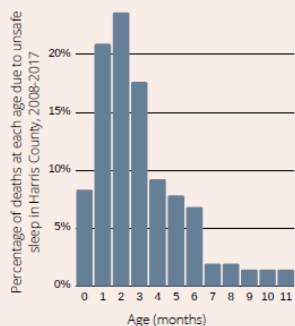
Sleep-related infant deaths account for nearly 1 out of 3 child deaths in Harris County over the last decade.



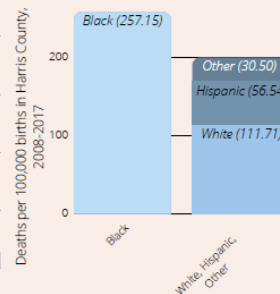
DECADE TREND IN ANNUAL INFANT SLEEP-RELATED DEATHS, HARRIS COUNTY, 2008-2017



AGE (MONTHS) OF INFANT SLEEP-RELATED DEATHS



ANNUAL SLEEP-RELATED DEATHS BY RACE/ETHNICITY



CAUSE OF DEATH RELATED TO INFANT SLEEP, HARRIS COUNTY, 2008-2017

Other Unsafe Sleep 49.2%

Co-sleeping 50.8%

Other causes include unsafe sleep environments, such as soft toys and pillows nearby, or when baby is sleeping face-down.

Co-sleeping is whenever the baby shares a bed or other surface to sleep with another person.

INFANT SAFE SLEEP

PREVENTION TIPS RECOMMENDED BY AMERICAN ACADEMY OF PEDIATRICIANS, 2016



- Infants younger than 1 year old should always sleep:
 - Alone
 - On their back
 - On a firm surface
 - In the same room as caregiver



- Remove soft or loose objects from baby's sleeping area such as pillows, toys, blankets, bumper pads, and non-fitted sheets. Do not put baby to sleep on the couch, nursing pillow, or car seat.



- Avoid overheating during sleep by not over-bundling and by leaving the baby's face and head uncovered.



- Avoid smoking, drinking alcohol, or using drugs during pregnancy and after birth. Caregivers who smoke should smoke outdoors, then change into a clean shirt and wash hands thoroughly before holding the baby.



- Breastfeeding, using a pacifier, and staying up-to-date on immunizations can help keep the baby healthy and prevent sleep-related deaths.



- Additional suggestions include:
- Help baby build strength by playing with them during "tummy time"
 - Go to regular prenatal appointments during pregnancy
 - Avoid using products that may be unsafe - check for product recalls at www.cpsc.gov



PLAN AHEAD

- It is easy to fall asleep with your infant if you are feeding or comforting the baby
- Problem-solve ahead of time to make sure that you have a plan to make every sleep a safe sleep

ADOLESCENT SUICIDE

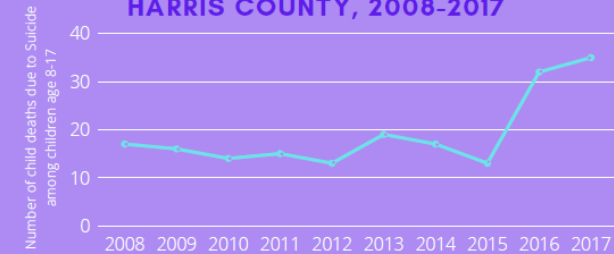
Characteristics

A LEADING CAUSE OF DEATH IN YOUTH

Nationally, suicide is the leading cause of death among children ages 10-14 and the second leading cause of death among adolescents ages 15-19.

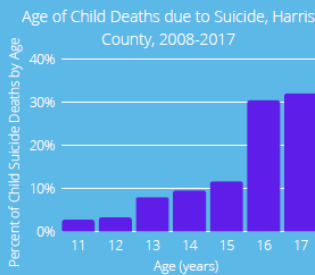


DECADE TREND IN DEATHS BY SUICIDE, HARRIS COUNTY, 2008-2017

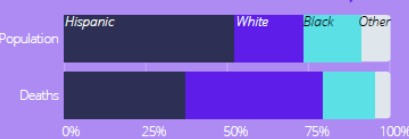


CAUSE OF DEATH AND AGE

- The most common method of suicide was use of a firearm, closely followed by hanging.
- Suicides account for nearly 30% of all firearm-related fatalities among children in Harris County.
- Experts recommend removing or safely securing firearms as an important suicide prevention step.



RACE/ETHNICITY AND GENDER, HARRIS COUNTY, 2008-2017



In Harris County, boys are over 2 times more likely to die by suicide than girls. The proportion of white children who die by suicide is double their proportion in the general population.

Children of each race/ethnicity as a proportion of the population and proportion of child suicide deaths

ADOLESCENT SUICIDE

Resources and Risk Factors

CRISIS HOTLINES

THE NATIONAL SUICIDE PREVENTION LIFELINE
English 1-800-273-8255
Nacional de Prevención del Suicidio en Español 1-888-628-9454
suicidepreventionlifeline.org, deaf and HOH accessible

CRISIS TEXT LINE
Text "home" to 741741
crisistextline.org



THE TREVOR PROJECT
For LGBTQ youth under age 25
Call: 1-866-488-7386
Text: "start" to 678678
Online Chat, at thetrevorproject.org/get-help-now

TRANS LIFELINE
1-877-565-8860
translifeline.org

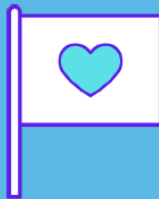
WARNING SIGNS



- History of suicide attempt, suicidal intention, and thinking about or planning for suicide
- Increase in depression, hopelessness, anxiety, and emotional distress
- Interpersonal relationship events: stressors, conflicts, loss, abuse
- Change or shift in a person's normal demeanor or behaviors

OTHER RISK FACTORS

- Sexuality and gender minority (LGBTQ) youth with poor social/emotional support
- Increase in alcohol or substance use, aggressive behavior, and lack of impulse control
- Increase in agitation and sleep disturbance



PROTECTIVE FACTORS



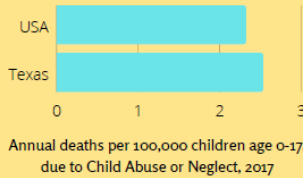
- Self-esteem and self-compassion
- Problem-solving capacity
- Community connections and meaningful relationships, including: emotionally supportive family, close friendships, supportive and involved teachers/coaches

CHILD ABUSE AND NEGLECT

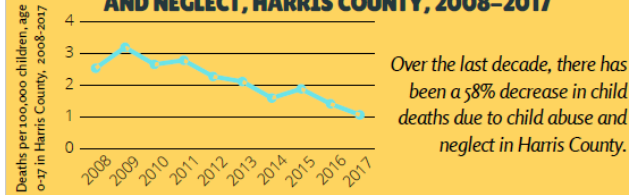
Child abuse and neglect (CAN) occurs whenever a caregiver, through their action or inaction, causes a child to be harmed. Abuse can take many forms, primarily physical, emotional, sexual, or through exploitation.

OUTCOMES OF CHILD ABUSE AND NEGLECT

Survivors are not only at risk of physical injuries, but also toxic stress, which can negatively impact the child's learning and memory, their ability to form healthy relationships, cope with stress, and manage their emotions... difficulties which can persist into adulthood.



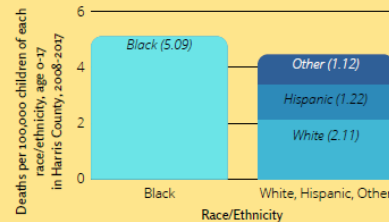
DECADE TREND IN ANNUAL DEATHS DUE TO CHILD ABUSE AND NEGLECT, HARRIS COUNTY, 2008-2017



Over the last decade, there has been a 58% decrease in child deaths due to child abuse and neglect in Harris County.

RACE/ETHNICITY OF CAN-RELATED DEATHS

In Harris County, Black children are more likely to experience death from child abuse than children of all other racial groups.



AGE AND CAUSE OF DEATH DUE TO CHILD ABUSE AND NEGLECT IN HARRIS COUNTY, 2008-2017

42%

of CAN homicides occur before the child's first birthday



77%

of CAN homicides occur in children younger than 3 years old

39%

of CAN deaths under age 3 were result of an abusive traumatic head injury

PREVENTING CHILD ABUSE AND NEGLECT

Prevention efforts center around supporting parents and caregivers

PARENT STRESSORS

- Family stress, poverty, or lack of social support
- Lack of parenting skills, or feeling unprepared for the challenges of raising children
- Misunderstanding of child development
- Parental mental illness, or substance use
- Violence in the home or history of abuse
- Non-biological transient caregiver in the home

Children need a safe and stable home environment with a nurturing and responsive caregiver. Stress and other factors can affect the way a parent is able to care for the child and may increase the risk of harm.



COMMON TRIGGERS

Crying: it is normal for newborns to cry often, sometimes inconsolably, but they will grow out of it...



Toilet Training: learn the process and know when your child is developmentally ready

If you are becoming overwhelmed by crying, it is okay to safely leave the baby in the crib for 10-15 minutes and walk away to take a quick break.



Never leave your child with someone who is impatient or quick to anger.

INTIMATE PARTNER VIOLENCE



Studies have shown a co-occurrence of intimate partner violence (IPV) and child abuse.



On average 1 in 4 women in the US have experienced IPV.

POSITIVE PARENTING PRACTICES

To build a healthy relationship with your child, try:

- Establish a routine
- Give positive feedback for good behavior
- Listen attentively
- Designate play time together
- It's okay to ask for help!
- Every child and parent is unique



RESOURCES

- CDC Parent Information: from pregnancy to teenagers. www.cdc.gov/parents
- National Domestic Violence Hotline (thehotline.org): 24/7 tools and support. 1-800-799-SAFE (7233)
- National Parent Helpline: peer support for parents (M-F, 10:00 AM - 7:00 PM). 1-855-427-2736
- Texas Abuse Hotline: 24/7 report suspected child maltreatment. 1-800-252-5400
- Texas Parenting Tips: advice for parents of babies through teenagers: www.getparentingtips.com



To request PDFs of the
resources above please email
akhayes@bcm.edu