

Introduction + Health training (2 sessions)

Introduction + Health + Entrepreneurship training (6 sessions)

Introduction + Health + Beekeeping training (6 sessions)

Introduction + Health + Beekeeping + Entrepreneurship training (10 sessions)

Intervention started April 2015 and will be completed January 2016. Post intervention data will be collected 3, 6 and 12 months after the last session. As a pilot study, evaluation variables include: availability/cooperation of subjects, research collaborators and institutions, timing, facilities and equipment needed, researcher experience, and costs.

Results Four youth camps were randomly chosen from 243 mapped camps in 4 wards of DSM. Fifteen members of each camp were invited to join. At the introductory session, camps were randomly chosen for intervention arms. Baseline data were collected quantitatively: demographics, health parameters, assets, risk for violence, and reading, writing, math skills. And qualitatively : involvement with community violence, income generation practices, money spending patterns, helpful and deviant deeds, aspirations.

Conclusions This pilot research is providing insight needed to conduct an experimental study to examine sustainable ways to reduce community violence. It builds on government and NGO youth employment initiatives; it is giving insight as to how such initiatives can be most effective.

344

COMPARING VIOLENT DEATH PATTERNS AND TRENDS IN MEXICO AND COLOMBIA FROM 2000 TO 2012. DIFFERENCES AND SIMILARITIES

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Background Violent death has been a public health issue in the Americas. In the past few years, this problem has decreased in Colombia, as opposed to the situation in Mexico. This paper aims to analyse and compare violent death patterns and trends in Colombia and in Mexico from 2000 to 2012.

Methods This comparative, longitudinal study used secondary data furnished by the national agencies in charge of recording, processing, and analysing vital statistics in each of the two countries. The causes of violent death recorded in the International Classification of Diseases were analysed. A comparative analysis of cause of death using the variables country, year, age group, cause, sex, and religion was made, obtaining proportions. A multivariate analysis was made using the dependent variable “country”, and the independent variables “sex”, “age group”, and “cause”.

Results From 2000 to 2012, there were 472,658 violent deaths in both countries: 59.2% in Colombia and 40.8% in México. At the beginning of the period under study, the risk of violent death was six times higher in Colombia than in Mexico; at the end of the period under study, such risk decreased to 1.6 times higher in Colombia than in Mexico. The most affected population is men

of working age; the risk of death includes death by firearms and death by sharp weapons.

Conclusions Violent death decreased in Colombia and increased in Mexico during the period under study. However, the risk of violent death is still higher in Colombia than in Mexico. The increase in violent deaths in Mexico is related to the fight against drug trafficking in its different forms, to criminal gangs, and to outlawed groups. In Mexico, the causes of death suggest greater suffering.

345

THE PUBLIC HEALTH IMPLICATIONS OF SMALL ARMS AND LIGHT WEAPONS (SALWS) INJURIES IN SOKOTO STATE, NORTH WEST, NIGERIA

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Background A Small Arms and Light Weapons (SALWs) facilitate and prolong violence, which has enormous public health consequences. This study describes the prevalence, types, risk factors of and outcomes of SALW injuries in a relatively insurgent free state. The cases of Small Arms and Light Weapons (SALWs) injuries admitted in Usmanu Danfodiyo University Teaching Hospital, Sokoto (UDUTH) between January 2003- December 2012 were examined. The prevalence of SALW use in Nigeria is unknown, and with the rising spate of ethno-religious conflicts and political unrest, there may be an increase in the propagation of SALWs use and consequent injuries; hence the need to examine the prevalence of hospital admission due to SALW injury and its Public Health implications.

Methods The study was a quantitative research using a cross sectional approach to assess prevalence, risk factors, types of injury and treatment outcomes of small arms and light weapons injuries in UDUTH in Sokoto State of Nigeria using patient folder audit. Data from the case files of 299 randomly selected victims of SALW injuries over a ten-year period was extracted and analysed to determine the prevalence, types of injuries and outcome of treatment. Bivariate analysis of dependent and independent variables were done to establish association with treatment outcome.

Results Analysis of the 299 case files established a prevalence of 0.07%, with 14% fatality, and peak age range of 26–35 years. The commonest types of injuries were wounds, systemic organ injuries and fractures. Brain trauma, though not very common had 75% mortality while systemic organ injury had 24.6% mortality. Significant association was established between nature of injury, education, residence, area of occurrence, context of injury and year of occurrence and treatment outcome. Nature of injury and residence were the only predictors of treatment outcome.

Conclusions This study established 0.07% prevalence of SALW injuries with nature of injury and residence as significant predictors of treatment outcome in UDUTH Sokoto. Strategies to promote the prevention of SALW injuries and good treatment outcome should focus on those predictors.