

# Research tracks roots of harmful behaviour among young adults

June 7 2017, by Mike Addelman

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New collaborative research conducted by epidemiologists at The University of Manchester and at Aarhus University, Denmark has demonstrated the strong link between being admitted to hospital for trauma as a child and different forms of harmful and self-destructive behaviour in young adults.

The study - led by Dr Roger Webb at the University's Centre for Mental Health and Risk and published in *The Lancet Public Health*, identified 1.1 million Danish [children](#) admitted to [hospital](#) before the age of 15 following episodes of [self-harm](#), [interpersonal violence](#) or serious accidents.

The team tracked the same people to see who went on to self-harm and who was convicted of a violent offence between the ages of 15 and 35 years.

The study revealed that 14 percent of men aged 15 to 35 who were hospitalised as children for self-harm, committed a violent crime between the ages of 15 and 35 years.

And 25 percent of males who were hospitalised as children following interpersonal violence went on to offend violently as young adults.

In addition, 18 percent of women who experienced hospitalisation following interpersonal violence as a child were hospitalised following self-harm as young adults.

Self-harm risk during young adulthood among those women who were admitted following self-harm as children was only slightly higher at 21 percent.

The researchers also identified that as the number of trauma-related hospital admissions during childhood increased, and also the number of types of trauma-related hospitalisation experienced during rose, the higher the risks of adverse outcome in young adulthood.

These two risk gradients were especially steep in women.

The 1.1 million cohort members were born between 1977 and 1997 within the entire population of Denmark, which currently stands at approximately 5.5 million people. The cohort was followed up until December 2012.

Dr Webb said: "This is one of the most extensive studies of its type ever carried out, and the overarching lesson we learn from it is that there is a multiplicity of long-term risk associated with hospital [admission](#) for trauma as a child.

"Clearly, this does not demonstrate a causal link between trauma-related hospital admission during childhood and future risk in [young adulthood](#).

"But the strength and consistency of the relationship should be noted by clinicians. The research has also precisely quantified important gender differences in the patterns of risk.

"There is therefore a need to focus on trajectories from hospital admission of children with injuries or poisonings to what may happen to them as [young adults](#)."

He added: "Trauma-related hospital admission of a child might present

an important opportunity to implement a family-oriented intervention in the hospital setting, with the proactive purpose of reducing future risk of harmful or self-destructive behaviours.

"Particularly, close monitoring and robust support is indicated for young women who were admitted to hospital as children on more than one occasion following trauma and for those who were admitted post-trauma for multiple reasons during their childhood.

"National clinical guidelines for provision of psychosocial assessment target single problems such as self-harm, but they could be usefully broadened to encompass other adverse events such as [hospital admission](#) of children following episodes of interpersonal violence or serious accidents."

Provided by University of Manchester

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