

INJURIES & VIOLENCE THE FACTS

2014



The magnitude and causes of injuries

Every day the lives of more than 14 000 people are cut short as a result of an injury. Among the causes of injury are acts of violence against others or oneself, road traffic crashes, burns, drowning, falls, and poisonings. The deaths caused by injuries have an immeasurable impact on the families and communities affected, whose lives are often changed irrevocably by these tragedies.

Injuries and violence have been neglected from the global health agenda for many years, despite being predictable and largely preventable. Evidence from many countries shows that dramatic successes in preventing injuries and violence can be achieved through concerted efforts that involve, but are not limited to, the health sector. The international community needs to work with governments and civil society around the world to implement these proven measures and reduce the unnecessary loss of life that occurs each day as a result of injuries and violence.

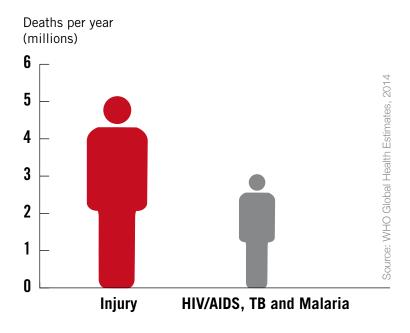
Every six seconds someone in the world dies as a result of an injury

Injuries are a global public health problem

More than 5 million people die each year as a result of injuries. This accounts for 9% of the world's deaths, nearly 1.7 times the number of fatalities that result from HIV/AIDS, tuberculosis and malaria combined (see Figure 1).

Figure 1: The scale of the problem

Injury deaths compared to other leading causes of mortality, world, 2012.



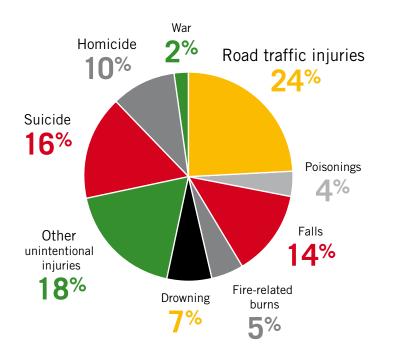
Approximately a quarter of the 5 million deaths from injuries are the result of suicide and homicide, while road traffic injuries account for nearly another quarter. Other main causes of death from injuries are falls, drowning, burns, poisoning and war (see Figure 2).



Source: WHO Global Health Estimates, 2014

Figure 2:
How injuries and violence claim lives

Causes of injury deaths, world, 2012.



Five times as many people die from homicide each year than from war-related injury

Injuries are an important public health concern, and remain a growing problem in some countries. Two of the three leading causes of injury deaths – road traffic injuries and falls – are predicted to rise in rank compared to other causes of death. As can be seen in Table 1, road traffic injuries are predicted to become the 7th leading cause of death by 2030, with falls rising to become the 17th leading cause of death and suicide remaining in the top 20.



Table 1: Injury deaths rise in rank

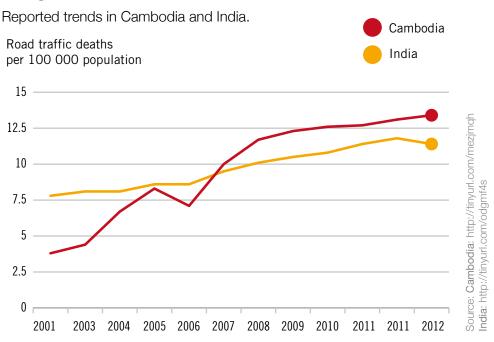
Leading causes of death, 2012 and 2030 compared.

	3
Tota	al 2012
1	Ischaemic heart disease
2	Stroke
3	Chronic obstructive pulmonary disease
4	Lower respiratory infections
5	Trachea, bronchus, lung cancers
6	HIV/AIDS
7	Diarrhoeal diseases
8	Diabetes mellitus
9	Road traffic injuries
10	Hypertensive heart disease
11	Preterm birth complications
12	Cirrhosis of the liver
13	Tuberculosis
14	Kidney diseases
15	Suicide
16	Birth asphyxia and birth trauma
17	Liver cancer
18	Stomach cancer
19	Colon and rectum cancers
20	Alzheimer's disease and other dementias
21	Falls

203	80 C	ompared.					
	Total 2030						
1	1	Ischaemic heart disease					
	2	Stroke					
	3	Chronic obstructive pulmonary disease					
	4	Lower respiratory infections					
	5	Diabetes mellitus					
	6	Trachea, bronchus, lung cancers					
	7	Road traffic injuries					
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	9	Diarrhoeal diseases					
	10	Hypertensive heart disease					
	11	Cirrhosis of the liver					
	12	Liver cancer					
	13	Kidney diseases					
	14	Stomach cancer					
	15	Colon and rectum cancer					
	16	Suicide					
	17	Falls					
	18	Alzheimer's disease and other dementias					
	19	Preterm birth complications					
	20	Breast cancer					
	21	Endocrine, blood, immune disorders					

Injury deaths have been steadily increasing in many low- and middle-income countries. Figure 3 shows the increase in road traffic deaths in Cambodia and India over recent years – a pattern that is seen in many countries where motorization has not been accompanied sufficiently by improved road safety strategies.

Figure 3: Rising road traffic fatalities



The non-fatal consequences of injuries and violence

The millions of deaths that result from injuries represent only a small fraction of those injured. Tens of millions of people suffer injuries that lead to hospitalization, emergency department or general practitioner treatment, or treatment that does not involve formal medical care. The relative numbers of fatal and non-fatal injuries are often graphically depicted in the form of a pyramid, as shown in Figure 4. In addition to the severity of an injury, there are a number of factors that vary by country and that determine the "shape" of the pyramid, such as access to health care services, or the quality of the data available.

Many of those who survive acts of violence, road traffic crashes, suicide attempts or other causes of injury are left with temporary or permanent disabilities – injuries are responsible for an estimated 6% of all years lived with disability.

All causes of injury have health consequences beyond the physical injury. The many health consequences of injuries and violence are depicted in Figure 5.



In particular, child maltreatment, intimate partner violence and sexual violence have been shown to have a broad array of adverse health effects that can persist over a lifetime. These forms of violence contribute significantly to depression, sexually transmitted diseases and unwanted pregnancies, while also increasing the likelihood of engaging in risky behaviours, such as smoking and the harmful use of alcohol and drugs. Via these behaviours, they can lead to cancers, cardiovascular diseases, diabetes, liver disease and other chronic diseases.

Women and men
who experienced
sexual abuse
involving
intercourse as
children are over
twice as likely to
attempt suicide
than their peers
who were not
abused

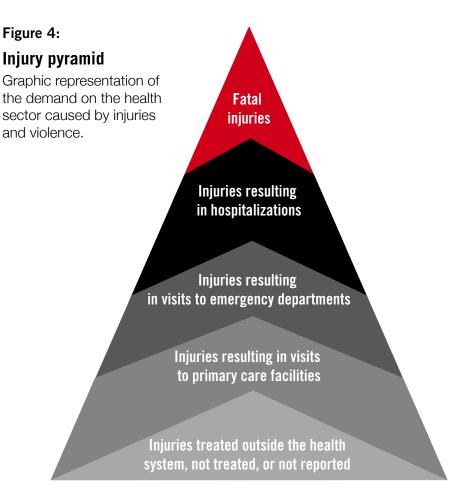


Figure 5: Consequences of injuries and violence



Some groups are more vulnerable to injuries and violence than others

Injuries and violence are a significant cause of death and ill health in all countries, but they are not evenly distributed around the world or within countries – some people are more vulnerable than others. The nature of injuries and violence varies considerably according to age, sex, region and income group. For example, in low- and middle-income countries in the Western Pacific, the leading injury-related causes of death are road traffic injuries, suicide and falls, while in the low- and middle-income countries of the Americas, the leading causes are homicide and road traffic injuries. The leading cause of injury death in the high-income countries of the world is suicide, with road traffic injuries and falls second and third.

Road traffic injuries are the leading cause of death worldwide among those aged 15–29 years

Injuries are a leading cause of death among young people

Injuries affect all age groups but have a particular impact on young people and people in their prime working years. For people between the ages of 15 and 29 years, three injury-related causes are among the top five causes of death. Road traffic injuries are the leading cause of death in this age group, with suicide and homicide the second and fourth leading causes of death respectively – together accounting for more than one quarter of all deaths in this age group. Among the elderly, falls are the most common cause of injury death. Table 2 presents leading causes of death by age group in 2012.

Table 2: Injuries a leading killer of youth

Leading causes of death by age group, both sexes, world, 2012.

Rank	0-4	5-14	15-29	30-49
1	Preterm birth complications 1 134 930	Diarrhoeal diseases 142 045	Road traffic injuries 325 736	HIV/AIDS 882 141
2	Lower respiratory infections 994 613	Lower respiratory infections 122 043	Suicide 242 903	Ischaemic heart disease 430 499
3	Birth asphyxia and birth trauma 743 767	HIV/AIDS 96 275	HIV/AIDS 239 228	Road traffic injuries 364 462
4	Diarrhoeal diseases 622 164	Road traffic injuries 83 604	Homicide 211 519	Stroke 293 770
5	Malaria 476 192	Drowning 74 212	Maternal conditions 150 983	Suicide 243 971
6	Congenital anomalies 450 050	Meningitis 73 745	Lower respiratory infections 103 006	Tuberculosis 231 652
7	Neonatal sepsis and infections 430 853	Protein-energy malnutrition 52 545	Diarrhoeal diseases 85 338	Cirrhosis of the liver 226 173
8	Protein-energy malnutrition 148 358	Endocrine, blood, immune disorders 42 837	Drowning 75 833	Homicide 175 089
9	Meningitis 143 835	Fire-related burns 41 575	Ischaemic heart disease 67 686	Lower respiratory infections 154 542
10	HIV/AIDS 102 796	Congenital anomalies 33 061	Meningitis 56 700	Maternal conditions 144 900
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