

## TRAINING FOR THE HEALTH SECTOR

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# UNINTENTIONAL CHILDHOOD INJURIES



World Health  
Organization

## Children's Health and the Environment

*WHO Training Package for the Health Sector*

World Health Organization

**[www.who.int/ceh](http://www.who.int/ceh)**

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## **Unintentional childhood injuries**

### **LEARNING OBJECTIVES**

1. What are childhood injuries?
2. Injuries and their classification
3. Burden of injuries among children
4. Environmental risk factors/settings
5. Why has so little action been taken?
6. The public health approach to injury prevention: Haddon's matrix
7. What are effective interventions/measures to prevent unintentional child injury?
8. What can the health sector do?

## **Unintentional childhood injuries**

**Injury is the main cause of death and a major cause of ill health and disability in childhood**

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First, it is necessary to provide some basic definitions. 'Injury' is a broad term covering a multitude of types of health problem each of which is associated with different factors and for which different types of interventions are possible. The most basic classification of injuries is according to whether they are intentional or unintentional.

An injury is defined as "a body lesion at the organic level, resulting from an acute exposure to energy (mechanical, thermal, electrical, chemical or radiant) in amounts that exceed the threshold of physiological tolerance. In some cases (e.g. drowning, strangulation, freezing), the injury results from an insufficiency of a vital element". (*Baker, 1984*)

### *References:*

- Baker. The injury fact book. *Lexington, MA, Lexington Books.* 1984.

## Unintentional childhood injuries

### SOME GENERAL PRINCIPLES

Injuries are preventable:

- “accident” versus “injury event”

Unintentional versus intentional injury

Injury prevention and control

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There are some important principles and definitions that need to be understood and differentiated.

The first, and possibly the most important, principle of injury prevention is that injuries are preventable. Many people are used to thinking that injuries are the result of accidents, which are typically considered to be unpredictable and unpreventable. In contrast, the first principle of injury prevention is that injuries occur as the result of events that can be predicted and prevented.

#### **Accidents versus injury events**

There has been a move away from use of the term “accident”, in the English language, because of its connotations of inevitability and lack of apparent cause. On the other hand, the term “injury events” has been used to indicate that these are events that can be studied, understood and therefore prevented. An injury event can be characterized as either **unintentional** or **intentional**.

Intentionality distinguishes violence from unintended events that result in injury. However, the issue of intentionality can be quite complex, since the intent to use force may not necessarily mean there was an intent to cause damage. Consequently, there has been a move away from the use of the “intentional” classification in the field of violence prevention.

**Injury prevention:** refers to the actions or interventions that prevent an injury event or violent act from happening by rendering it impossible or less likely to occur.

**Injury control:** refers to actions aimed at reducing injuries or the consequences of injuries once they have occurred.

*Slide from TEACH VIP manual, kindly provided by VIP/WHO – more information and materials available at: [www.who.int/violence\\_injury\\_prevention/capacitybuilding/teach\\_vip/en/index.html](http://www.who.int/violence_injury_prevention/capacitybuilding/teach_vip/en/index.html)*

<b>Unintentional childhood injuries</b>	
<b>INJURIES AND THEIR CLASSIFICATION</b>	
<b>UNINTENTIONAL</b>	<b>INTENTIONAL</b>
❖ Road traffic injuries	❖ Interpersonal – Family/partner Intimate partner Child abuse Elder abuse
❖ Poisoning	
❖ Falls	❖ Interpersonal – community Acquaintance Stranger
❖ Fires and burn injuries	
❖ Drowning	❖ Self-directed - Suicidal behaviour Self-harm
❖ Other	
	❖ Collective violence – social, economic, political (war, gangs)

Intentional and unintentional injuries are defined in terms of a series of external cause codes.

Unintentional injuries are typically classified according to the means of their occurrence: poisoning, burns and scalds, drowning, falls and transport-related.

Intentional injuries include homicide and interpersonal violence, wars and other forms of collective violence, and suicide and other forms of self-harm.

Injuries have been traditionally regarded as random, unavoidable 'accidents'. In the last few decades, a better understanding has changed these attitudes, and injuries - both unintentional and intentional - are now regarded as largely preventable.

When all ages are considered in the European Region the three leading causes account for nearly 50% of all deaths from violence and unintentional injury (800,000 every year) :

- suicide (ca. 164,000 deaths/year);
- road traffic injuries (ca. 127,000 deaths/year); and
- poisoning (ca. 110,000 deaths/year).

In the European Region, the burden of injuries makes up 14% of the total burden of disease. Burden is usually measured in disability-adjusted life years (DALYs), which is a composite measure of the years of life lost and those lived with disability from injuries. Although DALYs measure the physical burden of injuries they do not usually measure the psychological suffering of victims of sexual violence, abuse and neglect, which disproportionately affects women and children.

We deliberately avoid use of the term 'accident'. Even when applied to unintentional injury it suggests that injury is in some way random, as illustrated by the saying 'accidents do happen', and by inference the resulting injuries are thought to be less amenable to systematic programmes of prevention than is in fact the case. Finally, for most purposes, injuries can be considered as synonymous with the term 'external causes' that is used in statistics of mortality, consistent with the terminology used in the International Classification of Diseases.

- Sometimes it is difficult to distinguish unintentional injuries from intentional and it makes interpretation of data more difficult when making cross country comparisons. Sometimes there may be cultural barriers in classifying injuries as intentional e.g. suicide.

- Death data are usually from Vital Registration systems.

*Reference:*

•WHO. The Injury Chart Book. *Geneva, WHO*. 2002.

## **Unintentional childhood injuries**

### **CATEGORIZING INJURY**

- ❖ **Severity (level of medical treatment required)**
- ❖ **Setting (e.g. home, school, workplace, road)**
- ❖ **Activity (e.g. sport, recreation, work)**
- ❖ **Mechanism (e.g. fall, burn, dog bite, motor vehicle crash, drowning)**
- ❖ **Intent (intentional, unintentional)**
- ❖ **Nature of injury (e.g. fracture, burn)**

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There is no single comprehensive and mutually exclusive method for injury categorization. All classifications have merit, and often a combination is chosen. Some categorizations which have been used include:

- severity (level of medical treatment required)
- setting (e.g. home, school, workplace, road)
- activity (e.g. sport, recreation, work)
- mechanism (e.g. fall, burn, dog bite, motor vehicle crash, drowning)
- intent (intentional, unintentional)
- nature of injury (e.g. fracture, burn).

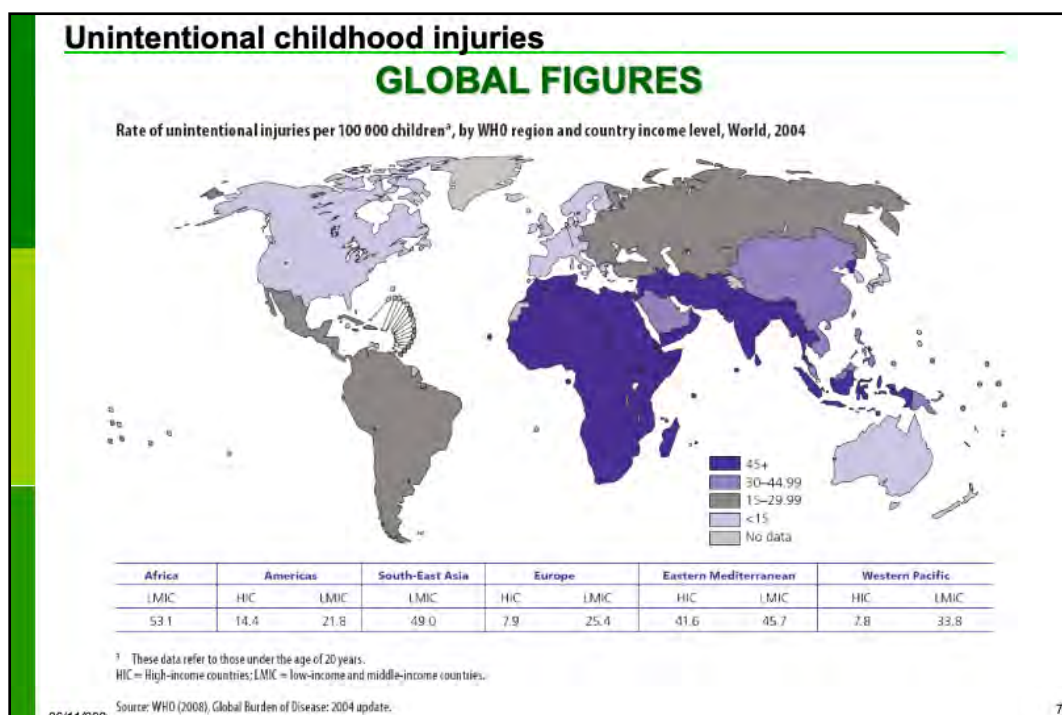
Other categorisations are based on the demographics of injury victims and may include:

age (child, adolescent, elderly)

- gender
- socioeconomic status
- ethnicity or aboriginality.

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Child injuries are strongly related to social determinants

The burden of injury on children is unequal. Children in poorer countries and those from poorer families in better-off countries are the most vulnerable. More than 95% of all child injury deaths occur in low-income and middle-income countries. Although the child injury death rate is much lower in high-income countries, injuries still account for about 40% of all child deaths in these countries.

Graph and notes taken from

WHO. World report on child injury prevention. WHO. 2008. Available at [www.who.int/violence\\_injury\\_prevention/child/injury/world\\_report/en/index.html](http://www.who.int/violence_injury_prevention/child/injury/world_report/en/index.html) – accessed December 2009

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