



Healthy Environments for Children Alliance

A world-wide alliance to reduce environmental risks to children's health that arise from the settings where they live, learn, play, and sometimes work by providing knowledge, increasing political will, mobilizing resources, and catalyzing intense and urgent action.

Issue Brief Series: Accidents and Injuries

In 2001, an estimated 685,000 children under the age of 15 were killed by unintentional injuries, mostly from road traffic injuries, drowning, burns, falls and poisonings. Hundreds of thousands of children suffered injuries that did not result in death, often leaving them with permanent disabilities. Worldwide, approximately 20% of deaths due to unintentional injuries occur in children under 15 years old. Indeed, injuries are the leading cause of death and disability for children over the age of one in many industrialized countries.

A child's environment plays a critical role, both in the occurrence and the severity of an injury. Most injuries take place in or near a child's home where unsafe play areas and play things may often be found, as well as access to chemicals, medicines, poisons and other dangers. Age, sex and economic factors are important determinants of injury incidence and severity. Not only are children particularly prone to injuries, but also the types of injuries depend on age: very young children tend to be more at risk for poisoning, drowning and burns while older children and adolescents are more at risk for road traffic injuries. Males are nearly two times more at risk than females, both in terms of disease burden and death from injuries.

Road traffic injuries are among the top causes of child disability and death in the world and are the leading cause of death in children

ages 5-14 in high-income countries. Children under five have the highest **drowning** mortality rate in the world. Over half of the global mortality and 60% of healthy days of life lost due to drowning occur among children under 15. Globally, fire-related **burns** are one of the 15 leading causes of death and burden of disease among children and young adults, ages 5-29 years. Over 90% of fatal fire-related burns occur in low- and middle-income countries.

Children, more than any other age group, suffer injury from **falls**. Where and how children fall is closely related to their age, with the very young most frequently falling in and around the home, and older children likely to fall from playground equipment. Children can encounter toxic exposures, or **poisonings**, in many different places but most occur in the home setting. Some workplaces may pose poisoning risks to child and adolescent workers.



... a Global Concern

- In Asia, 900,000 deaths from injury take place every year.
- In the low and middle income countries of the Eastern Mediterranean region, road traffic injuries are the second leading cause of death in the 5 to 14 year age range.
- Africa has the highest mortality rate from injuries in the world.
- The Western Pacific region reports 220,000 child deaths (ages 0-14) per year due to injuries.
- Road traffic injuries and drowning were the two leading contributors to healthy years of life lost in Latin America and the Caribbean as reported in 2002.
- Over one-third of child deaths, age 1-14 years, in Europe are due to injuries.

Children's Vulnerability to Injuries

Behavioral: Young children explore by touching and putting things in their mouths, which can lead to burns, poisonings and other ill-health effects. Older children play, take on new responsibilities and seek out adventures. When they have not attained the judgment to do these things safely, injuries often result.

Physiological: Being smaller and closer to the ground, they may be exposed to risks that go unnoticed by adults. For example, children's size makes them hard to see from a vehicle, increasing their risk of involvement in a road crash.

Developmental: Children, being immature and lacking the psychological development to recognize and manage danger situations, may more readily take actions that they do not comprehend to be risky. They are easily distracted, tend to focus on immediate tasks and have not yet gained the skills, strength and endurance to manipulate certain physically challenging situations for their own safety.

Acting to safeguard children's environments can save millions of lives, reduce disease and provide a safer, healthier world for our children's future.

See the *Healthy Environments for Children Alliance Framework for Action*

Actions at Every Level Make the Difference

Childhood injuries are preventable and everyone can play a vital role. National and local governments, community organizations, educators, media, city planners, engineers, health professionals, parents, family members and children themselves must work together to prevent unintentional injuries. Governments can implement environmental modifications, such as installing road signs near schools, reducing speed limits in school zones and employing other traffic calming techniques. They can change engineering and structure requirements, pass and enforce consumer protection and safety laws, and better enforce drunk driving laws. Governments can support educational campaigns to change people's behavior, possibly including injury prevention counseling based on national or local injury statistics.

Settings-based Interventions

Parents and other caregivers must teach children about safety on the roads, around water, in the home and in the community. They must always use available safety equipment, such as vehicle safety belts, child restraint seats in cars, safety helmets, smoke alarms, window bars, gates and fences to ensure safe play areas and create barriers to bodies of water. Constant supervision of young children is critical. A review of home safety situations is a relatively easy and low-cost step. While prevention of injuries is the most important task, learning first aid and having basic first response supplies on hand, as well as keeping emergency phone numbers available is important.

Teachers and administrators can teach children about safety and self-protection and must also provide a safe environment in which children can learn. Bicycle safety, pedestrian safety, avoiding contact with toxic substances and conducting home safety audits are topics that can be incorporated into school injury prevention curricula. Local police, fire departments and ambulances/health centers can be invited to take part in teaching activities.

Community leaders can advocate for child safety. They can establish child safety education centers and promote injury prevention. This could include documenting key causes of injury in children and promoting information and awareness campaigns based on these statistics. The community can motivate and support local emergency personnel, to increase awareness and provide information to community members on safety precautions.

At Home

At School

In the Community

www.who.int/heca/