INJURY HOSPITALIZATION





INJURY HOSPITALIZATION FOR CHILDREN, AGES 0-9, AND ADOLESCENTS, AGES 10-19

Because of their size, growth and development, inexperience and natural curiosity, children and teenagers are particularly vulnerable to injury.



Child injury is predictable and preventable. It is also among the most underrecognized public health problems facing our country today.





NATIONAL ACTION PLAN FOR CHILD INJURY GOALS:

- Raise awareness about the problem of child injury and the effects on our nation.
- Highlight prevention solutions by uniting stakeholders around a common set of goals and strategies.
- Mobilize action on a national, coordinated effort to reduce child injury.



HOW ARE WE DOING?

Unintential injury is the leading cause of child and adolescent mortality, from age 1 through 19.

Homicide and suicide, violent or intentional injury, are the second and third leading causes of death for adolescents ages 15 through 19.

For those who suffer non-fatal severe injuries, many will become children with special health care needs.

Effective interventions to reduce injury exist but are not fully implemented in systems of care that serve children and their families.

Reducing the burden of nonfatal injury can greatly improve the life course trajectory of infants, children, and adolescents resulting in improved quality of life and cost savings.



Injuries have associated risk factors which can be predicted and modified. Therefore, injuries must not be viewed as random accidents, but as preventable occurrences in need of organized efforts to save lives.

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FEDERAL OBJECTIVES

Reducing the burden of non-fatal injury can greatly improve the quality of life and cost saving for children, adolescents and their families.

Decrease the number of hospital admissions for non-fatal injury among children, ages zero through nine and adolescents, ages 10 through 19.



include motor vehicle crashes, suffocation, drowning, poisoning, fires, and falls.





SIGNIFICANCE

Children are exposed to many hazards and risks as they grow and develop into adulthood, and unintentional injuries are the leading cause of death and disability for children and teenagers in the United States.

The physical, social, cultural, political and economic environments in which they live can significantly increase or decrease their injury risks.



EXTERNAL CAUSES OF UNINTENTIONAL CHILD INJURIES

Rates of traffic-related injuries are highest for children from age 5-19 years.

Falls are the leading cause of non-fatal injuries.

Death rates for drowning exceed those from falls, fires, pedal cycle injuries, pedestrian injuries and poisoning.



Leading Injuries can affect anyone,
regardless of age, race, or economic
status. More Delawareans die from
unintentional injuries such as motor vehicle
crashes and falls in the first four decades of
life than from any other cause. Injuries
have physical, emotional, and financial
consequences that impact lives of
individuals, their families, their
communities, and society. The financial
burden of injury-related lifelong disability
has extensive and wide-ranging effects. All
this, despite the fact that many injuries and
acts of violence are preventable.



