FACTS ABOUT CHILDREN AT HIGHER RISK FOR ACCIDENTAL INJURIES

Accidental childhood injury rates vary with a child’s age, gender, race and socioeconomic status. Poverty is the primary predictor of injury risk. Despite an overall decline in injury-related death, death rates for children of low-income families continue to increase.

- Injuries to children of low-income families result in more fatalities than injuries to children with greater economic resources. Children from low-income families are twice as likely to die in a motor vehicle crash, four times more likely to drown and five times more likely to die in a fire.

- Several factors common to low-income families may increase a child's risk of injury, including single-parent households, lack of parental education, young maternal age and multiple siblings.

- Children from low-income families live in more hazardous environments that may increase their risk of injury. Risk factors include substandard and overcrowded housing, lack of safe recreational facilities, proximity of housing to busy streets, inadequate childcare or supervision, increased exposure to physical hazards and limited access to health care.

- Low-income families are less likely to use safety devices, due to lack of money, lack of transportation to obtain safety devices, lack of control over housing conditions or all of these.

Children ages 4 and under account for 49 percent of accidental injury-related deaths among children ages 14 and under.

- Infants have higher rates of accidental injury-related death than older children, particularly from suffocation, drowning, falls and motor vehicle occupant injury.

- Preschoolers are developing motor skills but have poor impulse control and judgment. Their natural curiosity and lack of fear can lead them into potentially dangerous situations, and can result in drowning, residential fire and burn injury, poisoning, pedestrian injury and airway obstruction injury.

At virtually all ages, for the majority of causes of injury, males have significantly higher risk of death and injury than females, primarily due to greater exposure to activities that result in injury and patterns of risk-taking and rougher play.
Racial disparities in accidental injury rates appear to have more to do with increased likelihood of living in an impoverished environment than with ethnicity.

- Among children ages 14 and under, Native American and African-American children have the highest accidental injury death rates in the United States – one and a half times the rate for white children.

- More than 40 percent of Native American children and 30 percent of African-American children are from low-income families. These children are more likely to lack health insurance; have difficulty obtaining appropriate and necessary medical care; have lower family incomes, creating significant financial barriers to care; receive care in hospital emergency rooms; and practice fewer safety behaviors. They are less likely to receive lifesaving preventive services.

Children with developmental disabilities, both physical and psychological, have higher rates of injury. Sensory neural deficits, such as blindness or deafness, may also increase the risk of certain types of injury.

- Children with cognitive, emotional or social limitations have significantly higher rates of injury, which may be due in part to a lack of appropriate prevention education.

- Children with attention deficit hyperactivity disorder are more likely to suffer from bicycle- and pedestrian-related injuries, head injuries or multiple injuries. They are also more likely develop functional limitations as a result of their injuries.

Children living in rural areas are at greater risk from accidental injury-related death than children living in urban areas. These children are especially at risk from drowning, motor vehicle crashes, unintentional firearm injury, residential fires and agricultural work-related injury.

- Injuries in rural settings occur in remote, sparsely populated areas that tend to lack organized systems of trauma care, resulting in prolonged response and transport times. A short supply of medical facilities, equipment and personnel to treat injuries in rural areas also contributes to increased risk.

- Minority children living in rural areas are especially at risk from accidental injury-related death. These children represent a smaller percentage of the rural population, and their specific needs are unlikely to be met.

- Higher injury fatality rates in rural communities are due in part to the high number of farm-related injuries. Children account for 20 percent of all injury-related farm fatalities and represent an even larger portion of nonfatal injuries.

- Inner-city children are at greater risk for severe nonfatal injuries than suburban and rural children. However, their mortality rates from injury are lower, possibly due to proximity to hospitals and trauma centers.