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“We cannot accept injuries as just accidents that will happen. If a disease were killing our children at the rate that unintentional injuries are, the public would be unbelievably outraged and demand that this killer be stopped(1).”

Injuries are currently a leading cause of death and disability in the world and account for more than 5 million deaths each year among all ages. More than 100 children die every hour because of injuries. Unintentional injuries account for almost 90% of these cases. This WHO report, spread over 232 pages with seven chapters, provides a comprehensive global assessment of childhood unintentional injuries and prescribes measures to prevent them. The overall aims of the report are (i) to raise awareness about the magnitude, risk factors and impacts of child injuries; (ii) to draw attention to the preventability of child injuries and present what is known about the effectiveness of intervention strategies; and (iii) to make recommendations that can be implemented by all countries to reduce child injuries effectively. It concludes that if proven prevention measures were adopted everywhere at least 1,000 children’s lives could be saved every day(1).

FACTS ABOUT CHILD INJURIES

Injuries are the leading cause of death for children over 9 years. Road traffic injuries and drowning account for nearly half of all unintentional child injuries. The top five causes of injury related deaths are (Fig. 1):

1. Road traffic injuries: They kill 260,000 children a year and injure about 10 million. Road traffic injuries alone are the leading cause of death among 15–19 year olds and the second leading cause among 5–14 year olds.

2. Drowning: It kills more than 175,000 children a year. Every year, up to 3 million children survive near drowning incident leading to brain damage in many survivors. Non-fatal drowning has the highest average lifetime health and economic impact of any injury type.

3. Burns: Fire-related burns kill nearly 96,000 children a year and the death rate is 11 times higher in low- and middle-income (LMI) countries than in high-income countries.

![Fig.1 Distribution of global child (0–17 years) injury deaths. Other unintentional includes categories such as smothering, asphyxiation, choking, animal and venomous bites, hypothermia and hyperthermia, and natural disasters.](image-url)
4. **Falls**: Nearly 47,000 children fall to their deaths every year, and hundreds of thousands more sustain less serious injuries from a fall.

5. **Poisoning**: More than 45,000 children die each year from unintended poisoning.

The report highlights the plight of children in the developing world and shows global inequities in child injuries. Children in poorer countries and those from poorer families in better-off countries are the most vulnerable. More than 95% of all injury deaths in children around the world occur in LMI countries. Children in Africa have the highest unintentional injury rates in the world at 53 per 100,000, followed by Southeast Asia (49 per 100,000), compared with an average global rate of 39 per 100,000 children. Countries such as Australia, Sweden, the UK and Canada have the lowest rates of child injury, at around five per 100,000 children. High-income countries have reduced their child injury deaths by up to 50% over the past three decades by implementing multi-sectoral, multi-pronged approaches to child injury prevention (1).

**KEY RECOMMENDATIONS**

The report promotes a set of seven overarching recommendations to address child injury (Box).

**STATEMENT IS NOT ENOUGH – ACTION IS NEEDED**

Despite the size of this burden and the known potential for prevention, the lack of global attention to injuries in terms of both policies and resource investments in public health is surprising. About half of these deaths could be prevented by proven measures such as expanding the use of car seats, covering wells and pools of water in areas where children play, erecting barriers to keep young people away from construction sites etc. (1).

Though child survival initiatives have been highly successful, further improvements in child health will require broad programs for injury reduction and control. Economic analysis needs to define both the costs of injuries to health systems and the cost of response. Also, health-financing schemes need to integrate injury care (2). Every child lost to injury or severely disabled will cost the future economy of that country. Putting into practice what is known about reducing child injury will help meet the Millennium Development Goals. It will reduce costs in the health care system, improve the capacity to make further reductions in injury rates, and will protect children. It is time for the global health community to recognise the toll of childhood injuries and make concerted efforts to reduce that burden. Child health without child-injury prevention and control is no longer acceptable.

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**REFERENCES**
