



Child Injury and Inequalities

Injuries cause more deaths to children 5 to 19 years of age than all other causes combined. Every year in the European Union, over 9,000 children ages 0 to 19 die of injuries, representing nearly 25% of the total number of child deaths.ⁱ

Child injuries have a very steep social gradient, with children from deprived communities at much higher risk of severe injuries and death. Child injury death rates in low income communities are up to 5 times higher than in wealthier communities within the same country.ⁱⁱ

Proven, cost-effective strategies exist to prevent these tragedies but they are inconsistently implemented across and within countries.^{i,iii} If all countries in the EU matched the performance of the safest country, 3 in 4 child injury deaths could be prevented.^{iv}

What are the causes of child injuries and fatalities?

Two out of three fatal injuries to children in the EU are due to unintentional injuries including road traffic incidents, drownings, poisonings, falls, burns, choking and suffocation. The remaining third are the result of intentional injuries (child maltreatment, peer violence or self-directed violence) or those injuries classified as undetermined intent.ⁱⁱⁱ

Although the number of unintentional injury deaths is higher than intentional injury deaths, the rates of non-fatal injuries due to maltreatment, peer violence and self-directed violence are alarmingly high across Europe.^v

In the EU approximately 3000 children aged 0-19 years die annually as a result of intentional injury and undetermined intent.ⁱⁱⁱ

It is estimated that 90% of child maltreatment alone goes undetected and the WHO estimates that at minimum, 18 million children under 15 years of age in their European region suffer maltreatment.^{vi}

Child injury as a major cause of health inequalities in Europe

EU countries have significant child poverty rates ranging from 10% to 33%. Between 2005 and 2009, eleven out of the twenty EU countries analyzed showed increasing rates of child poverty, including in high income countries such as Sweden, France, Norway, Germany and Luxembourg.^{vii}

26.5 million children across the EU are at risk of poverty or social exclusion. This is a half million more children at risk than one year ago, and the EU is moving away from its 2020 child poverty goals.^{viii}

Children in low-income countries and deprived communities are at highest risk of injuries. Environmental factors such as unsafe housing structures and proximity to dangerous roadways increase the risk of unintentional injuries, and factors such as economic hardship and low social cohesion increase the chance of maltreatment, peer violence and self-directed harm and suicide.^{ix x}

Substance abuse, especially alcohol misuse, is repeatedly shown to be a major factor in both unintentional and intentional injuries. Alcohol is a factor in 19% of child homicides, 23% of fatal road traffic incidents to children under 15 years,^{xi} in 30 – 50% of all adolescent drownings,^{xii} and in the majority of fatal house fires.^{xiii}

FACTS



How wide are the gaps in protection?

Injury mortality rates for children of long term unemployed parents are 13 times higher than children of affluent parents.^{xiv}

Studies in the UK showed that children of unemployed parents have a 20 times higher risk of being killed as a pedestrian or cyclist than those from high income families, and a 38 times higher risk of dying in a house fire.^{x,xiv}

Analysis of EU unemployment and injury data show that for every 1% increase in unemployment rates in a country, rates of fatal injury due to violence and suicide increase by 0.8%.^{xv}

Child injury death rates vary widely between the EU countries with the highest and lowest rates. There is a:

- 14 times difference in rate of pedestrian injury deaths
- 10 times difference in rate of motor vehicle passenger injury deaths
- 36 times difference in rate of moped/motor scooter injury deaths
- 40 times difference in rate of cycling injury deaths
- 18 times difference in rate of drownings
- 9 times difference in rate of fatal falls
- 40 times difference rate of poisoning deaths
- 21 times difference rate of burn related deaths
- 20 times difference in rate of choking/strangulation related deathsⁱ
- 10 times difference in rate of intentional injury fatalitiesⁱⁱⁱ

Closing the gaps

Each cause of child injury can be addressed through proven prevention strategies that include environmental modifications (e.g., safe pedestrian crossings, barriers around water), legislation (e.g., speed limits), correct use of prevention products (e.g., child restraint systems, window guards, smoke detectors) and increasing awareness (e.g., home visitation programmes).

Increasing the uptake of such strategies is a critical part of reducing social and health inequalities for children, as well as reducing the economic burden that injuries and the resulting disabilities cause communities.

- 1 Euro spent on smoke detectors save 12 Euros
- 1 Euro spent on child restraint systems saves 30 Euros
- 1 Euro spent on bicycle helmets saves 34 Euros
- 1 Euro spent on paediatric prevention counselling saves 6 Euros
- 1 Euro spent on poison control services saves 5 Euros^{xvi}
- 1 Euro spent on road safety improvements saves 3 Euros^{xvii}
- 1 Euro spent on home visitation programmes saves 19 Euros.^{xviii}

The figures from the Centers for Disease Control have been converted from US dollars.



Further Reading:

[National Action to Address Child Intentional Injury Report](#)

[Child Safety Report Card 2012: Europe Summary for 31 countries](#)

[The Child Safety Good Practice Guide](#)

References

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