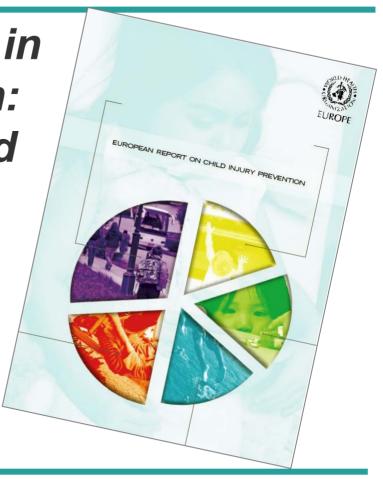
Unintentional injuries in the European Region: Promoting safety and equity

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In this presentation:

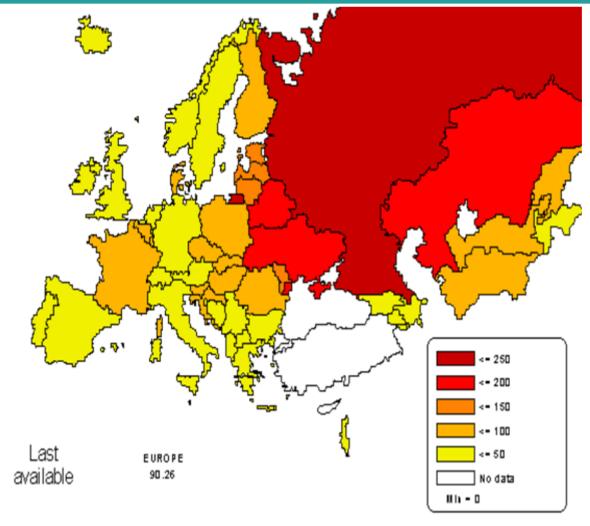
- Overview of injuries in Europe
- Unintentional injuries in children
 - Burden
 - A major source of inequities
- The response



Global and European overview



Nowhere in the world is the difference between poorer and wealthier countries in mortality from injury as high as in Europe



People in LMIC are 4 times more likely to die from injuries than people in HIC.

Achievements of HIC indicates that closing this gap IS possible.

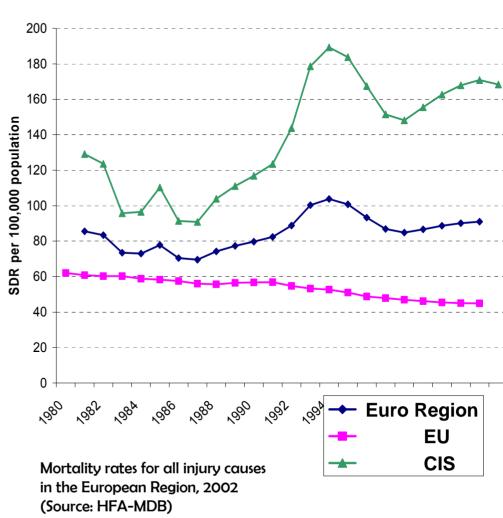
One third of the injuries are due to violence.



Standardized mortality rate from all injuries in the WHO European Region for both sexes, 2002

If nothing is done:

- The gap between CIS and EU will continue to widen
- Opportunity to transfer experience from other parts of the Region will be lost
- Opportunity to save
 500,000 lives will be lost

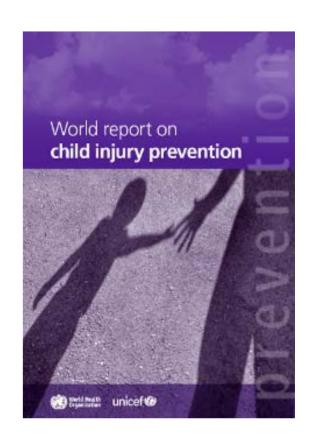




•Inequalities in injuries within and between countries will worsen

The world report is the first comprehensive global assessment of childhood unintentional injuries

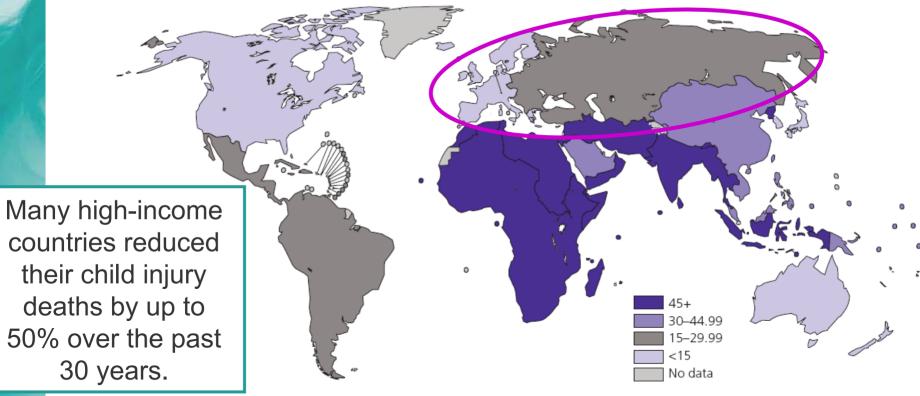
- Unintentional injuries are the leading cause of childhood death over 9 years old
- 830 000 children die yearly and tens of millions suffer lifelong disabilities
- 95% of child injuries occur in developing countries
- Top five causes of injury deaths are:
 - road crashes killing 260 000 children a year.
 - drowning killing more than 175 000 children a year.
 - burns killing nearly 96 000 children a year.
 - falls killing nearly 47 000 children every year.
 - poisoning killing over 45 000 children each year.





At least 1000 lives a day could be saved globally

Rate of unintentional injuries per 100 000 children,^a by WHO region and country income level, world, 2004



Africa	Americas		South-East Asia	Europe		Eastern Mediterranean		Western Pacific	
LMIC	HIC	LMIC	LMIC	HIC	LMIC	HIC	LMIC	HIC	LMIC
53.1	14.4	21.8	49.0	7.9	25.4	41.6	45.7	7.8	33.8



^a These data refer to those under the age of 20 years HIC=high-income countries; LMIC=low-income and middle-income countries

Source: The global burden of disease: 2004 update

In Europe, unintentional injuries are the leading threat for children and teenagers

- 42 000 deaths in children and adolescents 0–19 years (115 deaths a day)
- Huge drain on health and societal resources:
 - 5 million estimated annual hospital admissions
 - 70 million emergency department attendances in the Region

Table 2.1
Ranking of 15 leading causes of death in people aged 0—19 years in the WHO European Region, 2004

Rank	Cause of death
1	Perinatal causes
2	Lower respiratory infections
3	Diarrhoeal diseases
4	Congenital anomalies
5	Road traffic injuries
6	Self-inflicted injuries
7	Meningitis
8	Drowning
9	Leukaemia
10	Violence
11	Upper respiratory infections
12	Poisoning
13	Endocrine disorders
14	HIV/AIDS
15	Epilepsy



Source: The global burden of disease: 2004 update

Why are children are particularly at risk?

- Children are not just little adults.
- They live in a world built for adults.

Strong association between injuries and a child's:

- age
- developmental stage
- interaction with the world
- activities





Children and inequalities









Injuries are the leading cause of inequality in child death in Europe between and within countries



Photo: (c) T. Divakov

- 5 out of 6 of child injury deaths are in poorer countries.
- There is up to an 8-fold difference between countries with the highest and lowest injury death rates.
- Death rates in the Commonwealth of Independent States are 3 times those in the European Union.
- Even in high-income countries, unintentional injuries account for 40% of all child deaths.
- Within countries, death rates can vary as much as 9 times.



Children living in unsafe environments and in poverty are five times more likely to die from injuries than their richer peers

- Exposed to fast traffic, lack of safe areas to play, crowded homes with unsafe structures
- Poorer families may not be able to afford safety equipment
- Supervision may be difficult in families with a single parent, or affected by alcohol and drug abuse
- Once injured, poorer children may have less access to high-quality medical and rehabilitation services



Photo: (c) N. Di Tanno



Photo: (c) N. Di Tanno



The environment influences the three domains of prevention...



Total exposure to sources of danger



Opportunities for protection



Consequences of injuries



Huge opportunities to reduce the gap

If all countries reached the same death rates as the lowest in the Region, Europe could potentially prevent 3 out of 4 children's injury deaths.

- Europe has some of the safest countries in the world.
- These countries have:
 - embraced safety as a societal responsibility;
 - systematically focused on providing safe environments; and
 - developed evidence-based programmes.
- Their experience is a resource for the whole Region and needs to be shared.



The winning strategy









Child injuries are preventable and measures are cost-effective

- Report describes a large number of effective interventions
- Some give very good value for money
- There is a huge potential for prevention by addressing underlying risks and exposures

Table 8.2
Financial savings from selected injury prevention interventions

Expenditure of €1 each	Savings (€)
Smoke alarms	69.0
Car child restraints	29.0
Bicycle helmets	29.0
Motorcycle helmets	16.0
Upgraded marked pedestrian crossings	14.0
Roadside lighting	10.7
Guardrails on roadsides	10.4
Prevention counselling by paediatricians	10.0
Area-wide speed and traffic management	9.7
Poison control centres	7.0
Daytime running lights (normal bulbs)	4.4
Pedestrian bridges or underpasses	2.5



Sources: Data from *Cost effective EU transport safety measures* Cost—benefit analysis of measures for vulnerable road users

, Miller & Lever

Reproducing safety strategies relevant to adults will not protect sufficiently children

- Prevention programmes should take into account the vulnerability of children and be multisectoral
- The most successful have been those that combine:
 - legislation, regulation and enforcement;
 - environmental modification;
 - product modification;
 - education and skill development; and
 - appropriate emergency medical care.





Preventing injuries VS. preventing inequality in injuries



Two different lines of thought



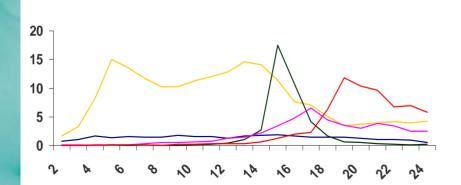
Safety-for-all strategies





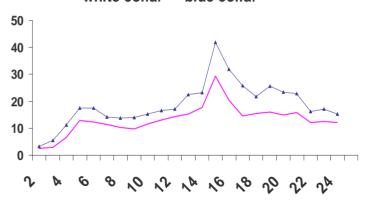
Prevention of injuries





Reduction of inequalities

white collar -- blue collar



Risk factors

Factors of inequalities



Laflamme et al. 2009

Safety-for-all strategies





Legislation, regulation, enforcement



Community-based programmes



Home safety education and home visitation programmes



Laflamme et al. 2009

Addressing mechanisms of health inequalities







- Differential consequences
- Differential vulnerability
- Differential exposure
- Differential social mobility



Health systems can play a central role in this new approach

- 1. Integrate child injury into a **comprehensive approach** to child health and development.
- 2. Develop and implement a **child injury prevention policy** and a plan of action.
- 3. Implement **specific actions** to prevent and control child injuries.
- 4. Strengthen health services to address child injuries.
- 5. Build capacity and exchange best practice.
- 6. Enhance the quality and type of **data** for child injury prevention.
- 7. Define priorities for **research**.
- 8. Raise awareness and target **investments** in child injury prevention.
- 9. Address **inequity** in child injury.



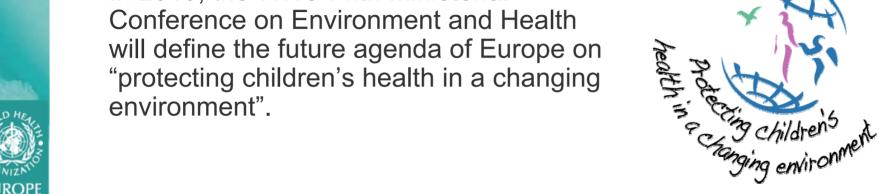
Framework for delivery

- Policy
 - WHA road safety and health and implementing recommendations of WRVH;
 - RC55/R9 on prevention of injuries
 - EU Recommendation on injury prevention
 - National policies
- Network of health ministry focal persons
- Bilateral and multilateral collaborations
- World and European reports and implementation
- Implementation and monitoring



Preventing injury is a priority of Europe's policy agenda

- The 2004 WHO Children's Environment and Health Action Plan for Europe identifies injuries as one of the leading causes of preventable death from environmental factors
- In 2005, a resolution of WHO Regional Committee for Europe urged countries to reduce death and disability from this cause
- In 2007, the Council of the European Union officially adopted the Council Recommendation on the prevention of injuries and promotion of safety
- In 2010, the WHO Fifth Ministerial Conference on Environment and Health





In conclusion:

- Unintentional injuries remain a leading cause of death and disability in Europe
- Inequalities exist between and within countries
 - Children are particularly vulnerable
- Health systems can play a leading role in addressing injuries
- Effective strategies are available to reduce inequities in injury
- Evidence base of what works summarised in European and World Reports



Further information on the WHO/Europe website

