

## **CHILDREN AT RISK**

Children are at significant risk from unintentional injury-related death and disability. Injury rates vary with a child's age, gender, race and socioeconomic status. Younger children, males, minorities and poor children suffer disproportionately. Poverty is the primary predictor of injury. Racial disparities in unintentional injury rates appear to have more to do with living in impoverished environments than with ethnicity. Strategies that reduce financial barriers to safety devices, increase education efforts and improve the safety of the environment are effective at reducing death and injury among populations at risk.

### ***LOW-INCOME CHILDREN***

- Unintentional injuries disproportionately affect poor children. Injuries to poor children also 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.
- Children ages 5 and under are more likely to live in poverty than any other age group. More than 3.9 million children ages 5 and under in the United States live in poverty.
- Several factors common to low-income families may increase a child's risk of injury, including single-parent households, lack of 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.
- Despite an overall decline in injury-related death, death rates for children of low-income families continue to increase. This phenomenon may be explained by the higher incidence of the most severe types of injuries, such as firearm and pedestrian injuries, among low-income children.

### ***NATIVE AMERICAN AND BLACK CHILDREN***

- Black and Native American children have disproportionate death and injury rates due to higher levels of poverty and lower levels of education, employment and income. These children are more likely to lack health insurance, have difficulty obtaining appropriate and necessary medical care, have lower 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.
- Among children ages 14 and under, Native American children have the highest unintentional injury death rate in the United States and are nearly two times more likely to die from unintentional injury than white children.
- More than 40 percent of Native American children are poor, which is more than three times the poverty rate of white children. Factors that contribute to higher death and injury rates among Native American children are more strongly associated with economic conditions than culturally based parenting differences.
- Among children ages 14 and under, black children have the second highest unintentional child injury death rate in the United States, a rate one and a half times that of white children.
- More than 30 percent of black children live below poverty level, a percentage twice that of white children.

## ***RURAL AND URBAN CHILDREN***

- Children living in rural areas are at significantly greater risk from unintentional 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 unintentional injury-related death. These children represent a smaller percentage of the rural population, and their specific needs are unlikely to be met.
- Higher death rates from unintentional injury in southern and mountain states reflect the high number of people living in rural and impoverished communities.
- 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 from sustaining 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.

## ***MALE CHILDREN***

- 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.

## ***YOUNG CHILDREN***

- Children ages 4 and under are at greater risk from unintentional injury-related death and disability and account for 49 percent of these deaths among children ages 14 and under.
- Infants have higher rates of unintentional injury-related death than older children, particularly from suffocation, 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 lead them into potentially dangerous situations. These children are more likely to die from drowning, residential fire and burn injury, poisoning, motor vehicle occupant injury, pedestrian injury and airway obstruction injury.
- Leading causes of unintentional injury-related death vary throughout childhood and are dependent upon a child's developmental abilities and exposure to potential hazards. Injuries tend to occur when a task's demands exceed the child's abilities to complete the task safely.

## ***CHILDREN WITH SPECIAL NEEDS***

- 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 and multiple injuries than children without ADHD. Children with ADHD are also more likely to suffer more severe injuries and develop functional limitations as a result of their injuries.

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