



Injury and Violence Prevention: Frequently Asked Questions

- What are the major causes of injury?
- Why are unintentional injuries and violence important public health issues?
 - What are groups are affected?
 - What is a legislator's role in injury prevention?
- What other resources do you have on injury and violence prevention?

What are the major causes of injury?

The leading causes of fatal and nonfatal injury differ by age group. According to the Center for Disease Control and Prevention (CDC);

- Falls are the overall leading cause of nonfatal injury, responsible for more than 8 million injuries each year across all age groups.
- Motor vehicle-related accidents are the overall leading cause of injury deaths, causing more than 3 million injuries each year.
- Poisoning is the second leading cause of death overall and causes most injury deaths for adults between the ages of 35 and 54.
- Among children, unintentional suffocation is the leading cause of injury death for children under the age of one, while unintentional drowning causes the most injury deaths for those aged one to four.
- Suicide and homicide are ranked as the fourth and fifth leading causes of death, respectively, among Americans aged 20 to 49.
- Other major causes of injury are overexertion, cuts or punctures, assault and animal bites or stings.

Why are unintentional injuries and violence important public health issues?

Unintentional injuries are the leading cause of death for people ages 1 to 44 and, according to the CDC, each year's injuries have an estimated lifetime cost of \$406 billion in medical expenses and lost productivity. Unintentional injuries are preventable, and can be caused by falling, motor vehicle crashes, unintentional drug overdose, fire and fireworks, and drowning, among other causes. Intentional injuries, or the deliberate attempt to hurt oneself or others, are also an important public health issue. Suicide and homicide are both among the leading causes of death among teens and adults, and homicide is the fourth leading cause of death for children. Annually, more than 1.3 million injuries are the result of assault. Child maltreatment, including physical, sexual, and emotional abuse and neglect, result in the deaths of more than 1,500 children under age 18 and more than 900,000 children younger than age 17 were confirmed by social services to be victims of maltreatment in 2006. In addition to the immediate injuries from maltreatment, victims are at higher risk of suffering from future health problems, including chronic diseases, as well as additional forms of violence. Other forms of violence are elder abuse/maltreatment, intimate partner violence and sexual assault. With nearly 50 million each year, injuries affect the physical and economic well-being of both individuals and states. States bear this burden through Medicaid, state employee health benefits, uninsured emergency care, child welfare services and public safety costs. States also lose tax revenue when those injured and their caregivers miss work. As such, investing to prevent injuries can lead to saved lives and money. For example, a \$46 child's car seat saves \$1,900 in societal costs. A \$1,250 community-based fall-prevention program can avoid \$10,800 in costs to society, according to the CDC.



What age groups are affected?

Injuries affect people of all ages, but some injuries are particularly prominent in specific age groups. Teens and young adults are disproportionately injured or killed in motor vehicle crashes and are prone to be the victims of violence. The elderly are at particular risk of being injured in a fall. Young children and the elderly are both at greater risk of injury in a fire or of suffocating. Children are more likely to drown than adults. Knowing the group at high risk of a certain type of injury can assist in targeting prevention efforts and activities.

What is a legislator's role in injury prevention?

The CDC advocates a public health approach to preventing injuries and violence. Legislators can improve injury prevention efforts by understanding the types of injuries and populations affected in their states, the source of state injury prevention funds, encouraging integration of injury and violence prevention activities into existing programs, enacting laws that reduce injuries and funding comprehensive injury and violence prevention programs. While prevention efforts vary based on the nature of the injury being addressed, responses usually include educational outreach to inform individuals of steps they can take to reduce the risk of injury, as well as community and societal changes to promote positive behaviors and reduce risky behaviors. Regulations that enhance safety can be enacted, such as graduated driver licensing, child restraint requirements, minimum legal drinking age restrictions or building codes that require smoke detectors. Risky behaviors, such as driving without a seat belt or riding a motorcycle without a helmet, can be penalized.

Other Web Resources:

[Association of State and Territorial Health Officials \(ASTHO\)](#)
[Centers for Disease Control and Prevention, National Center for Injury Prevention and Control webpage](#)
[Children's Safety Network](#)
[Safe Kids USA](#)
[Safe States Alliance \(formerly STIPTA\)](#)



For more detailed information, please see NCSL's Injury and Violence Prevention Overview webpage at <http://www.ncsl.org/default.aspx?tabid=13951>.