

Unintentional Child Injuries

What this is about...

Unintentional injuries are also referred to as 'accidents'. Falls are the leading cause of unintentional injuries, followed by motor vehicle and road injuries, and poisoning from drugs and medicines. Injuries are related to children's age and development stage and significantly more males than females suffer from unintentional injuries. Most unintentional injuries are predictable and therefore preventable.

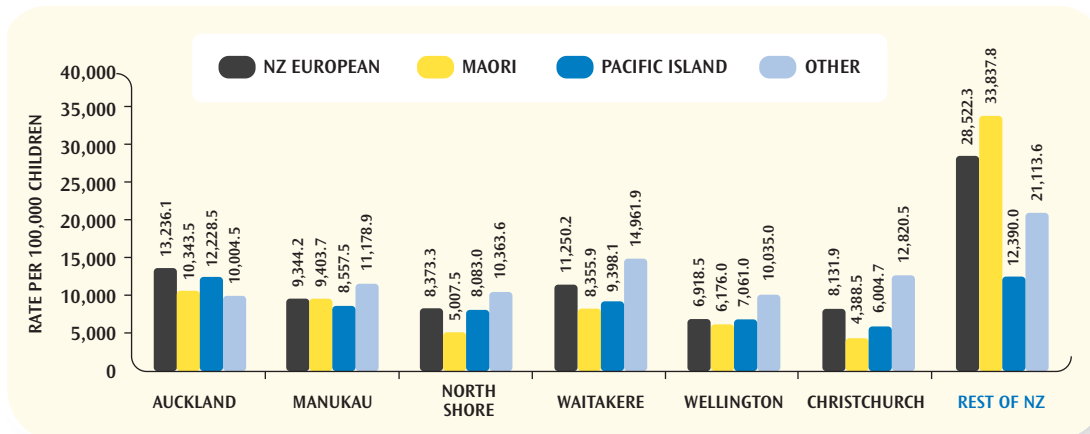
Safekids notes that New Zealand's rates for child and adolescent injury or death are higher than in most developed countries. Hospital admissions for injury are a major contribution to health costs, and the average cost of an injury admission is 10% greater than that of a non-injury admission.

This indicator measures the rate of unintentional child injuries per 100,000 children aged 14 years and under between 1994 and 1998.¹⁵⁷

What did we find ?

- For all specified injury types between 1994 and 1998, Auckland had the highest overall rate of unintentional child injury among children aged 14 years and under (12,017), followed by Waitakere (10,663) and Manukau (9,320) cities.
- Nationally the rate of unintentional injury among Maori children is higher than other ethnic groups. However, within the six cities the highest rates tend to be among 'Other' and European. In fact, the rate of unintentional injury among 'Other' ethnic groups is the highest in all cities except Auckland.

TOTAL RATE OF UNINTENTIONAL INJURY PER 100,000 CHILDREN AGED 14 YEARS AND UNDER, BY ETHNICITY (1994 TO 1998 COMBINED)¹⁵⁸



Data Source: Safekids

There is a strong association between the increasing risk of injury of child pedestrians and increasing traffic volumes.¹⁵⁹ In addition, high density of curb parking has also been associated with greater risk of injury. As a result, risk of pedestrian child injuries increases with greater numbers of parents taking children to school.

157 Data measures number of admissions to hospital and not numbers of children. It only reflects injuries that result in admission to hospitals and does not include presentation to Accident and Emergency clinics, GPs, or private hospitals. Therefore, the data only reflects the 'tip of the iceberg' with regard to childhood injury.

158 Rate calculated using 1996 Census data.

159 Roberts, I., Norton, R., Jackson, R., Dunn, R. and Hassall, I. 1995. Effect of Environmental Factors on Risk of Injury of Child Pedestrians by Motor Vehicles: A Case Control Study. British Medical Journal.

The rate of unintentional injuries reflects a complex link between socio-economic status, education, effectiveness of injury prevention campaigns and other factors. For example, research shows that children pedestrians are more at risk if they belong to a lower socio-economic group, a single parent family, or a family with limited access to vehicles.¹⁶⁰ Thus cities with indicators of lower socio-economic status are perhaps more vulnerable to unintentional child injuries.

160 Injury Prevention Research Centre (1995). Dangers to Child Pedestrians. Fact Sheet number 2. Department of Community Health, Faculty of Medicine and Health Science, The University of Auckland.