

CHILD INJURY PREVENTION: MAKING A SAFE PLACE FOR CHILDREN

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ABSTRACT

Every year in India, hundreds of young people and their families suffer from injuries. As nutritional and communicable illnesses gradually reduce, injuries will become the primary cause of morbidity, death, and disability. The progress made in terms of children's survival and health to date is in danger. The information at hand shows that among children, less than 18 years, 10% to 15% of fatalities, 20% to 30% of hospital admissions, and 20% of impairments are brought on by trauma. According to the data that is currently available, injuries are thought to cause around a million children in India to die and two million hospitalise each year. In India, the most common causes of injuries are poisoning, falls, drowning, and road traffic injuries (RTIs). RTIs, falls, and poisoning are the main causes of death in those aged 5 to 18 years, whereas drowning and burns are the leading fatalities in those under 5 years old. Recent years have seen a significant increase in the suicide rate among younger age groups, namely those between 15 and 20 years old. The majority of low-income households, those living in rural regions, and more men are impacted by injuries. Injury to children can be avoided and is foreseeable. Children are more prone to accidents than adults because they have limits in terms of size, development, eyesight, hearing, and risk perception. As a result, it's critical to create

safer goods, as well as safer home, workplace, and transportation environments, and to increase parental and carer monitoring. The main strategies include improving environmental quality, modifying vehicles and products, enforcing laws, developing knowledge and skill sets, and making high-quality trauma treatment accessible. The prevention and treatment of child injuries need high-quality data collection, the development of human and financial resources, the reinforcement of evidence-based policies and programmes, the coordinated application of countermeasures, monitoring, and assessment. Preventing and controlling child injuries is essential and ought to be a fundamental component of a kid's survival and well-being..

Keywords: Accident, Falls, Prevention, Child Safety, Injury

INTRODUCTION

Children make up 38% of the population of India. Over the past three decades, mortality has decreased due to the implementation of child health policies and programmes by successive governments, the growth of child survival projects, and the availability of preventative and therapeutic medications.

The agenda remains undone. The statistical and shift in sociodemographics combined with environmental and There have been behavioural changes as a result of globalisation, motorization, urbanisation, migration, and media influence. Injury as a major public health issue emerging. The definition of an injury is "body harm resulting to abrupt energy transmission (mechanical, chemical, thermal, and/or or radiant) as a consequence of the agent, host, and surroundings and beyond a person's physical capacity. Based on purpose, injuries are divided into deliberate and unintentional categories.

Road traffic injuries (RTIs), falls, burns, poisoning, drowning, sports injuries, falls from objects, and injuries sustained in catastrophe circumstances are examples of unintentional injuries. Intentional injuries include suicide, assault, child abuse, and murders. Children can get injuries at home, on the road, at school, and even in some places of employment (child labour is frequent in India). Children are exposed to a variety of energy-producing items and surroundings as they grow from infancy to maturity; these injuries can pose serious risks to the children's safety and survival.

TRAFFIC ACCIDENT INJURIES

RTIs are responsible for 2% of all infant fatalities worldwide (10.7 deaths per 100,000 people).

RTIs were a factor in almost 262,000 fatalities among children and youth (0–19 years old),

which accounted for about one-third of all injury deaths in 2004 (more than 80% of which occurred in LMICs). RTIs rank second in the world for those aged 10 to 14 years, but they are the primary cause of mortality for those aged 15 to 19 worldwide. In India, RTIs are the second most common cause of death for those aged 10 to 14 and the top cause for those aged 15 to 19; males are disproportionately impacted compared to girls. 30% of fatalities in 2009 occurred in the 15–29 year age range (M : F :: 1:7), whereas 6% (based on NCRB) to 9% (based on MORTH) occurred in the <14 y age range. More youngsters from rural regions lost their lives in collisions; just 15% of all crashes occur in 32 major cities. Less than 16 years old made up 5–8% of the fatalities and 7–30% of the critically wounded in the Bangalore population-based research. Aarthi KK noted in a study of hospital research on RTIs that 20% of hospital treatment applicants were less than 20 years old. As in other Low and Middle Income nations, pedestrians and bikers account for the majority of child fatalities and injuries in India. There are more fatalities and serious injuries when youngsters are involved in collisions with big and medium-sized cars.

DROWNING

According to UNICEF and TASC's child injury surveys, drowning was the most common cause of death in every Asian nation they examined. In 2004, children drowning caused around 175000 deaths, with 98% of these deaths taking place in low- and middle-income countries. Estimates for South East Asia's drowning mortality rate range from 6.2 to 1.2 per 100,000 people, with estimates for non-fatal drowning falling between 2 and 3 million. In HICs, the rate is 1.2 per 100,000 people. According to NCRB data, in 2009, drowning caused approximately 20% of injury fatalities among children under the age of 14 in India, with a male-to-female ratio of 2.5:1. According to BRSIPP data, drowning accounted for 27% of all deaths in rural regions for children under the age of 18. In addition to fatalities from natural catastrophes, a lot of kids and teenagers drown for fun in rivers, ponds, pools, and lakes.

BURNS

Burns are a disabling disorder that causes excruciating pain, disfigurement, and long-term suffering. They can be caused by fire, scalds, or contact burns. The global burn mortality rate was 4/100000, with the largest fatality rates being in newborns. Nearly 96000 youngsters under the age of 20 are said to have perished worldwide from burn injuries. India and other countries have a disproportionately high rate of burns among females. Among those under the age of 14, burns (which include electrocution, explosions, electrical short circuits, fire crackers, etc.) accounted for over 10% (2200) of all deaths. According to the BRSIPP research, burns

accounted for 13% and 9% of injury fatalities as well as 5–10% of hospital admissions among children under the age of 18. In India, fire cracker injuries are a major source of injuries during festival seasons, especially resulting in severe injuries to the eyes that can potentially end in blindness.

FALLS

When kids start to walk and play, falls are a major cause of hospital admissions and deaths. Non-fatal falls accounted for around $\frac{1}{4}$ to $\frac{1}{2}$ of hospital emergency department contacts in 2004 and were the 13th greatest cause of DALYS loss. Estimated to have killed 20,000 children under the age of fourteen, falls ranked as the second most common cause of unintentional injury mortality in the MDS. According to NCRB, there was a significant underreporting of falls that claimed the lives of nearly 1000 children under the age of 14. In children under the age of 18, falls were the cause of about 7% of fatal injuries and 21% of nonfatal injuries. The second leading cause of brain injuries in youngsters and in rural areas is falls. Children frequently observe falls from trees, playgrounds, and structures (balconies, stairways, high rise buildings).

GENERAL POINTS TO PREVENT ACCIDENTS IN CHILDREN

Preventing accidents in children is a top priority for parents and caregivers. Children are naturally curious and active, which can put them at risk for various accidents and injuries. Here are some strategies to help prevent accidents in children:

Supervision: Always keep a close eye on young children, especially in potentially dangerous situations. Never leave them unattended, and ensure that older children are supervised as well, depending on the situation.

Childproof your home: Make your home safer by childproofing it. This includes installing safety gates, outlet covers, cabinet locks, and securing heavy furniture to prevent tipping. Remove or secure hazards like choking hazards and toxic substances.

Teach safety rules: Teach children age-appropriate safety rules and habits. This includes road safety, not talking to strangers, using seatbelts, and wearing helmets when riding bikes or participating in other sports.

Fire safety: Teach children about the dangers of fire and how to respond in case of a fire. Ensure smoke alarms are working, and have fire extinguishers and escape plans in place.

Water safety: Drowning is a significant risk for children, so always supervise them around water. Enroll children in swimming lessons and use appropriate safety equipment, such as life

jackets.

Car safety: Use appropriate child car seats and booster seats according to your child's age, weight, and height. Ensure the car seats are installed correctly.

First aid and CPR: Learn basic first aid and CPR techniques. Having these skills can be crucial in case of accidents and emergencies involving children.

Safe play areas: Create safe play areas for children, such as fenced-in yards or playgrounds with soft, impact-absorbing surfaces. Ensure play equipment is in good condition and regularly inspected for safety.

Supervised playdates: When your child has playdates, ensure they are supervised, and communicate with the other parents about any safety concerns or rules.

Teach stranger danger: Teach children about the dangers of strangers and what to do if they are approached by someone they don't know.

Safe storage: Keep dangerous items like medications, cleaning products, and sharp objects out of reach and in secure storage areas.

Bike safety: When children ride bikes, scooters, or skateboards, make sure they wear helmets and other protective gear. Teach them road safety rules.

Internet safety: Monitor your child's online activities and educate them about online safety, including not sharing personal information and being cautious about online contacts.

Sun safety: Protect your child from the sun's harmful rays by using sunscreen, hats, and sunglasses. Limit their exposure during peak sun hours.

Educate about risks: As children grow, talk to them about the risks associated with various activities and behaviours. Encourage them to make safe choices.

Model safe behavior: Children often learn by observing adults. Model safe behavior in all aspects of life, from wearing seatbelts to practicing good kitchen safety.

SUMMARY

Remember that child safety is an ongoing process that evolves as children grow and their abilities change. Regularly assess and update your safety measures to keep up with your child's development and changing risks. Child injury prevention is of paramount importance because it safeguards the lives and well-being of our most vulnerable population, our children. Injuries are a leading cause of child mortality and can result in profound physical and emotional suffering. By proactively addressing the risks of accidents and injuries, we can spare children and their families from the pain and long-term consequences of these incidents. Child injury



prevention also has significant economic and public health benefits, reducing the burden on healthcare systems and society as a whole. Ensuring children's safety contributes to their uninterrupted education and overall quality of life, empowering families to protect their loved ones. Moreover, it underscores our legal and ethical responsibility to shield children from harm and create a safer environment for their growth and development.

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