



National Association of County & City Health Officials

04-04

STATEMENT OF POLICY

PREVENTION AND CONTROL OF INJURIES

Policy

The National Association of County and City Health Officials (NACCHO) recognizes the considerable burden and impact of injuries and violence as a national public health problem and supports legislation that addresses social injustices that contribute to the disproportionate burden of injury among underrepresented, low-income, and socially disadvantaged populations. NACCHO encourages local public health officials to work with federal, state, and tribal public health agencies, and appropriate community partners to address injury and violence prevention in a manner commensurate with the size of the injury and violence problem.

Justification

Injuries—both unintentional and intentional—are a leading cause of death for Americans of all ages, regardless of gender, race or economic status.¹ Injuries account for more than 160,000 deaths each year and millions more people each year are injured and survive¹. Mortality due to injury disproportionately affects American-Indian/Alaska Native and African American populations (75.57 and 63.83 per 100,000, respectively, versus an average rate of 56.21 per 100,000 among all races).²

The lifetime cost of injuries occurring in a single year in the United States totals an estimated \$406 billion in medical expenses and productivity losses (including lost wages, fringe benefits, and the ability to perform normal household responsibilities).³ The medical expenditures associated with injuries in this country account for approximately 10% of total U.S. medical expenditures.⁴ Additionally, when other costs are considered—such as the value of life lost to premature mortality, nonmedical expenditures, insurance costs, property damage, litigation, decreased quality of life, and diminished functional capacity—the total cost of injuries is much larger.⁴

Most deaths related to injury are unintentional and the majority of injuries can be prevented through interventions such as multifaceted fall prevention programs, smoke alarm intervention programs, and the use of proper restraints to reduce the negative effects of motor-vehicle crashes.⁴ Such interventions would reduce a significant number of injury related deaths.

State and local public health departments are responsible for creating and maintaining conditions that keep people healthy, including the prevention of injuries and violence.

Additionally, they are responsible for addressing the disproportionate effects of injury on American-Indian and African American populations that are linked to social injustices. This can be done through determining the burden of injury and the consequent development of action plans; conducting prevention interventions at multiple levels; working with communities for policy change; and evaluating and improving programs.⁵

Record of Action

Proposed by Injury Prevention Subcommittee/ Community Health and Prevention Committee

Adopted by NACCHO Board of Directors

February 26, 2004

Updated April 26, 2007

1 Centers for Disease Control and Prevention. Injury and Violence Prevention and Control (Website). <http://www.cdc.gov/node.do?id=0900f3ec8000e539>.

2(WISQARS) [Online]. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (producer). Available from: URL: www.cdc.gov/ncipc/wisqars. [2004].

3 Finkelstein EA, Corso PS, Miller TR, Associates. Incidence and Economic Burden of Injuries in the United States. New York: Oxford University Press; 2006.

4 Centers for Disease Control and Prevention. Medical Expenditures Attributable to Injuries – United States, 2000. MMWR 2004; 53: 1-4.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5301a1.htm>

5 *Safe States, 2003 Edition*. Atlanta (GA): State and Territorial Injury Prevention Directors