



NEBRASKA

Special Emphasis Report: Infant and Early Childhood Injury, 2013

Injury is a Leading Cause of Death in Children

Childhood injuries are a serious public health problem in the United States and Nebraska. Unintentional injury is the leading cause of death in children 1-5 years old in Nebraska, and a major cause of poor health and disability.

In 2013, 15 Nebraska children between 0 and 5 years old died as a result of an injury. For every child who died, 8 children were hospitalized and 969 were treated and released from an emergency department. Not included were children who received treatment in a physician offices or at home.

Figure 1: Annual Injuries among Children Ages 0-5 Years, Nebraska, 2013

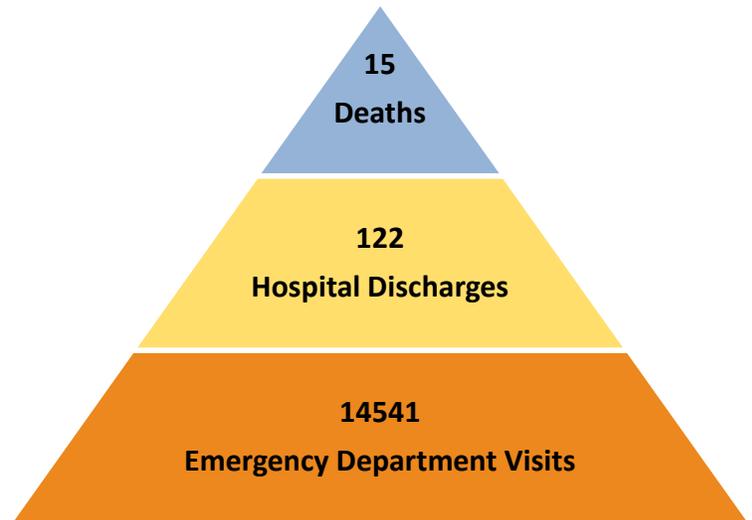
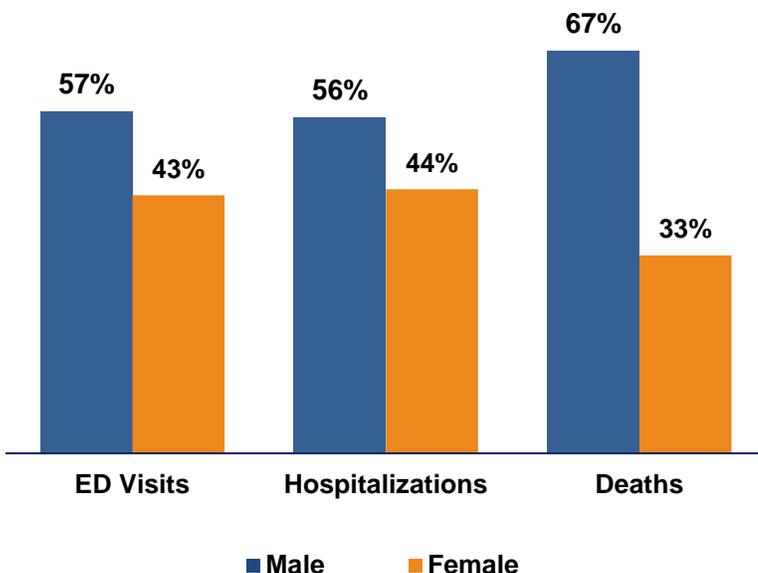


Figure 2: Percent of Injury Deaths, Hospitalizations and Emergency Department Visits among Children Ages 0-5 Years, by Sex, Nebraska, 2013



Childhood Injury by Sex

- Boys were more likely to suffer a fatal injury than girls.
- Boys experienced more nonfatal injuries with 57% of emergency department visits, and 56% of hospitalizations



This document was produced in conjunction with CDC's Core Violence and Injury Prevention Program under Cooperative Agreement 11-1101.



NEBRASKA

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Injury Deaths in Infants, 2009-2013

NOTE: Due to the small number of deaths among children ages 0-5, Figure 3 and 4 show injuries from 2009 to 2013 for this age group.

- From 2009-2013, there were 29 injury deaths among children less than 1 year old.
- The leading cause of deaths among this age group was suffocation (55%), specifically suffocation in bed (41%), followed by homicide (21%).
- Fire/burn injuries were the third common cause of death for this age group.

Figure 3: Injury Deaths among Infants Less than 1 Year, Nebraska, 2009-2013

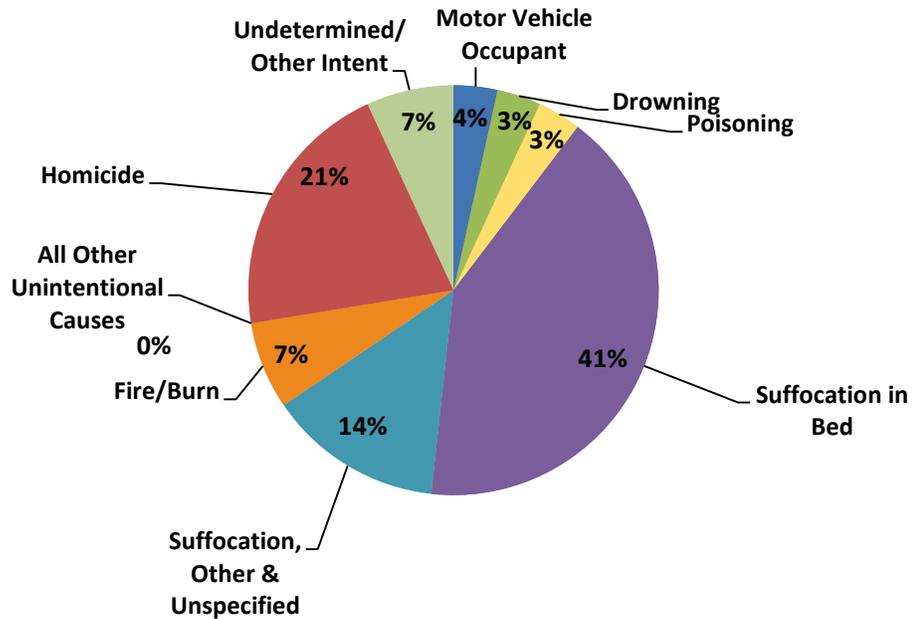
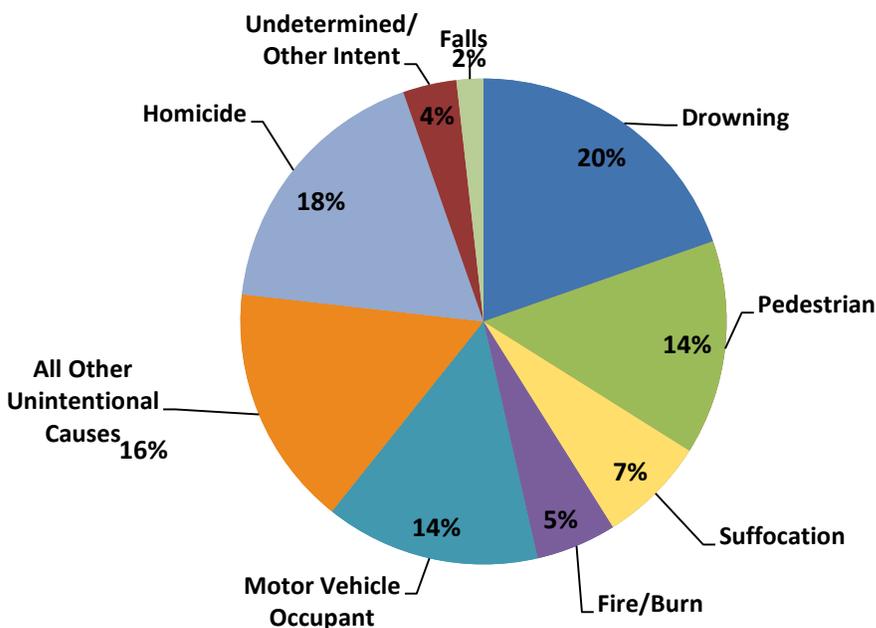


Figure 4: Injury Deaths in Children Ages 1 – 5 Years, Nebraska, 2009-2013



Injury Deaths in Young Children, 2009-2013

- Between 2009 and 2013, there were 56 injury deaths among children ages 1 to 5 years.
- Drowning was the leading cause of injury deaths among children 1-5 years old (20%) in Nebraska.
- Additional leading causes of injury deaths among this age group include homicide, pedestrian, and motor vehicle occupant.

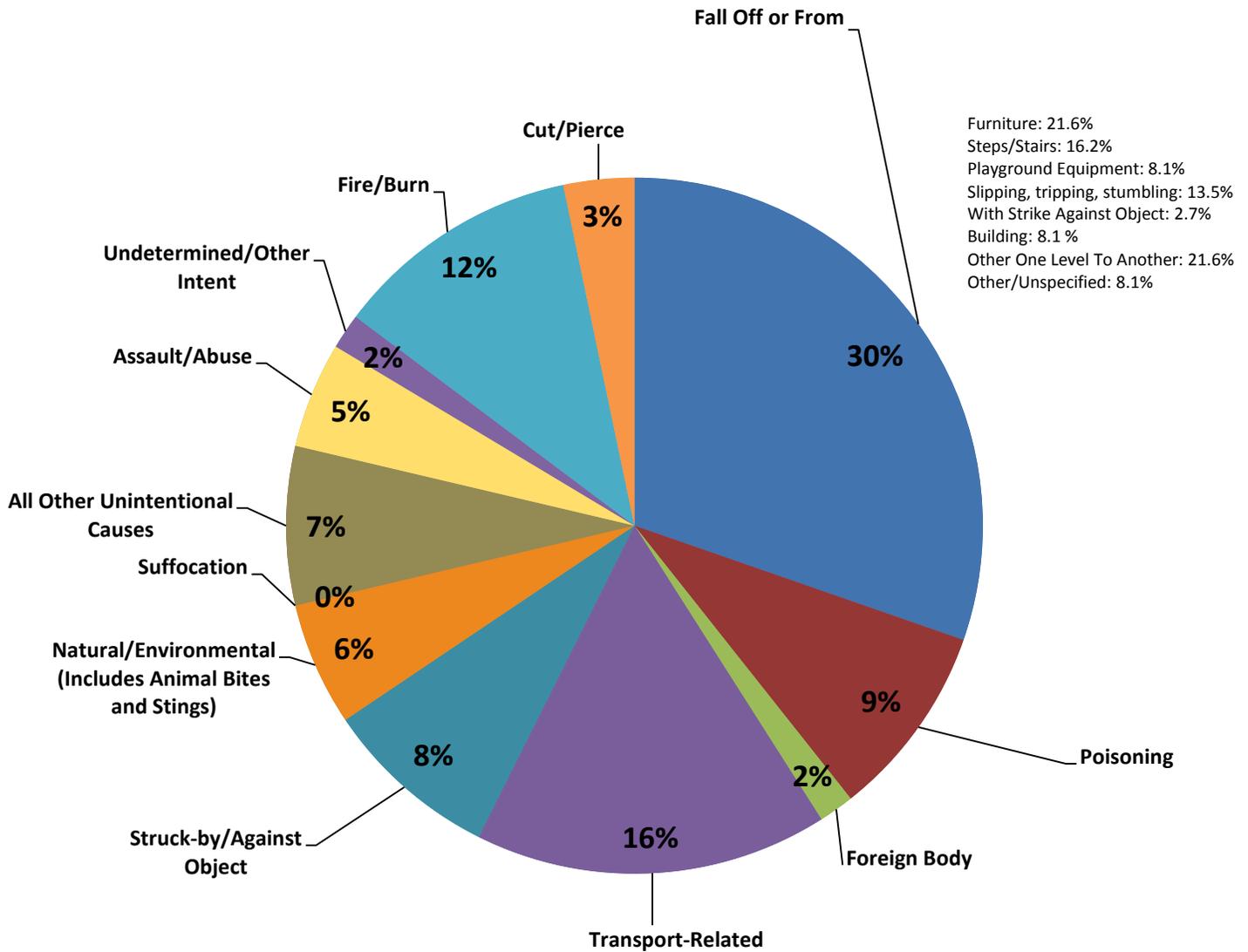


NEBRASKA

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Injury-Related Hospitalizations

Figure 5: Injury-Related Hospital Discharges among Children Ages 0 – 5 Years, Nebraska, 2013



There were 122 injuries that resulted in hospitalizations among children ages 0-5 in Nebraska. Of those, 25 occurred among children less than 1 year old and 97 occurred among children ages 1-5.

For injury-related hospital stays among children 0-5 years, unintentional falls were the leading cause of injury (30%). Most fall injuries were the result of a fall from furniture (22%), or fall from one level to another (22%). About 16% of injuries were from falls from steps or stairs, and about 13.5% were falls from slipping, tripping, or stumbling.

Falls were the leading cause of injury-related hospitalizations for both age groups, less than 1 year, and 1-5 years old.

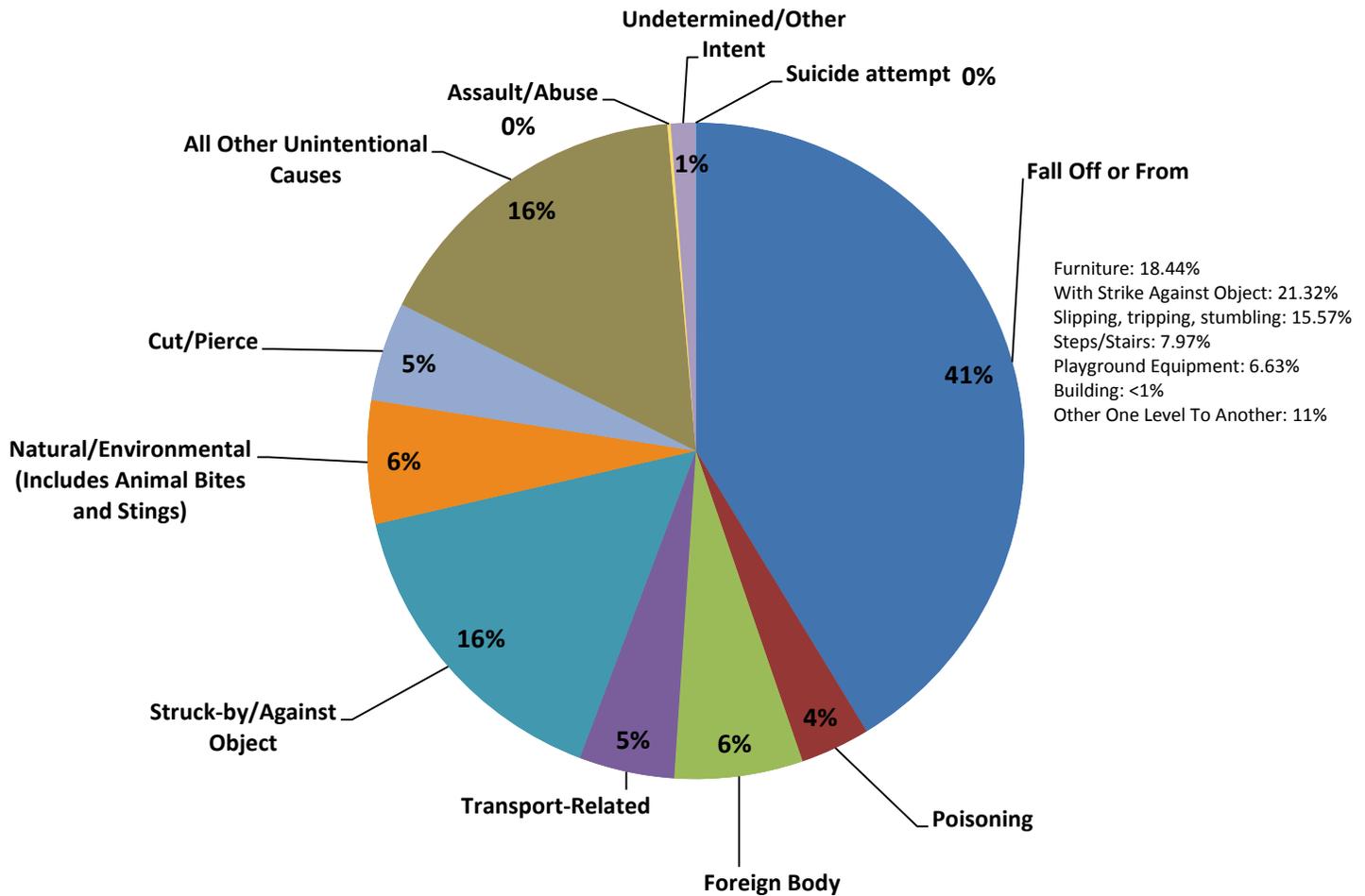


NEBRASKA

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Injury-Related Emergency Department Visits

Figure 6: Injury-Related Emergency Department Visits among Children Ages 0 – 5 Years, Nebraska, 2013



There were 14,541 injuries that resulted in an emergency department visit among children ages 0-5 in Nebraska. Of those, 1,420 occurred among children less than 1 year old and 13,121 occurred among children ages 1-5.

For injury-related emergency department visits, unintentional falls were by far the leading cause of injury (41%). Most fall-related emergency department visits were due to a fall with a strike against an object (21%) and falls from furniture, such as a bed, chair or sofa (18%), followed by falls from slipping, tripping and stumbling (16%).

Falls were the leading cause of injury-related emergency department visits for both age groups (less than 1 year and 1-5 year olds). Struck by or against an object was the second leading cause of injury related emergency department visits.



NEBRASKA

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	Infants less than 1 Year		Children Ages 1-5 Years	
	Hospital Discharges	ED Visits	Hospital Discharges	ED Visits
Unintentional Injuries	21	1402	93	12937
Cut/pierce	1	34	3	675
Drowning/submersion	0	2	1	13
Falls (off/from):	7	681	30	5325
Furniture	2	255	6	846
Steps/stairs	1	76	5	400
With strike against object	1	67	0	1206
Slipping/tripping/stumbling	0	38	5	892
Playground equipment	0	6	3	390
Building	0	0	3	15
Other fall from one level to another	3	149	5	508
Other/unspecified	0	89	3	1035
Fire/Burn	2	48	12	313
Foreign Body	1	79	1	840
Natural and Environmental	2	56	5	827
Excessive heat	0	4	0	0
Dog bites	0	11	5	208
Other bites/stings/animal injury	0	37	0	562
All other natural/environmental	2	4	0	47
Poisoning	0	54	11	445
Struck-by/against object	2	173	8	2105
Suffocation	0	27	0	67
Transport-related	1	69	19	613
Motor vehicle (MV)-occupant	1	69	17	368
Bicycle/tricycle (MV & non-MV)	0	0	1	154
Pedestrian (MV & non-MV)	0	0	0	6
Other transport	0	0	1	85
All other unintentional causes	5	179	3	1898
Assault/Abuse	3	4	3	20
Suicidal Attempt	0	0	0	2
Undetermined/Other Intent	1	5	0	26
Unknown	0	9	1	136
Total Injury-Related Cases	25	1420	97	13121



NEBRASKA

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Nebraska Child Injury Prevention Activities

The Nebraska DHHS Injury Prevention and Control Program (IPCP) works closely with partners statewide to reduce the rate of injury among Nebraska's children. The IPCP provides support for 8 local Safe Kids coalitions to develop and implement safety education and awareness campaigns, distribute safety devices and hold local events. In 2013, local safe kids programs were granted additional funding to focus on home and bicycle safety.

To meet DHHS child care licensure regulations, IPCP staff developed and coordinated implementation of the Safe Kids Nebraska Child Care Transportation Training. Since May 2013 approximately 50 child passenger safety technicians have trained more than 2,400 individuals across the state. IPCP staff also partnered with DHHS Child and Family Services (CFS) to develop and implement a child passenger safety training that is required of all CFS specialists whom transport children. In addition, IPCP provides statewide technical assistance to 375 child passenger safety technicians; works with local health departments to promote child passenger safety; partners with the Nebraska Office of Highway Safety to hold four child passenger safety trainings per year and an annual child passenger safety technician update; collaborates with the Cornhusker Motor Foundation on child passenger safety education efforts and partners with the Nebraska Brain Injury Association to raise awareness about the symptoms and consequences of concussions as well as evaluate the effectiveness of the Concussion Awareness Act. Finally, DHHS' Division of Maternal, Child and Adolescent Health Program sends out a safe sleep educational brochure to agencies and facilities (local health departments, insurance agencies, hospitals) across the state.

Nebraska - Maternal, Infant, Early Childhood Home Visiting (N-MIECHV)

The N-MIECHV program includes home visiting as a primary service delivery strategy for our most at-risk families, and is offered free to pregnant women or women with children birth to age 5. It is a family-centered and strengths based program

Through the home visiting program, nurses, social workers, or other trained home visitors meet with families in their homes, discover potential risk factors, do goal planning, talk about child development, and connect families to the individualized resources that could make the most difference in the long-term health, development and school readiness not only for the child, but for the family.

N-MIECHV oversees *evidence-based* home visiting programs that are supported by federal MIECHV formula and development funds, State General Funds and Title V MCH Block Grant funds. There are sites all over the state of Nebraska; serving 22 counties. Home offices can be found in Scottsbluff, Pender (serving a large portion of the northeast part of the state,) Lincoln, Omaha and Beatrice. Two program sites gained accreditation in the evidence-based model in 2014, and two programs in Douglas County will be accredited this year. Douglas County Home Visiting manages a large network of Early Childhood Comprehensive system partners in a coordinated intake system for services within Omaha Metro area.

Notes: Nebraska Vital Records and Hospital Discharge Data

All injuries are considered unintentional unless specified otherwise. Reference to any commercial entity or product or service on this page should not be construed as an endorsement by the Government of the company or its products or services.

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

www.dhhs.ne.gov/injuryprevention

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