Child and youth injury prevention: A public health approach

Natalie L Yanchar, Lynne J Warda, Pamela Fuselli; Canadian Paediatric Society, Injury Prevention Committee

Full text at www.cps.ca
Français en page 512

ABSTRACT

The majority of child and youth injuries are preventable. This statement provides background, direction and a statement of commitment to the issue of child and youth injury prevention in Canada. It acts as a foundation to build upon by focusing first on definitions, scope and priorities for injury prevention. It also describes the burden and patterns of unintentional injury, and the principles of effective intervention for prevention. A list of resources for obtaining data and evidence-based information is included in the full-text version of this statement (www.cps.ca). This statement can also be used for broad-based injury prevention advocacy.

Key Words: *Canada; Children; Injury; Prevention; Public health; Youth*

RECOMMENDATIONS

Health professionals and all levels of government must work together to reduce the burden of child and youth injury in Canada by:

- Investing in a pan-Canadian injury prevention (IP) strategy that includes leadership, policy coordination, research, surveillance, public education and social marketing.
- Supporting the development of a national IP body to help implement this strategy and to coordinate IP activities by stakeholders across the country.
- Educating the public about injury risk, and influencing behaviour change through social marketing and school-based curriculums.
- Influencing and implementing best practice, evidence-informed legislation and policies that support IP, which are harmonized across all jurisdictions and that address the social determinants of health associated with injury risk (eg, alcohol and substance abuse).
- Enforcing existing IP legislation and regulations.
- Creating safer, supervised environments for children and youth to live, learn, play and travel in.
- Sustaining and advancing current and new injury surveillance, including:
 - out-patient injuries (eg, the Canadian Hospital Injury Reporting and Prevention Program, the National Ambulatory Care Reporting System),
 - hospitalized trauma patients (eg, the National Trauma Registry), and
 - trauma deaths (eg, a national medical examiners death database).
- Sustaining and advancing current and new IP research programs.

Health care practitioners should:

- Include injury prevention in their practices (eg, supporting car seat and home safety knowledge in prenatal classes, well-child care, hospital-based care and discharge planning).
- Advocate for local and regional IP policies and actions as outlined above.

ACKNOWLEDGEMENTS: This position statement has been reviewed by the Community Paediatrics, First Nations, Inuit and Métis Health, and Healthy Active Living and Sports Medicine Committees of the Canadian Paediatric Society, as well as by the CPS Action Committee for Children and Teens.

CPS INJURY PREVENTION COMMITTEE

Members: Claude Cyr MD; Brent E Hagel PhD; I Barry Pless MD; Jeffrey W Scott MD; Natalie L Yanchar MD (Chair); Mitchell Zelman MD (Board Representative)

Liaisons: Dominic Allain MD, CPS Paediatric Emergency Medicine Section; Pamela Fuselli, Safe Kids Canada; Robin Skinner, Public Health Agency of Canada

Principal authors: Natalie L Yanchar MD; Lynne J Warda MD (past Chair); Pamela Fuselli

The recommendations in this statement do not indicate an exclusive course of treatment or procedure to be followed. Variations, taking into account individual circumstances, may be appropriate. All Canadian Paediatric Society position statements and practice points are reviewed on a regular basis. Please consult the Position Statements section of the CPS website (www.cps.ca) for the full-text, current version.

Correspondence: Canadian Paediatric Society, 2305 St Laurent Boulevard, Ottawa, Ontario K1G 4J8. E-mail info@cps.ca