

Factsheet: Asian Child Unintentional Injury



According to the 2013 New Zealand Census, 21% of Asian peoples were under the age of 15 years. This was very similar to the New Zealand population overall, at 20%.

Of the total child (< 15 years) population, Asian peoples make up 11.8% (97,203) of all children in New Zealand. The number of Asian children (aged 0–14) is likely to increase. Median projections indicate Asian children will make up 21.6% of all New Zealand children in 2038. ⁱ

The Injury Picture for Deaths

(Data source: Injury Prevention Research Unit, University of Otago, accessed October, 2015)

Between 2002 and 2011, 32 Asian children died as a result of an unintentional injury. That is at least 3 Asian children deaths each year in New Zealand. During this period, child Asian deaths accounted for 4% of all child unintentional injury deaths in New Zealand.

The three leading causes of unintentional death for Asian children are motor vehicle occupant injuries (44%), suffocation (19%) and drowning (16%).

- Almost half (47%) of all unintentional injury deaths were to children aged 0-4 years.
- Half of all children killed as occupants in a motor vehicle crash were aged 5-9 years.
- All suffocation deaths occurred to children aged one year and under.
- Four out of five drowning deaths were children aged 0-4 years.
- Boys accounted for three-quarters of unintentional injury deaths.

The injury picture for hospitalisation

(Data source: Injury Prevention Research Unit, University of Otago, accessed October, 2015)

On average (2004-2013), around 391 Asian children are injured severely enough to be admitted to hospital for an unintentional injury each year. That is at least one Asian child per day.

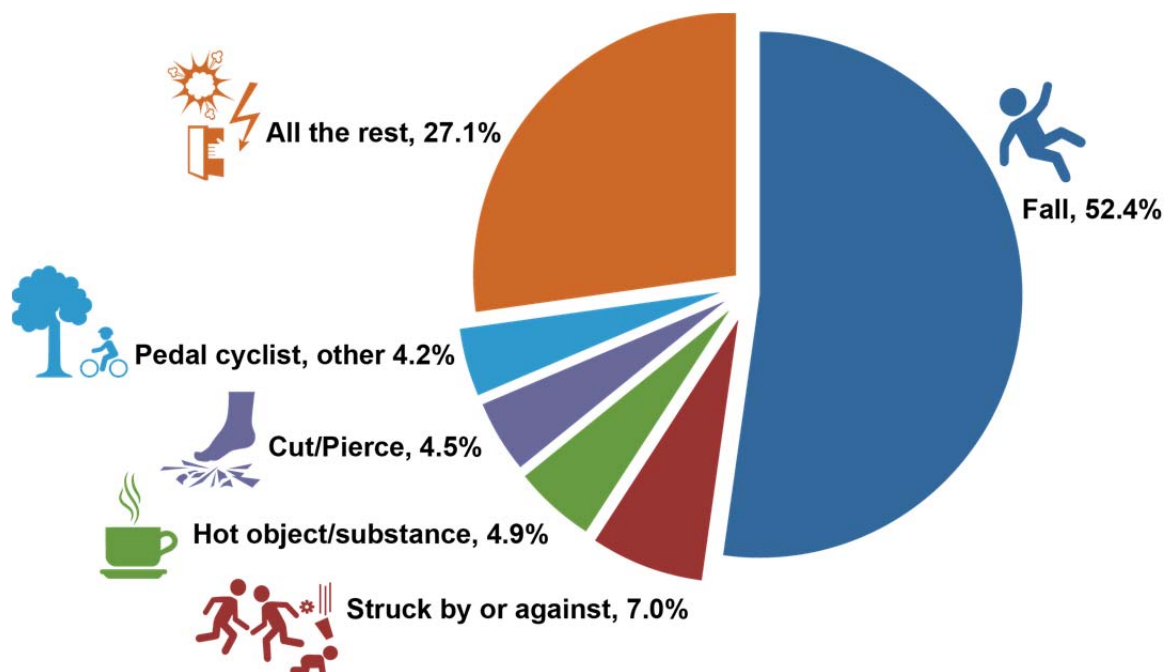
Asian children make up about 5% (3,907; 2004-2013) of all child unintentional injury hospitalisations in New Zealand. Between 2009 and 2013, the rate of child unintentional injury hospitalisations for Asian children (455.3 per 100,000 children) was around half the rate of all children (833.7 per 100,000 children) in New Zealand.



The five leading causes of unintentional injury hospitalisations for Asian children are (2002-2013): fall related injury (52%), struck by or against somebody or an object (7%), burnt or scalded by a hot object or substance (5%), a cutting and/or piercing injury (5%), pedal cyclist injury (off-road) (4%).

- Fall related injuries account for over half (52%) of all unintentional injury hospitalisations for Asian children and are easily the leading cause of injury. The most common cause of injury are falls from playground equipment (37%) mainly in schools and other public areas, followed by children slipping or tripping on same level ground (12%) mainly in schools and public areas and at home.
- Fall related injuries are high amongst Asian children aged 5-9 (65%) and 10-14 (53%) years.
- Nearly three-quarters (62%) of unintentional injury hospitalisations were boys
- Children under the age of nine years accounted for three-quarters of hospital admissions (73%).
- Between 2009 and 2013, the rate of hospitalisation for Asian children shows a steady decline, after experiencing a steady increase between the 2004 to 2008 period.

Figure 1: Leading causes of unintentional injury hospitalisations, Asian children aged 0-14 years, 2004-2013.



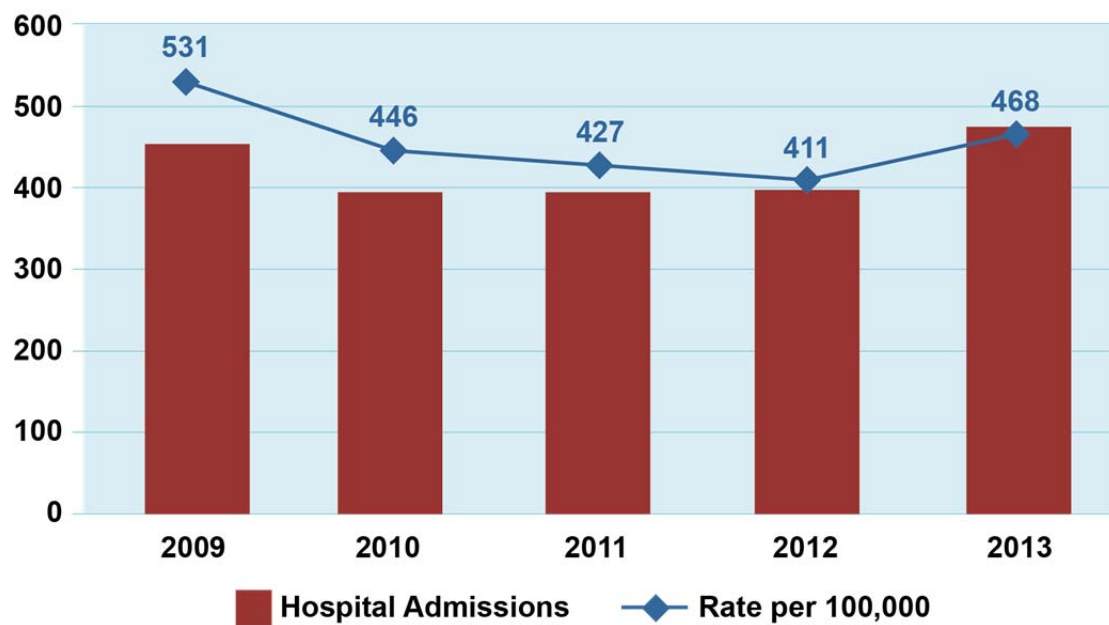
(Data source: Injury Prevention Research Unit, University of Otago, accessed October, 2015)

Table 1: Leading causes of unintentional injury hospitalisations, Asian children, 5 year age group, external cause, 2004-2013.

#	Aged 0-4 Years (n=1,461)		Aged 5-9 Years (n=1,396)		Aged 10-14 Years (n=1,050)	
	External Cause	%	External Cause	%	External Cause	%
1	Fall	40%	Fall	65%	Fall	53%
2	Caught in between objects	20%	Caught in between objects	7%	Caught in between objects	12%
3	Hot object/ substance	10%	Pedal cyclist. Other	5%	Pedal cyclist. Other	7%
4	Poisoning	7%	Struck by or against	5%	Cut/ Pierce	6%
5	Struck by or against	5%	Cut/ Pierce	4%	Overexertion	4%
	All the rest	18%	All the rest	14%	All the rest	18%
	Total	100%		100%		100%

(Data source: Injury Prevention Research Unit, University of Otago, accessed October, 2015)

Figure 2: Rate and number of unintentional injury hospitalisations, Asian children, aged 0-14 years, 2009-2013.



(Data source: Injury Prevention Research Unit, University of Otago, accessed October, 2015)

Preventing Child Injuries for Asian Children: Falls Injuries

We could reduce the burden of child injury from falls in New Zealand through:

- Playground equipment height and surface standards and compliance checks – very good evidence.
- Reducing exposure to falls from within buildings and homes e.g. through stair guards and window latches – good evidence.
- Encouraging the use of personal protective equipment such as a helmet for use with skateboards, skates, skiing or scooters – the evidence is promising.
- Reducing the use of baby walkers – good evidence.
- Reducing the opportunities to fall from cots, beds and bunks – some evidence supports this approach.ⁱⁱ

ⁱ Statistics New Zealand, www.stats.govt.nz

ⁱⁱ Safekids Aotearoa, Child unintentional deaths and injuries in New Zealand, and prevention strategies, Auckland, December 2015. www.safekids.nz

