# **Injuries and Violence**



### Introduction



- Unlike the MDGs, the SDGs include targets for reductions in injuries and violence, which are associated with more than 5 million deaths, or one in 11 deaths.
- This chapter focuses on road traffic injuries, violence, war and conflict, and natural disasters.
- There is an explicit SDG target on road traffic deaths under the health goal and a target on access to safe transport systems which includes improving road safety.
- Currently about 1.25 million deaths annually are due to road traffic crashes and collisions, which is 23% higher than in 2000.





- The past decade has shown that implementing a range of interventions, from legislation and driver behaviour change to vehicle design, reduces the risk of injury and death due to road traffic accidents.
- But because of the increase in numbers of vehicles (90% increase since 2000 to over 1.5 billion and a further 47% increase expected by 2030), halting further increases in road traffic deaths will, in itself, be a major achievement.
- Further, major reductions in the numbers of road traffic deaths will require an extraordinary effort in all countries.
- There are also 1.5 million deaths and many more nonfatal injuries due to other unintentional injuries, including falls, drowning, burns and poisonings, which should be addressed to reach the overall health SDGs.



- The SDGs have four targets on reducing deaths and injuries due to violence in goals other than health. Nearly half a million people died from interpersonal violence in 2012, mostly men, with half of murders committed with firearms.
- Compared to the global rate, homicide rates are four times higher in the low- and middle-income countries of the Americas and more than three times lower in the lowand middle-income countries of the Western Pacific Region.
- Globally, homicide rates have declined by nearly 17% since 2000.



- Physical or sexual violence against women, harmful practices such as child marriage and female genital mutilation, and violence against children, are common in many countries and specific SDG targets to address these issues have been set for 2030.
- Preventing homicide and nonfatal violence requires a multisectoral approach that addresses underlying causes, such as gender, social and economic inequalities, cultural norms that support violence, easy access and misuse of alcohol, drugs and firearms.



- Unlike the MDGs, the SDGs have several targets for injuries and violence, including an explicit target for road traffic deaths in the health goals.
- Target 3.6: "By 2020, halve the number of global deaths and injuries from road traffic accidents") and
- Target 11.2 regarding access to safe, affordable, accessible and sustainable transport systems for all and improving road safety.
- Target 16.1: Significantly reduce all forms of violence and related death rates everywhere) to specific targets on elimination of violence against all women and girls



- Target 5.2 elimination of harmful practices such as child marriage and female genital mutilation
- Target 5.3, and violence against children (Target 16.2).



- Natural disasters were not mentioned in the MDGs, but are referred to several times in the SDGs (Targets 1.5, 3.d, 11.5 and 13.1).
- As part of the goal on cities and human settlements, Target 11.5 states: "By 2030, significantly reduce the number of deaths and the number of people affected and substantially decrease the direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations."



Target 13.1 refers to climate-related disasters:
"Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries



## Traffic Injuries

Target: By 2020, halve the number of global deaths and injuries from road traffic accidents

Indicator: Death rate due to road traffic injuries

#### **Definition:**

Death rate due to road traffic injuries as defined as the number of road traffic fatal injury deaths per 100,000 population.

### Concepts:

Numerator: Number of deaths due to road traffic crashes Absolute figure indicating the number of people who die as a result of a road traffic crash.

Denominator: Population (number of people by country)



## Traffic Injuries

UN Stats classified the countries on 4 categories or groups namely:

- Group1: Countries with death registration data (good vital/ death registration data) → Malaysia ?
- Group2: Countries with other sources of information on causes of death
- Group3: Countries with population less than 150 000
- Group4: Countries without eligible death registration data



# Traffic Injuries

- For the countries from group 2, the regression method described above was used to project forward the most recent year for which an estimate of total deaths were available.
- Finally, the countries from group 3 which have a population less than 150,000 and did not have eligible death registration data, regression estimates were not used.
- Only the reported death were directly without adjustment.
- UN have data for 194 countries : Global Status Report on Road Safety 2015.



Target 3.9: By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination

Indicator 3.9.3: Mortality rate attributed to unintentional poisoning

#### Definition:

The mortality rate attributed to unintentional poisoning as defined as the number of deaths of unintentional poisonings in a year, divided by the population, and multiplied by 100 000.



### Computation Method:

The methods with agreed international standards have been developed, reviewed and published in various documents.

The methods used for the analysis of causes of death depend on the type of data available from countries. (Malaysia: Cause of Death Registration Data)



- For countries with a high quality vital registration system including information on cause of death, the vital registration that member states submit to the WHO Mortality Database were used, with adjustments where necessary, e.g. for under-reporting of deaths.
- For countries without high-quality death registration data, cause of death estimates are calculated using other data, including household surveys with verbal autopsy, sample or sentinel registration systems, special studies and surveillance systems.
- In most cases, these data sources are combined in a modelling framework

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