

TEN SUMMER CHILD SAFETY TIPS

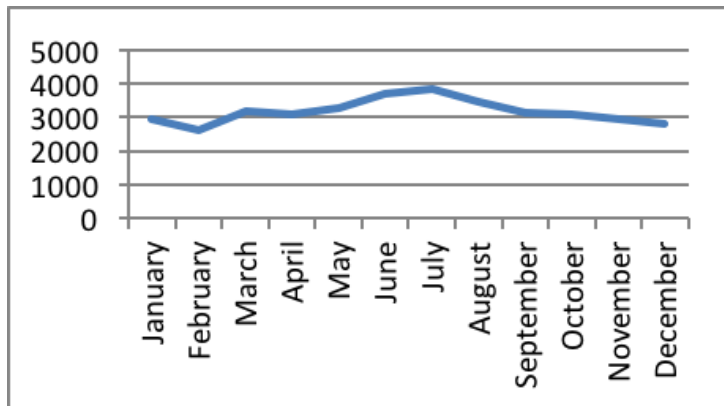
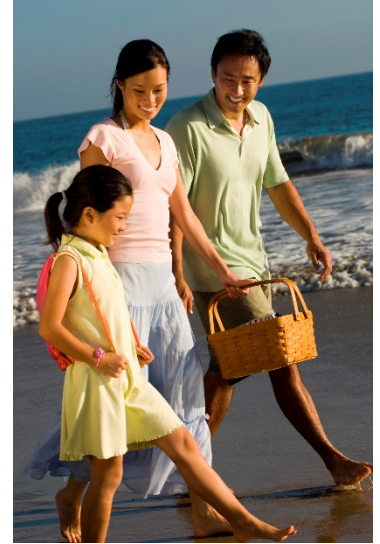
June 08, 2016

It's that time again, time for the release of everyone's summer safety tips.

First, your suspicion is correct: June, July, and August are more dangerous for children than other months, at least if we use deadly unintentional injuries as the measure (see graph). Nearly one-third of all fatal child injuries occur during these three months.^[1]

Second, despite media coverage, some things are not worth the same amount of worry. Deaths resulting from contact with bees, hornets, and wasps (1 fatality in 2014, the most recent year available*), powered lawnmowers (1), fireworks (0), sharks (0) or dogs (10) are so few they barely register statistically. And keep in mind we have a lot more exposure to dogs than to the other animals. Deaths caused by falling down stairs (5) and being struck by lightning (3) are similarly unlikely.

By contrast, **teen driving crashes** (2,460), suffocation (e.g., infants in bed, 2,429), **youth suicides** (2,261) and homicides (2,267), **drug-induced deaths** (791), pedestrian injuries (685), and toddler drownings (388) accounted for over 11,000 fatalities in 2014.



Deaths of children age 0-19 from unintentional injuries, by month (2012-2014)*

Given the most common fatal injuries, here are tips for keeping the summer safe :

Summer cruising: Take daily summer drives with your teen driver. Car crashes usually are a top concern, but the real culprit here is teen drivers, both for the driver and their passengers. Nearly one in three of all fatal injuries of children in the United States are from motor vehicle crashes,^[ii] and most (70 percent in 2014) involve a teen behind the wheel.^[iii] Per mile driven, teen drivers are nearly three times more likely than older drivers to be in a fatal crash.

After studying teen crashes, the CDC concluded that the main cause of teen crashes is driver **inexperience**. Most crashes happen during the first year a teen has a license, and crash risk is particularly high during the first few months. Although young drivers are actually less likely than adults to drive after drinking alcohol, their crash risk is substantially higher when they do because of the combination of intoxication and inexperience.

If your teen has shown signs of depression, help him or her start a relationship with a mental health professional during the summer, when suicide rates are lowest.* The number of youth committing suicide increased by about 17 percent over the past five years.* Know the signs of suicide risk. Consider talking to youth about starting a relationship with a counselor, too. If you don't have a provider, ask your child's school for a suggestion, or use the Mental Health Services Locator, an online, map-based program to find services nearby. Let your adolescents (or anyone) in suicidal crisis or emotional distress know that they can call the National Suicide Prevention Lifeline at **1-800-273-TALK** or text "Go" to 741-741, a text-based helpline for teens more comfortable with texting than talking.

Store guns out of the home, and lock up prescription medications. Based on what we know about the strengths and challenges of the adolescent brain, it should not surprise us that their occasionally poor decision-making can have irreversible consequences when mixed with deadly means. And guns on-site, even if locked up, put a child at greater risk of a completed suicide. For adolescents at risk of suicide, the American Academy of Pediatrics summarized the research and concludes that doctors should "advise parents to remove guns and ammunition from the house, and secure supplies of potentially lethal medications."

When accidents inevitably happen this summer, ask the doctor to NOT prescribe opioid pain medication. Accidental poisonings fatalities are increasingly not a toddler getting into the medicine cabinet but a teen overdosing on opioids (oxycodone to heroin).^[iv] Victims often start with prescription pain killers, such as fentanyl, which is estimated to be 80 times as potent as morphine and hundreds of times more potent than heroin. An estimated 20 percent of adolescents with prescribed opioid medications reported using them intentionally to get high, or to increase the effects of alcohol or other drugs. Use of prescribed opioid pain medication before high school graduation is associated with a 33 percent increase in the risk of later opioid misuse. These and other statistics led the Centers for Disease Control and Prevention (CDC) to conclude that "risk of opioid medication use in pediatric populations is of great concern." Try other options first.

Stop using your smartphone when crossing street, let alone in the car, and consider that walking while intoxicated (WWI) is also dangerous. Fatal pedestrian injuries don't seem to get much attention, but they account for about 2 percent of child deaths. Anecdotally, just looking around the other cars on the highway, people haven't gotten the message about phone use while driving. And while we tend to focus on the risks of driving while intoxicated, there are dangers to walking in that state as well. Young adults who are drinking are at particular risk; about one-third of all pedestrians killed in traffic crashes had a blood alcohol concentration greater than or equal to 0.08 grams per deciliter.

Keep up the vigilance on blocking access to your pool—and pools at the homes you visit—because toddlers who drown were often last seen in the house. Drowning is a leading cause of death for toddlers. In 2014, among children 1 to 4 years old who died from unintentional injuries, one-third died from drowning, and most of these deaths occurred in home swimming pools, including 65 percent at the house where the child lived. However, note that the typical scenario is not a kid drowning among the regular pool chaos. Most of the toddlers were last seen in the home, had been out of sight less than five minutes, and were in the care of one or both parents at the time.^[v] More than two-thirds (69 percent) were not expected to be in or at the pool.

Be mindful about modifying sleep schedules. The importance of regular patterns and adequate sleep don't change during the summer. Sleep is critical for so many functions, from cognitive performance (e.g., memory) to basic safety (e.g., driving). Problems with sleep may also be linked to longer-term outcomes. According to one researcher, “over a dozen relevant studies have been published, and a well-replicated finding is that childhood sleep problems... predict the development of anxiety and depressive symptoms over time, even after controlling for baseline mood difficulties and other potential confounds.” Sleep problems at ages 3-8 years have also been found to predict the early onset of substance use in adolescents. School-aged children need between 10 and 11 hours of sleep per night, and teens need about 9¼, but get only about 7 hours on average. Keeping a sleep routine is always one of the recommendations. For other ideas, check out the Nationwide Children's Hospital's sleep education page.

Try new ways to eat better, cook together, and start a new activity routine. The summer is a great time to get better at one of the core strategies to eating better: planning ahead. Go to the farmer's market on Saturday, and come home to cook a few meals for the week. Or cut up all those veggies and have them available in a tray that can be pulled out of the refrigerator when someone gets hungry. Make lunches for everyone the night before, when you're not rushed.

Schedule annually recurring reminders to make doctor and dentist appointments. Set a month for doctor visits and then schedule a recurring meeting to remind you to make these important wellness appointments. The U.S. Office of Adolescent Health advises, “Even though teens are generally healthy, regular visits allow health care providers to screen for healthy development, provide shots/screens, and brief interventions.”

Bonus: Set aside time to express gratitude and/or volunteer together. Research suggests volunteering may have health benefits for the entire family. While you are out together, you will also be keeping the conversations going, which OAH identified as a top-five to-do for parents for adolescent health. If you haven't seen Shawn Achor's TED Talk on The Happy Secret to Better Work, it applies to many parts of life and will leave you smiling and grateful the rest of the day.

Courtesy of Child Trends

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*Source: CDC, Wide-ranging online data for epidemiologic research (WONDER). Atlanta, GA: CDC, National Center for Health Statistics; 2016. Available at <http://wonder.cdc.gov>. Analysis run June, 2016.

[i] 29% occurred during summer months, analysis run June 2016, CDC WONDER.

[ii] 28% in 2014, analysis run June 2016, CDC WONDER

[iii] CDC WONDER analysis for 2014, paired with NHTSA report <http://www-nrd.nhtsa.dot.gov/Pubs/812278.pdf>

[iv] Although there have been reports that overdoses are now more frequent than car accidents, this is not true for ages 0 to 19. Drug-induced causes account for 791 deaths in 2014 or 2% of deaths, and motor vehicle crashes accounted for 3,533 deaths or 8% of all and a significantly larger number. CDC WONDER, analysis run June 2016.

[v] Centers for Disease Control and Prevention, "Unintentional Drowning Fact Sheet."

