Racial Disparities in Pediatric Injury Hospitalization Rates in a Rural State South Dakota, 2009-2013

Wei Bai¹, Ph.D., Bonny Specker¹, Ph.D. Lon Kightlinger², Ph.D. ¹ EA Martin Program in Human Nutrition South Dakots State University ² South Dakota Department of Health, Pierre, SD

Purpose:

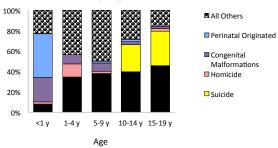
Compare injury hospitalization rates from 2009-2013 among White and American Indian populations:

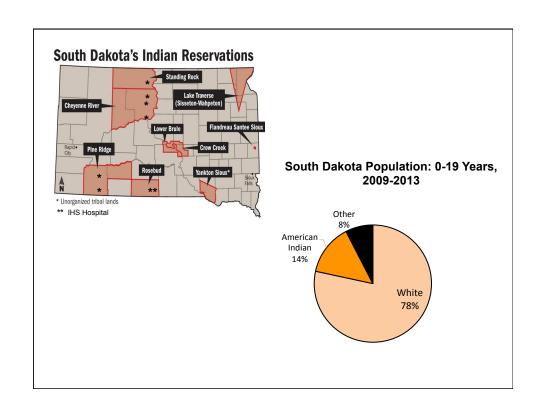
- manner of injuries: (6 categories includes unintentional or accidental injuries, suicide or self-inflicted, homicide or assault, etc.)
- mechanisms of injuries: (18 categories on the way injury was sustained, or cause of injury i.e., falls, motor vehicle accidents, poisoning, etc.)
- > nature of injuries: (12 categories including fractures, system-wide & late effects, burns, etc.)

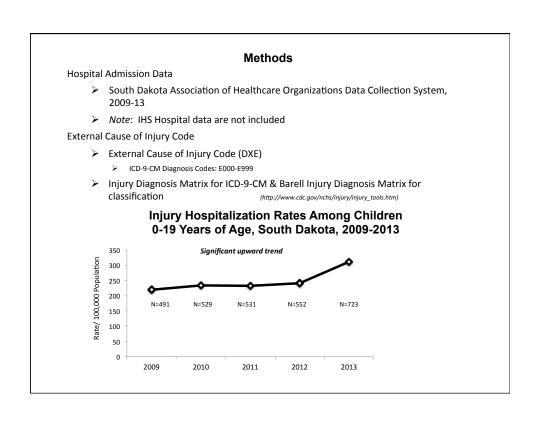
Death Rates due to Unintentional Injuries Among Persons Aged ≤19 Years, by State, 2009

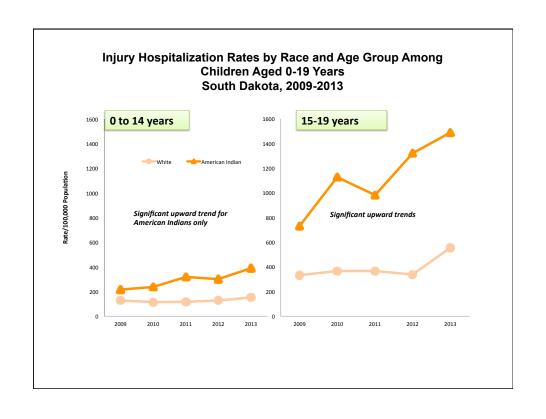


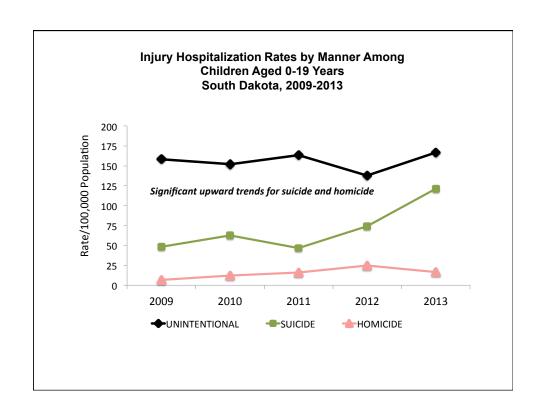
Leading Causes of Death by Age Group, South Dakota, 2009-2013

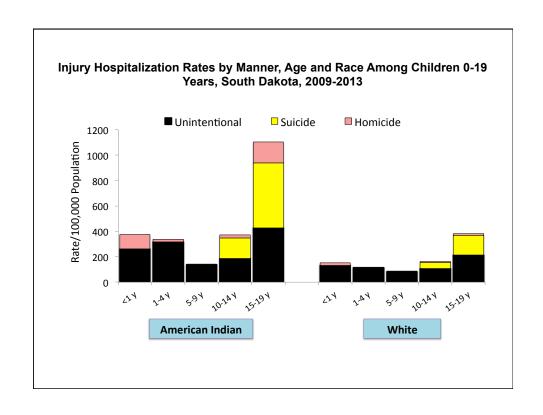


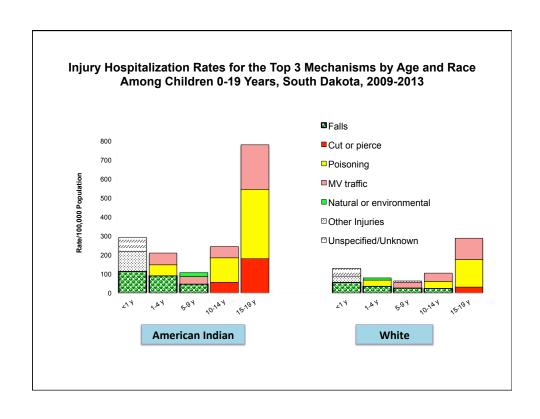


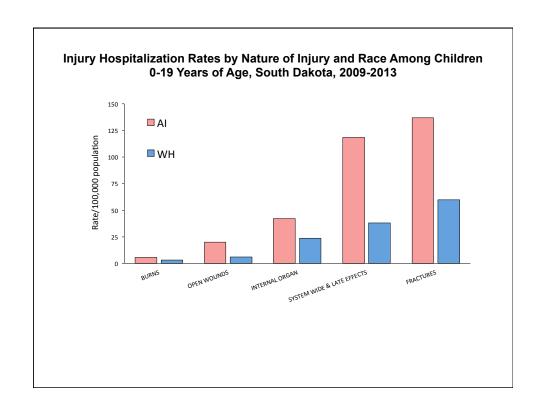












Conclusions

- South Dakota American Indian children have disproportionately higher hospitalization rates due to injuries.
- Knowing types of injuries requiring hospitalization will allow public health professionals to more efficiently target their efforts to prevent injuries.

Limitations

- Data set that was used did not include hospitalizations at IHS facilities.
- > This would result in underestimating injury hospitalization rates for American Indian children.
- It is not known whether IHS Hospital admissions differ by manner, mechanism, or nature of injury than those seen in the South Dakota data set that was used.