



A Decade in Review: 2008 - 2017

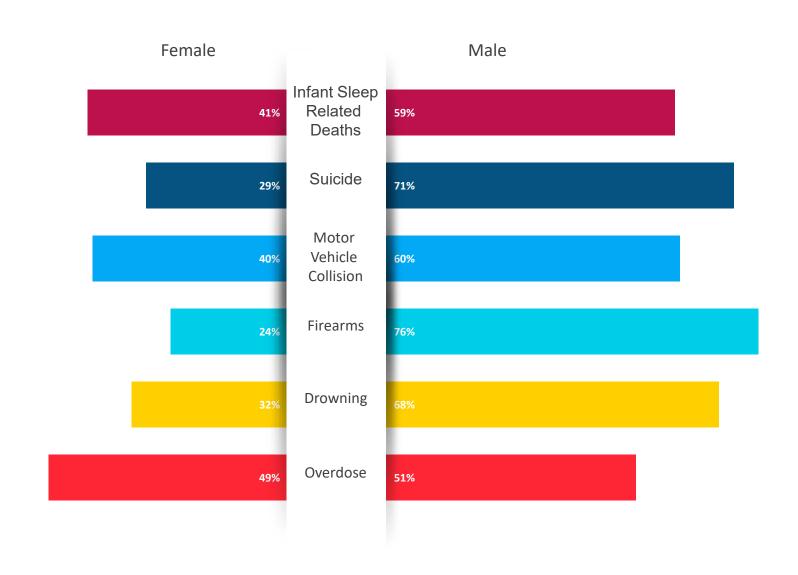
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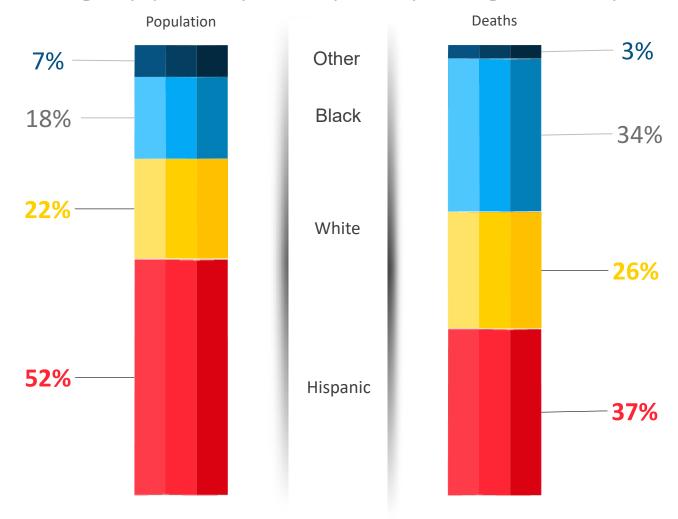
Leading Causes of Death by Gender

Percentage of deaths by each cause split by gender



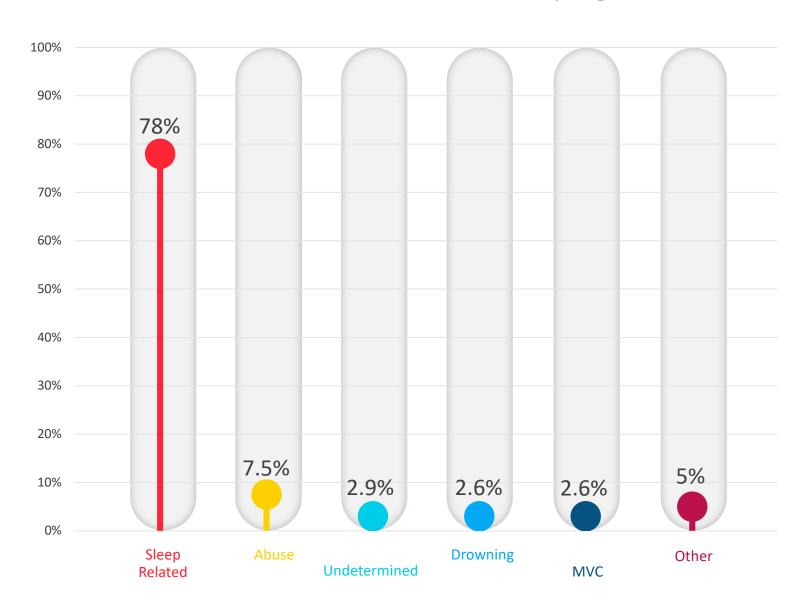
Deaths by Race

Percentage of population by race compared to percentage of deaths by race



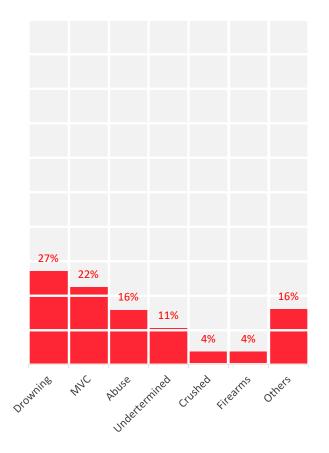
Leading Causes of Infant Death

Causes of death of infants 12 months and younger

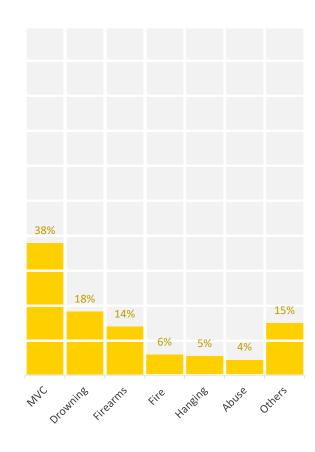


Leading Causes of Death by Age

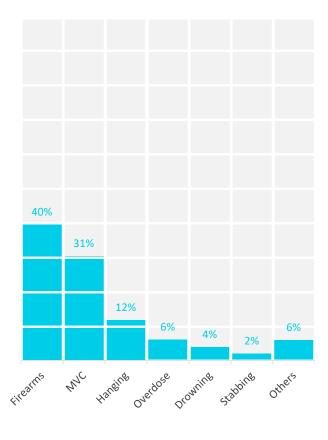
Percentage of deaths by each cause in age groups over 12 months



Children 1 to 4 years



Children 5 to 12 years



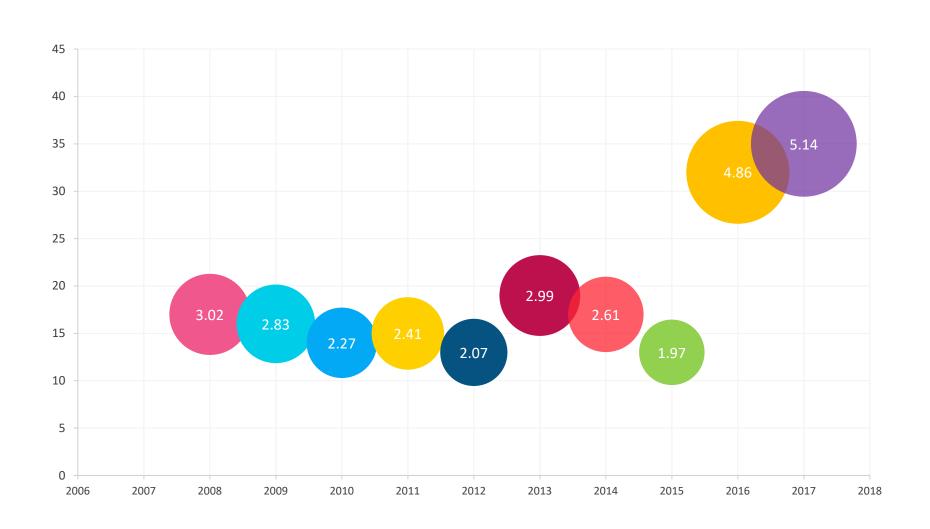
Children 13 to 17 years



Youth Suicide

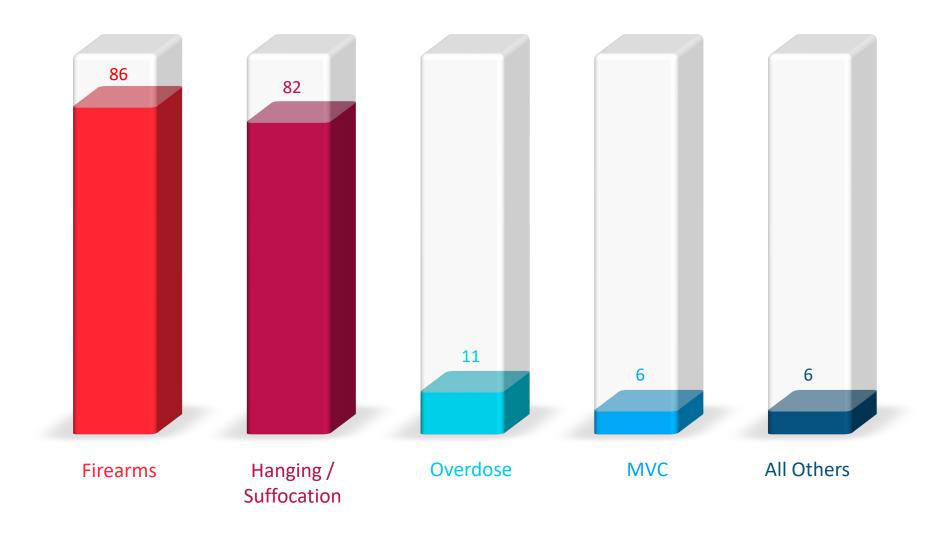
Deaths by Suicide

Number of deaths per year shown by rate per 100,000 children 8 - 17 years



Causes of Death by Suicide

Number of suicide deaths by cause

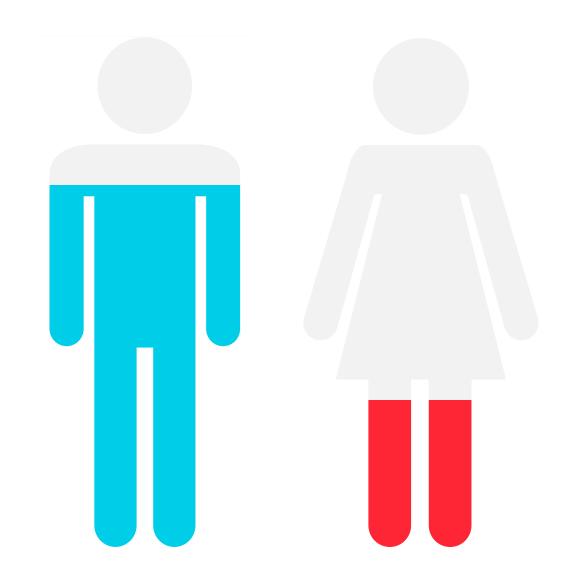


Deaths by Suicide by Gender

Percentage of deaths by suicide by gender

71%

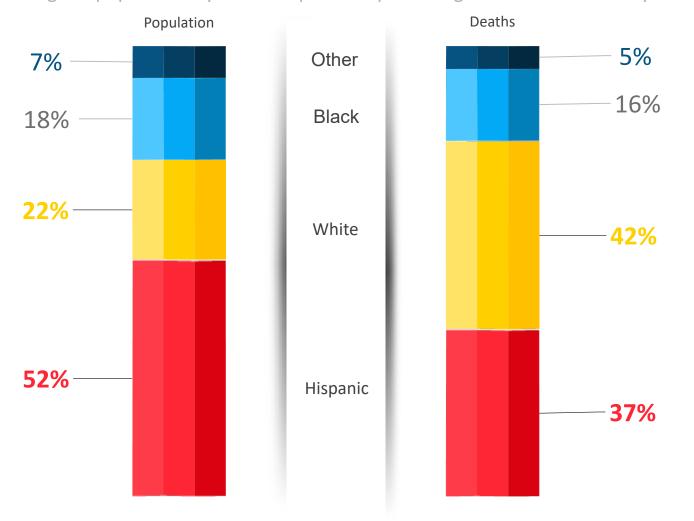
MALE



29% FEMALE

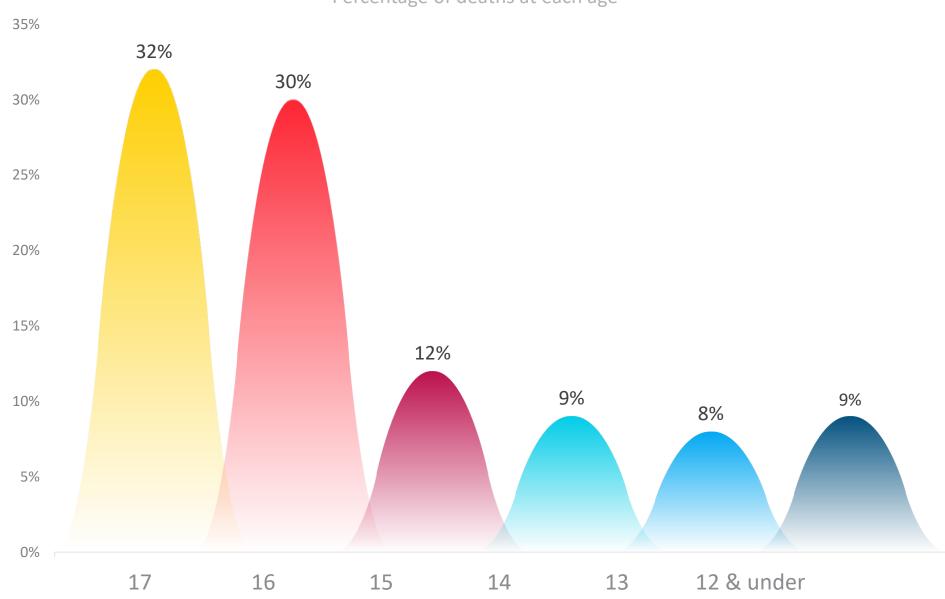
Suicide Deaths by Race

Percentage of population by race compared to percentage of suicide deaths by race



Suicide Deaths by Age

Percentage of deaths at each age



Suicide Prevention

Risk factors in youth suicide



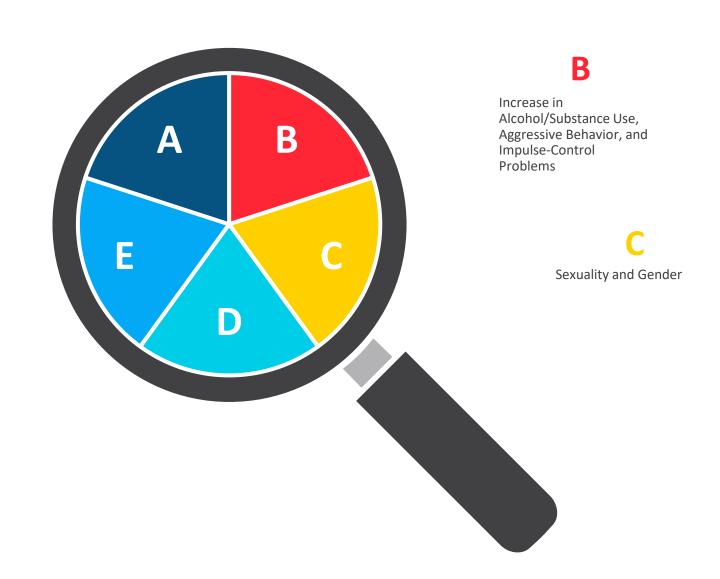
Suicide-Attempt History, Suicide Intent, and Suicide Planning

E

Increase in Depression, Hopelessness, Anxiety, Emotional Distress, Agitation, and Sleep Disturbance

D

Negative Interpersonal Life Events



Suicide Prevention

Protective factors in youth suicide



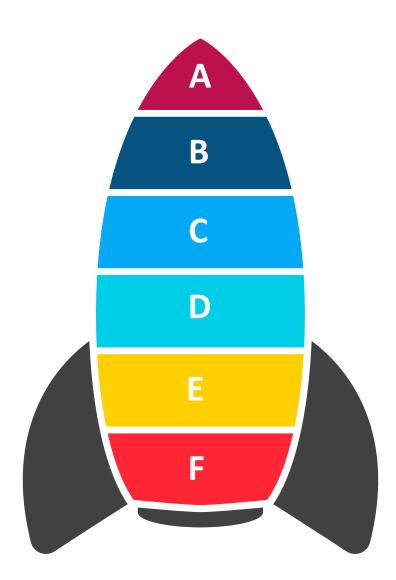
Suicide Prevention

Youth suicide prevention steps & resources

Increasing the use of evidence-based programs and empirically supported best practices

Increasing access to mental and behavioral healthcare

Increasing the use of screening for suicidal thoughts and behaviors



D

Reducing stigma, increasing community awareness of suicide warning signs

E

Increasing knowledge about what to do when someone is in crisis

F

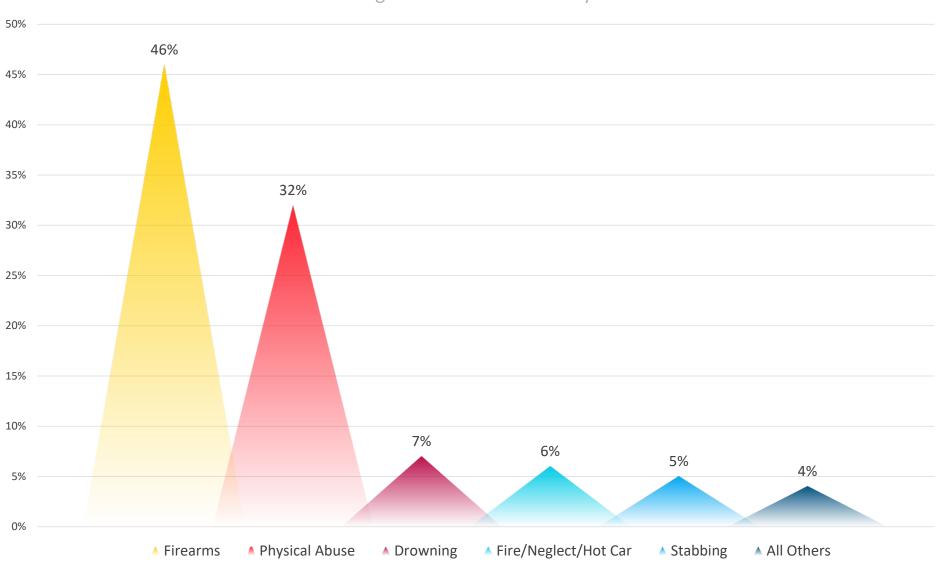
- The National Suicide Prevention Lifeline 1-800-273-8255
- The National Suicide Prevention Lifeline: Spanish-language services 1-888-628-9454
- Crisis Text Line: text "home" to 741741
- The Trevor Project: LGBTQ 1-866-488-7386 or text "start" to 678678
- Trans Lifeline 977-565-8860



Homicide: Firearms & Child Abuse

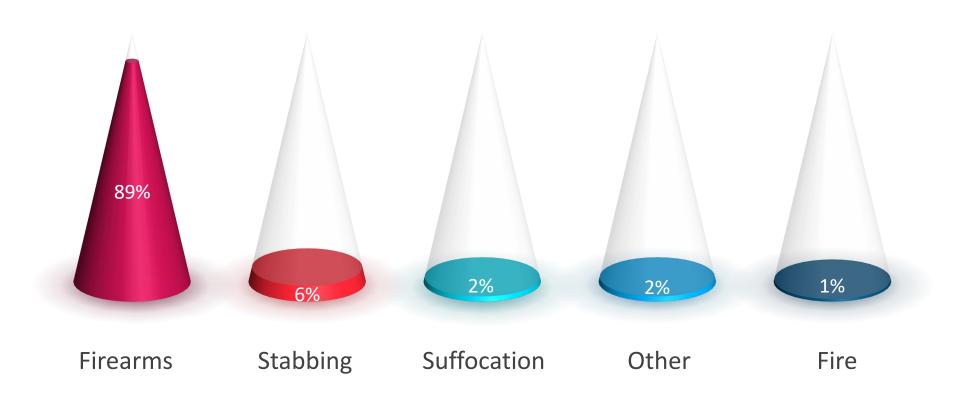
Causes of Death by Homicide

Percentage of homicide deaths by cause



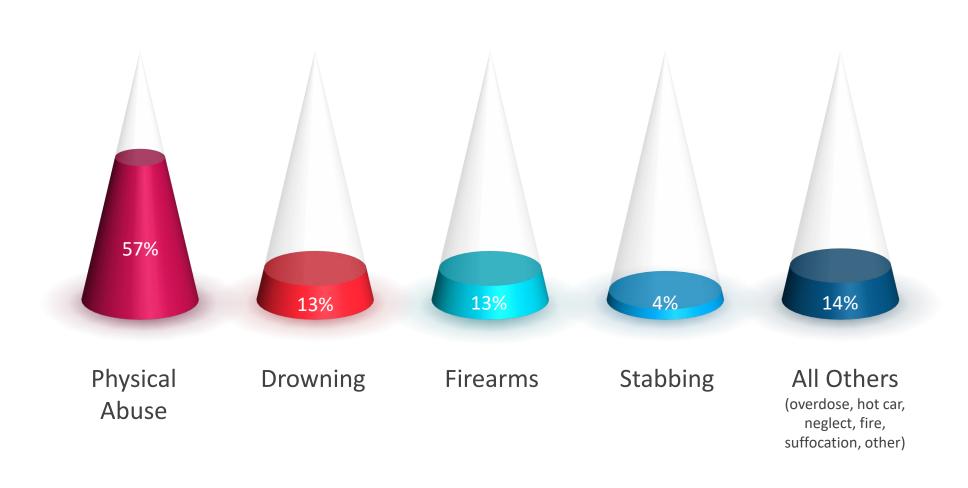
Community Violence Homicides

Causes of death in community violence homicides



Child Abuse Homicides

Causes of death in child abuse homicides



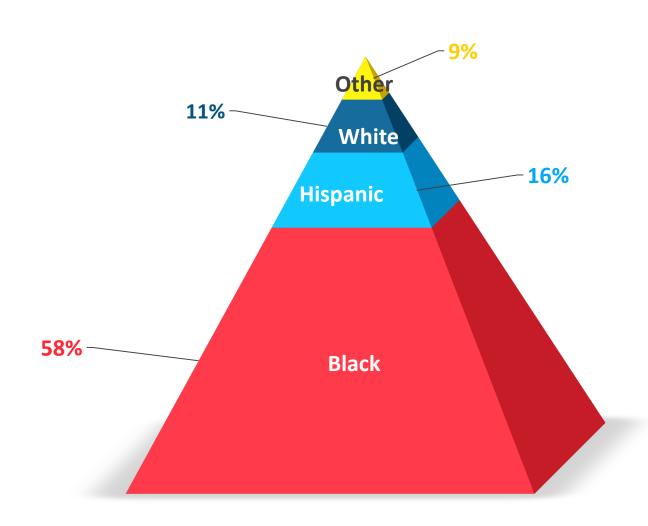


Homicide: Firearms



Firearm Homicides by Race

Percentage of firearm homicides by race

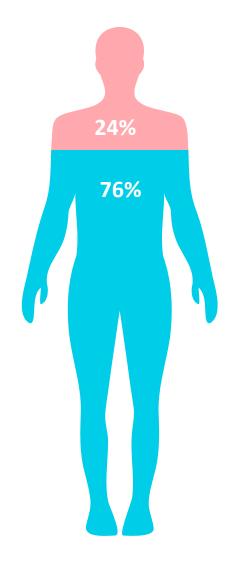




Firearm Homicides by Gender

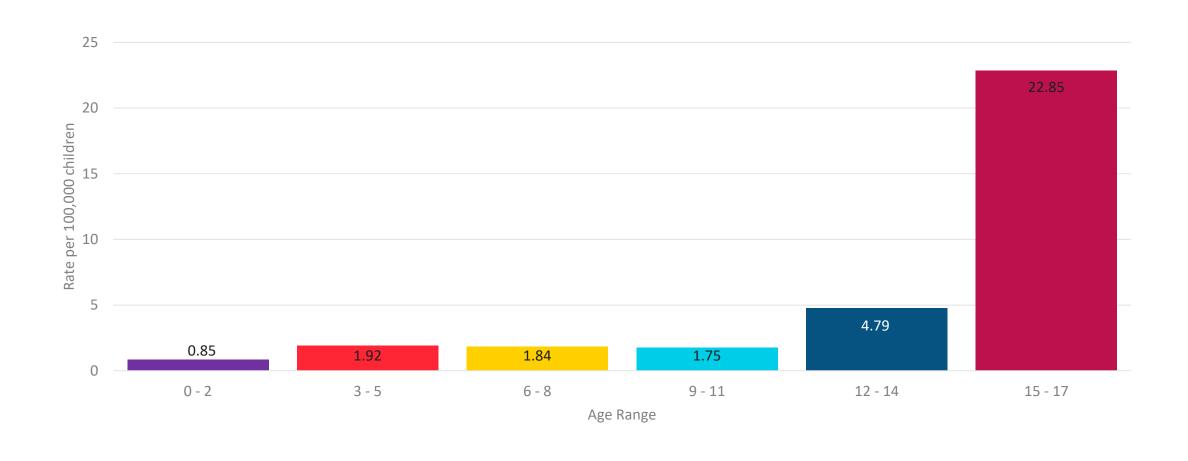
Percentage of firearm homicides by gender

3 out of every 4 firearm homicide victims were male



Firearm Homicides by Age Range

Rate per 100,000 children of firearm homicides by age range



Firearm Risk Factors



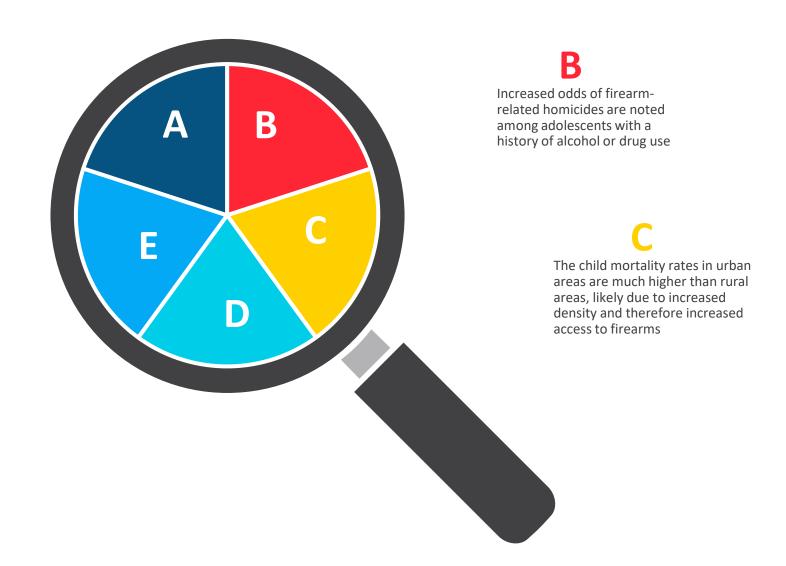
The common narrative that gun violence is linked to mental illness is not borne out in research

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Most mass shootings occur in the home by a family member as part of escalated intimate partner violence in a murder-suicide situation

D

Increased levels of gun ownership in an area is correlated with higher homicide rates and firearm homicide rates

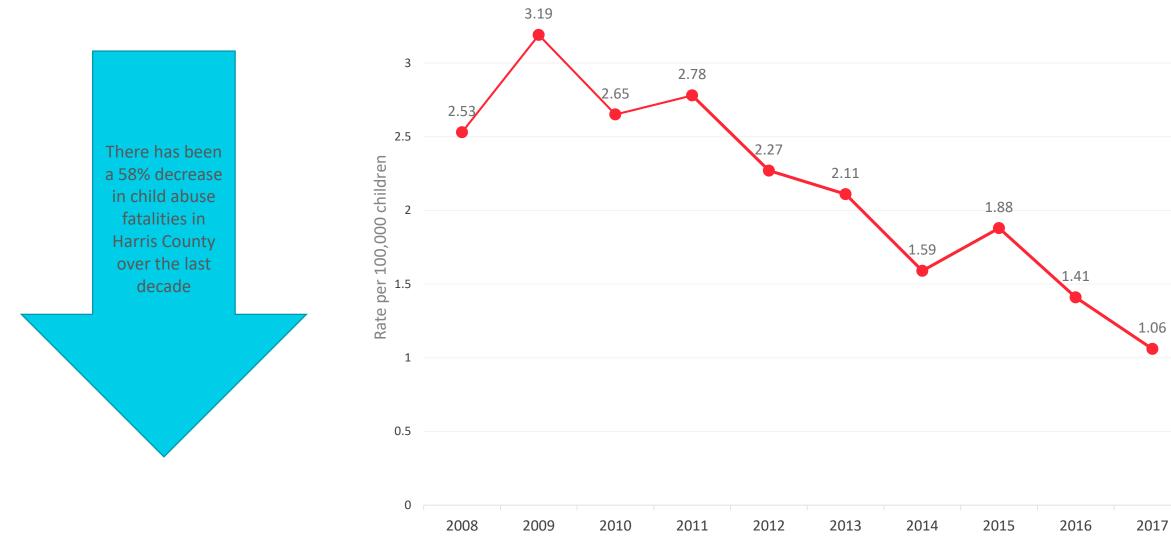




Homicide: Child Abuse

Child Abuse Homicides

Rate of child abuse homicides per 100,000 children



3.5

Rate of Child Abuse by Race

Rate per 100,000 children of child abuse homicides by race

1.1 **Other** 1.2 **Hispanic** 2.1 White

5.1 Black

Resources



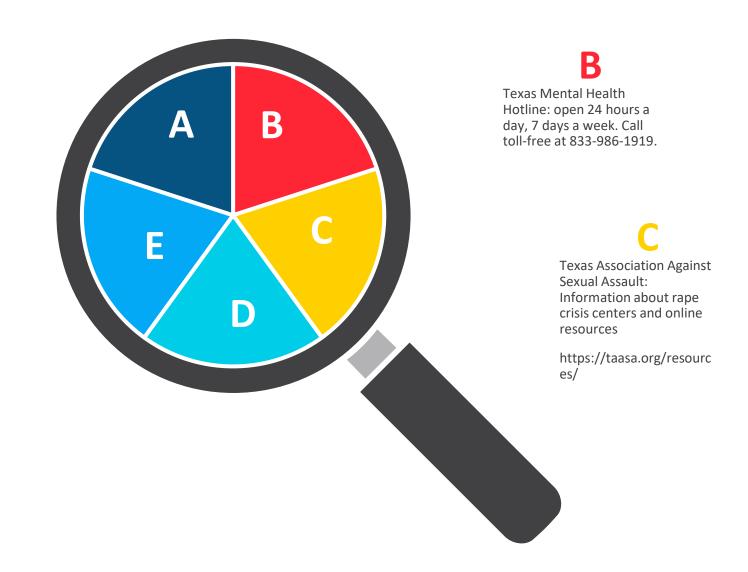
National Domestic Violence Hotline: 24 hours a day, call toll-free 1-800-799-7233

E

National Parent Helpline: Emotional support from a trained parent advocate. Call toll-free 1-855-427-2736

D

Texas Abuse Hotline: Report suspected child maltreatment and neglect. Call toll-free 1-800-252-5400

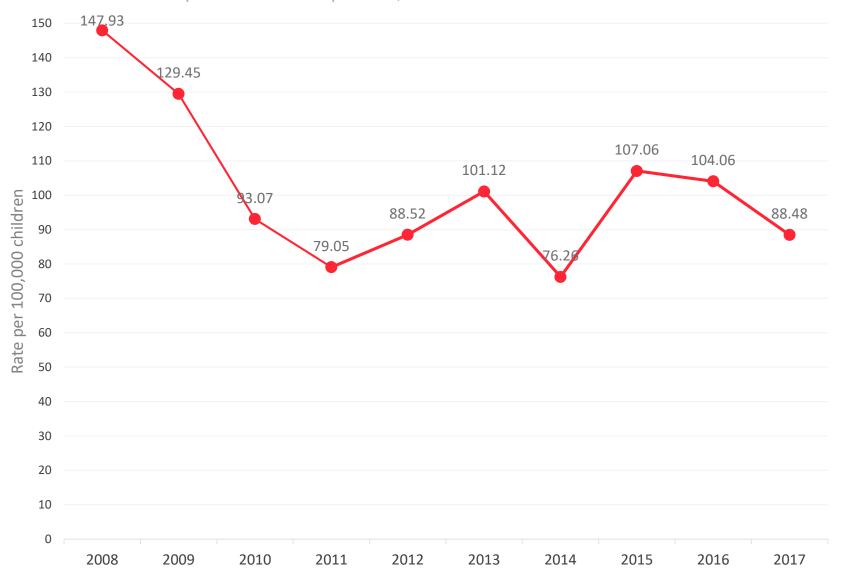




Infant Sleep Related Deaths

Infant Sleep Related Deaths

Rate of infant sleep related deaths per 100,000 live births

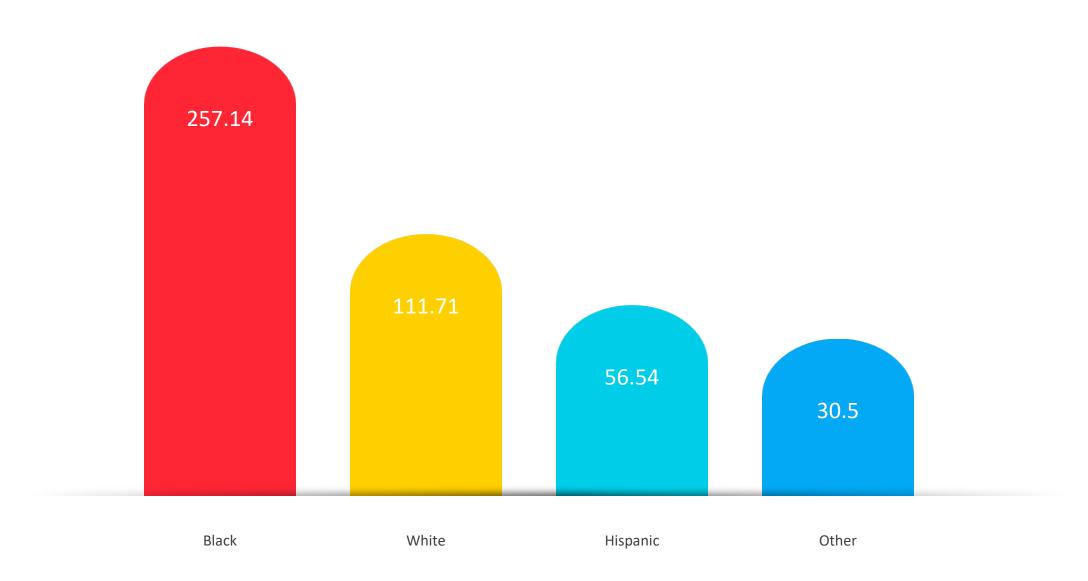


Attributed in large part to safe sleep campaigns, Harris County has seen a 40% decrease in infant sleep-related deaths from 2008 to 2017



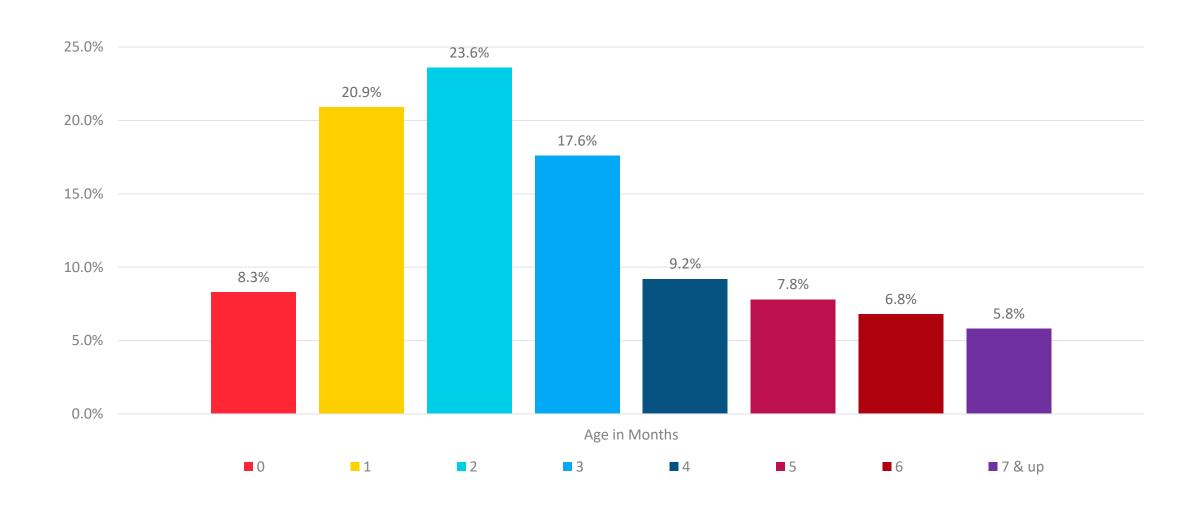
Infant Sleep Deaths by Race

Rate of infant sleep deaths by race per 100,000 live births



Infant Sleep Deaths by Age

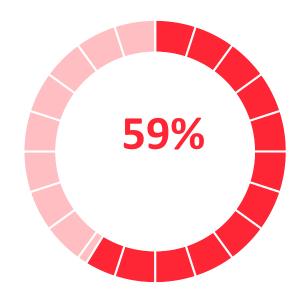
Percentage of infant sleep related deaths by age in months

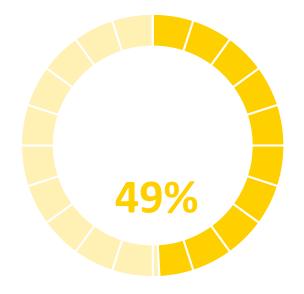




Infant Sleep Related Deaths by Gender & Environment

Percentage of sleep related deaths by gender and by sleeping environment





More males are impacted by sleep related deaths than females

About half of sleep related deaths happen while co-sleeping/bed-sharing and the others in unsafe sleep environments like adult beds or with blankets

Prevention

SIDS and Other Sleep-Related Infant Deaths: Updated 2016

- I. Back to sleep for every sleep.
- 2. Use a firm sleep surface.
- 3. Breastfeeding is recommended.
- 4. It is recommended that infants sleep in the parents' room, close to the parents' bed, but on a separate surface designed for infants, ideally for the first year of life, but at least for the first 6 months.
- 5. Keep soft objects and loose bedding away from the infant's sleep area to reduce the risk of SIDS, suffocation, entrapment, and strangulation.
- 6. Consider offering a pacifier at nap time and bedtime.
- 7. Avoid smoke exposure during pregnancy and after birth.
- 8. Avoid alcohol and illicit drug use during pregnancy and after birth.
- 9. Avoid overheating and head covering in infants.
- 10. Pregnant women should obtain regular prenatal care.

- 11. Infants should be immunized in accordance with recommendations of the AAP and Centers for Disease Control and Prevention.
- 12. Avoid the use of commercial devices that are inconsistent with safe sleep recommendations.
- 13. Do not use home cardiorespiratory monitors as a strategy to reduce the risk of SIDS.
- 14. Supervised, awake tummy time is recommended to facilitate development and to minimize development of positional plagiocephaly.
- 15. There is no evidence to recommend swaddling as a strategy to reduce the risk of SIDS.
- 16. Health care professionals, staff in newborn nurseries and neonatal intensive care units, and child care providers should endorse and model the SIDS risk-reduction recommendations from birth.
- 17. Media and manufacturers should follow safe sleep guidelines in their messaging and advertising.
- 18. Continue the "Safe to Sleep" campaign, focusing on ways to reduce the risk of all sleep-related infant deaths, including SIDS, suffocation, and other unintentional deaths. Pediatricians and other primary care providers should actively participate in this campaign.
- 19. Continue research and surveillance on the risk factors, causes, and pathophysiologic mechanisms of SIDS and other sleep-related infant deaths, with the ultimate goal of eliminating these deaths altogether.



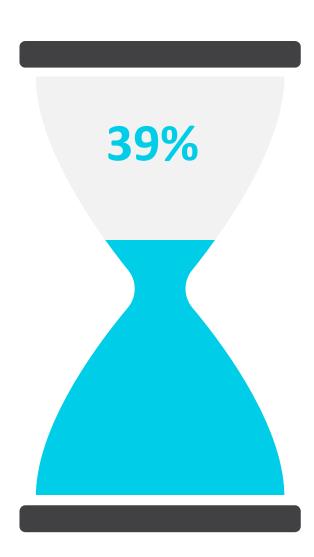
Motor Vehicle Collisions

Motor Vehicle Collisions

Decrease in overall rate from 2008 to 2017

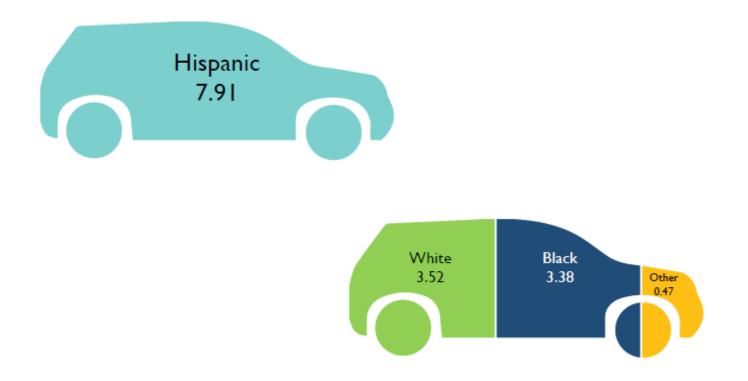
Decrease in MVCs

Child fatality rates from motor vehicle collisions decreased 39% from 2008-2017



Motor Vehicle Collisions

Rates of motor vehicle collisions by race per 100,000 children

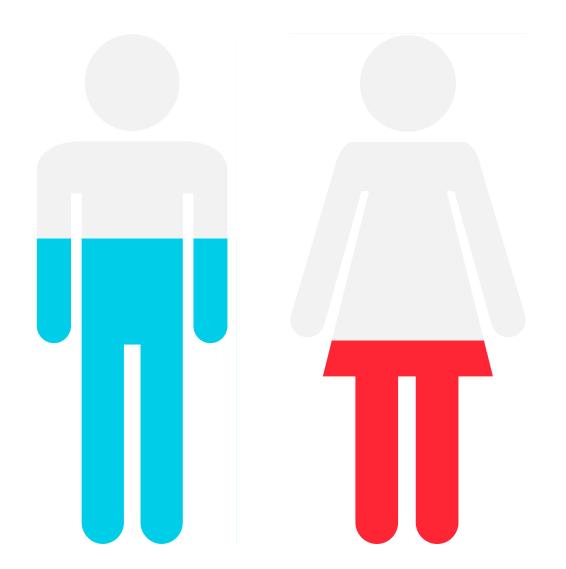


"Hispanic children are twice as likely to die from an motor vehicle collision than any other race/ethnicity."

Motor Vehicle Collisions by Gender

Percentage of motor vehicle collision deaths by gender

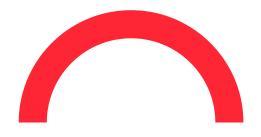




40% FEMALE

Motor Vehicle Collision

Prevention Resources



Vision Zero Network: https://visionzeronetwork.org/



Texas Department of Transportation Traffic Safety Division: https://www.txdot.gov/inside-txdot/division/traffic.html



Texas Department of State
Health Services Safe Riders
Traffic Safety Program:
https://www.dshs.state.tx.us/s
aferiders/



Safe Kids Greater Houston Child Passenger Safety: https://www.safekidsgreaterh ouston.org/child-passengersafety

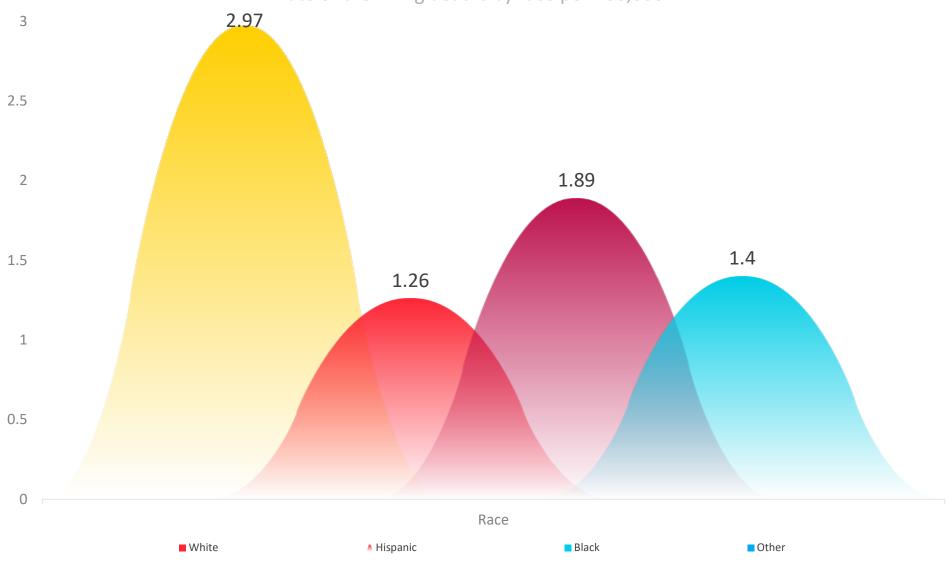


Drowning



Drowning Deaths by Race

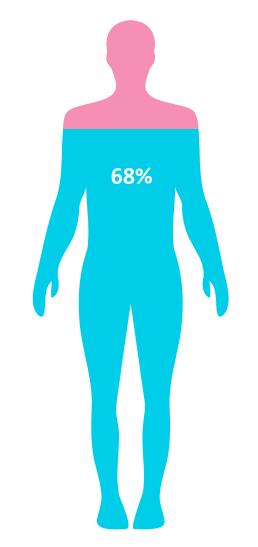




Drowning Deaths by Month and Gender

Most common months for drowning deaths and percentage of deaths by gender

"77.4% of all drownings happen between April and September."



68% of child deaths by drowning are males

Prevention & Resources

THE CDC PROVIDES KEY PREVENTION TIPS FOR PARENTS AND CAREGIVERS94:

- Learn life-saving skills.
 Everyone should know the basics of swimming (floating, moving through the water) and cardiopulmonary resuscitation (CPR).
- Fence it off.
 Install a four—sided isolation fence, with self-closing and self-latching gates, around backyard swimming pools. This can help keep children away from the area when they aren't supposed to be swimming. Pool fences should completely separate the house and play area from the pool.
- Make life jackets a must.
 Make sure kids wear life jackets in and around natural bodies of water, such as lakes or the ocean, even if they know how to swim. Life jackets can be used in and around pools for weaker swimmers, too.
- Be on the lookout.
 When kids are in or near water (including bathtubs), closely supervise them at all times. Because drowning happens quickly and quietly, adults watching kids in or near water should avoid distracting activities like playing cards, reading books, talking on the phone, and using alcohol or drugs.

National Drowning Prevention Alliance https://ndpa.org/

Safe Kids Greater Houston: https://safekidsgreaterhouston.org/ water-safety

Texas Drowning Prevention Alliance http://www.txdpa.com/

American Academy of Pediatrics: Drowning prevention

For parents: Drowning Prevention for Curious Toddlers: What Parents Need to Know https://www.healthychildren.org/English/safetyprevention/at-play/Pages/Water-Safety-And-Young-Children.aspx

For pediatricians: Drowning Prevention Toolkit https://www.aap.org/en-us/about-the-aap/aap-press-room/campaigns/drowning-prevention/Pages/default.aspx

Texas Drowning Prevention Alliance

http://www.txdpa.com/

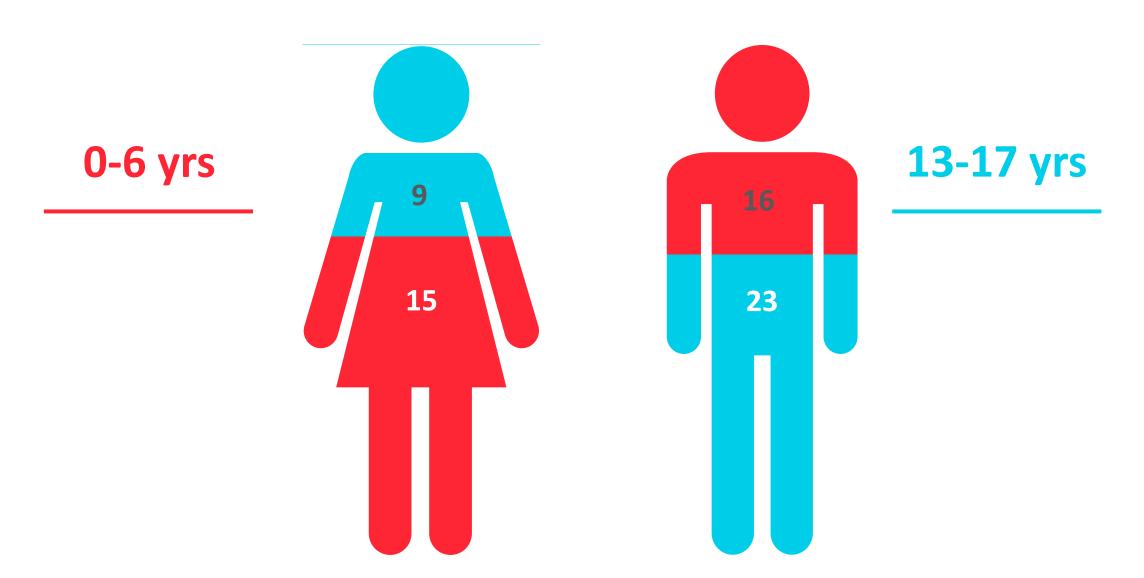
Safe Kids Greater Houston: https://safekidsgreaterhouston.org/water-safety



Overdose

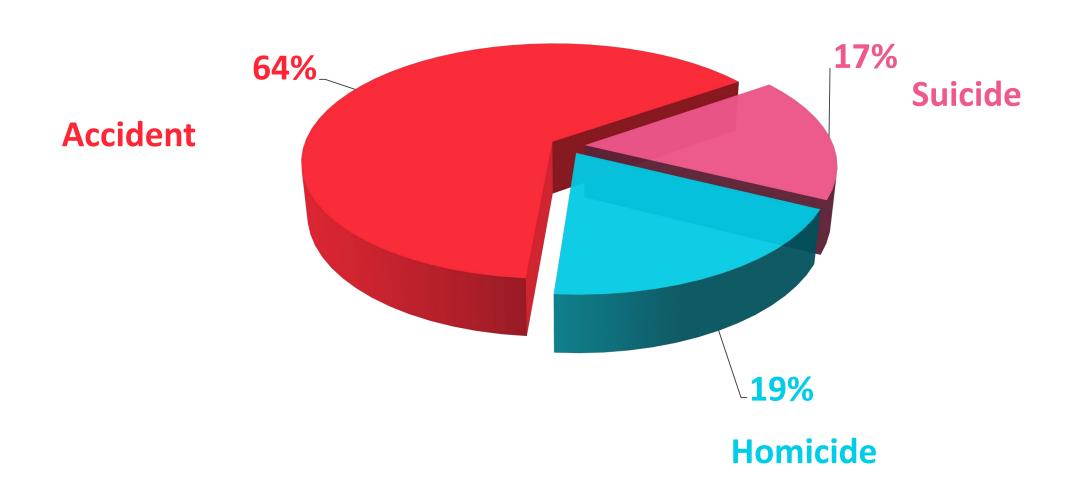
Overdose Death by Age & Gender

Number of deaths by gender in each age group



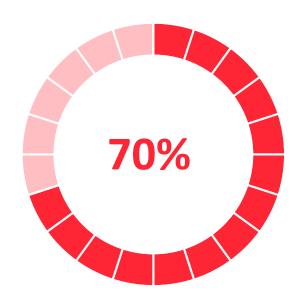
Overdose Deaths by Cause

Percentage of overdose deaths by cause



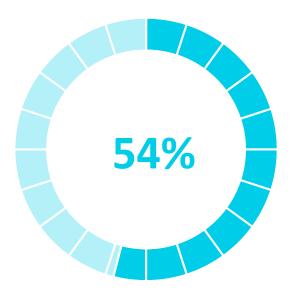
Overdose Manner by Age Group

Manner of overdose by age groups 0-6 & 13-17



70% of adolescents died by accidental overdose.

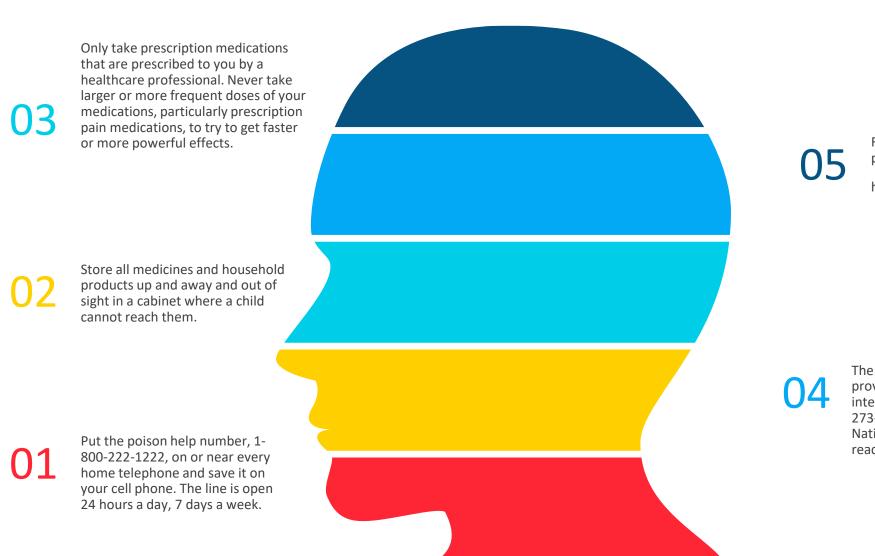
This included teens ingesting both OTC and illicit drugs and unintentionally overdosing.



54% of children 0-6 died by accidental overdose.

This was caused by accidental overmedication by the caregiver or children accessing medications not securely stored.

Overdose Prevention Tips



Find local substance abuse programs here:

https://www.prc6.org

The National Suicide Prevention Lifeline provides emotional support and crisis intervention and can be reached at 1-800-273-8255. For Spanish-language services, the National Suicide Prevention Lifeline can be reached at 1-888-628-9454.



Other Unintentional Injury Deaths

Unintentional Firearm Deaths



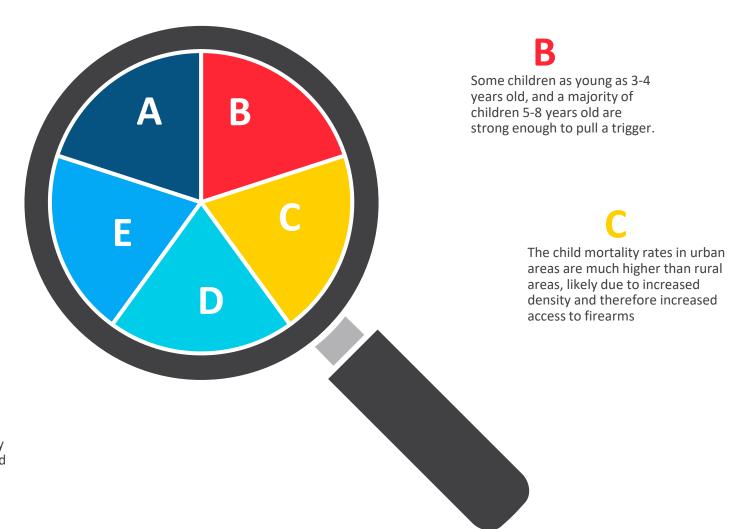
12.5% of firearm deaths in children under 10 were unintentional.

E

In many unintentional firearmrelated deaths among younger children, the firearm was mistaken for a toy.

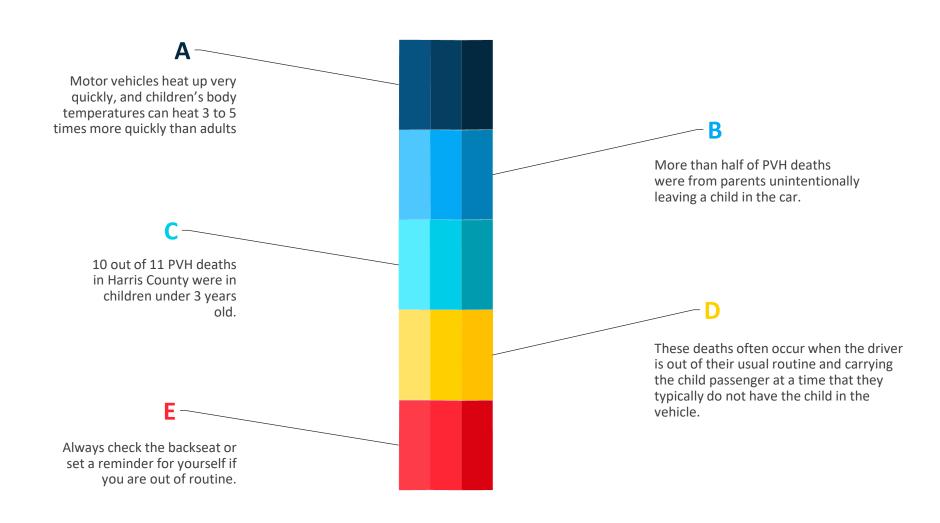
D

Approximately 75% of parents who own guns feel that their young child could distinguish a real gun from a toy gun, and almost 25% of parents stated they trusted their child with a loaded gun.



Pediatric Vehicular Heatstroke (PVH)

Sometimes called "hot car deaths"



Other Unintentional Deaths

Prevention Tips

Choking Deaths

Learn the Heimlich maneuver, know common food and toy hazards, and keep close supervision of young children





Suffocation, Strangulation, and Hanging

Increase caregiver supervision, child-proof your home so that young children and toddlers are less able to interact with potential hazards, such as empty appliances or other small spaces in which children could become trapped, plastic bags, and loose cords, straps, or strings

Fire and Burn Injuries

Check the you have functioning fire alarms and smoke detectors, safe storage of cigarettes and incendiary devices, adequate supervision of active fires, proper maintenance on household heating, and practice an age-appropriate fire safety plan with children





Crush Hazards and Home Safety

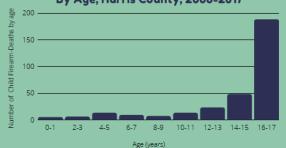
Anchor heavy furniture to the walls, use child locks, lock heavy and sharp objects out of reach, and supervise children with animals.



Read the report with more details at bit.ly/cfrtreport

CHILD FIREARM **DEATHS**

Annual Firearm-Related Deaths By Age, Harris County, 2008-2017



Intention Of Firearm-Related Deaths Among Children Age 0-17, Harris County, 2008-2017

Unintentional shootings are more common among younger children, whereas teenagers are more likely

to be victims of

intentional shootings.

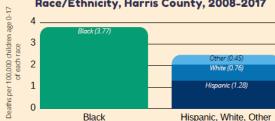


Children age 0-17 years old

Percent Of High School Students Who Report Carrying A Gun (YRBSS, 2017) Houston Texas USA 2.5% 5% 7.5% 10%

Carried a gun on at least one day in the last 12 months, unrelated to hunting or sport

Annual Firearm-Related Deaths By Race/Ethnicity, Harris County, 2008-2017



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FIREARM DEATH **PREVENTION**

Safe Storage



Unloaded

Locked

Store Firearm Separately From **Ammunition**

The safe storage of firearms can decrease child deaths by



It is against Texas law to allow or enable any child to access a firearm while unsupervised.

(Texas Penal Code § 46.13. Making a Firearm

39% of parents who own firearms mistakenly thought their child did not know where the firearm was located...



.but 73% of children knew

22% of parents who own firearms mistakenly thought their child had never handled the firearm...



.but 36% of children had nandled it unsupervised!

75% of parents thought their child could tell the difference between a real gun and a toy...



..but 16% accidental firearm deaths in young children were because they thought it

Some parents may not think their child is strong enough to pull a trigger



.but 25% of children 3-4 years old and 70% of 5-6-year-olds



- Always supervise your children around firearms
- · Ask other parents and caregivers about firearms in the house before play dates
- · Talk to your children about firearm safety

Resources

- Be Smart (BeSmartForKids.org)
- Keep 'Em Safe Texas (SafeGunStorageTexas.com)



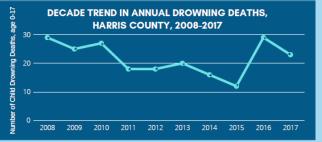
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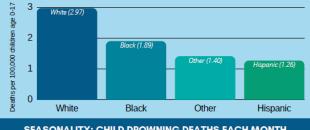
CHILD DROWNING **DEATHS**

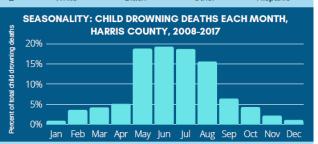
AGE & GENDER OF DROWNING DEATHS AMONG CHILDREN. HARRIS COUNTY, 2008-2017





ANNUAL CHILD DROWNING DEATHS BY RACE/ETHNICITY, HARRIS COUNTY, 2008-2017







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CHILD DROWNING **DEATHS**

LAYERS OF PROTECTION: **MORE IS BETTER**



Sharpen your Skills Learn life-saving skills, like CPR and basic



Fence it Off Ensure physical barriers around water, such as gates, fences, and doors, are latched and locked



Wear a Life Jacket Make sure it is properlyfitting, and US Coast Guard approved



Be on the Lookout Never leave children unattended in water

DROWNING MOST COMMONLY OCCURS AT:







Infants

Toddlers

Children and



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Adolescents

WATER WATCHER CARD, SAFEKIDS.ORG/WATER

"When children are swimming and there are several adults present, make sure kids are actively supervised at all times by choosing a Water Watcher. A Water Watcher is a responsible adult who agrees to watch the kids in the water without distractions and wear a Water Watcher card. After a certain amount of time (such as 15-minutes), the Water Watcher card is passed to another adult, who is responsible for the active supervision." (https://www.safekids.org/other-resource/water-watcher-card)



WATER WATCHER



While wearing this tag, I agree to supervise the children in the open water or pool, keeping them in sight at all times.

I will not leave the water area without finding an adult to replace me.

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MOTOR VEHICLE **COLLISIONS (MVC)**







RISK FACTORS LEADING TO DEATH







years old comprised 5.4% of licensed drivers, but are involved in 9.0% of all fatal collisions.

ANNUAL MVC DEATHS BY RACE/ETHNICITY IN HARRIS COUNTY, 2008-2017

In Harris County, Hispanic children are more than twice as likely to die from a Motor Vehicle Collision than children of any other race/ethnicity.



PREVENTION



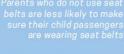
1. Children should remain in a rear-facing car seat until they reach the maximum height or weight that the car seat manufacturer allows.

2. After outgrowing the rear-facing car seat, use a forward-facing car seat until the child reaches the height or weight limits of the forward-facing car seat and then promote to a belt-positioning booster seat.

3. The child should remain in the booster seat until the child reaches the height or weight limits of the booster seat (by Texas law this is at least until age 8 or reaching 4'9" in height).



4. Children under 14 years old should always sit in the back seat.





Among teenagers age 15-17 years old that died in a MVC. 40% were drivers, and less than 25% of those were wearing a seat belt.

STRACTED DRIVING



Refrain from using your cell phone or other devices while driving, especially near pedestrian areas. Texas law prohibits 🚄 texting while driving, and phone calls should be made using a handsfree option.

IMPAIRED DRIVIN

Call a taxi or designated driver if you have been drinking. Never drive under the influence



were passengers of a drunk driver were unrestrained

ISITION OF CHILD IN FATAL COLLISIONS INVOLVING DRUNK DRIVERS. NATIONALL

Passengers struck by Drunk Drivers

PEDESTRIAN SAFETY



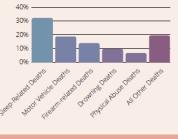
- always use the sidewalk and protected crosswalks
- · look both ways twice before crossing the road
- · avoid using the phone or headphones when near

With the popularity of increasingly large vehicles such as trucks and sport-utility-vehicles, children playing around or near a vehicle in the driveway may not be visible to the driver

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SLEEP-RELATED **INFANT DEATHS**



A LEADING CAUSE OF DEATH AMONG CHILDREN

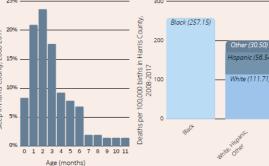
Sleep-related infant deaths account for nearly 1 out of 3 child deaths in Harris County over the last decade.



DECADE TREND IN ANNUAL INFANT SLEEP-RELATED DEATHS HARRIS COUNTY, 2008–2017 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017

AGE (MONTHS) OF INFANT **SLEEP-RELATED DEATHS**

ANNUAL SLEEP-RELATED **DEATHS BY RACE/ETHNICITY**



CAUSE OF DEATH RELATED TO INFANT SLEEP. HARRIS COUNTY, 2008–2017

Other Unsafe Sleep 49.2%

Other causes include unsafe sleep environments, such as soft tovs and pillows nearby, or when baby is sleeping face-down.

Co-sleeping 50.8%

> Co-sleeping is whenever the the baby shares a bed or other surface to sleep with another person.

INFANT SAFE SLEEP

PREVENTION TIPS RECOMMENDED BY **AMERICAN ACADEMY OF PEDIATRICIANS, 2016**



Infants younger than 1 year old should always sleep:

- · Alone
 - · On their back
 - · On a firm surface
 - . In the same room as caregiver



Remove soft or loose objects from baby's sleeping area such as pillows, toys, blankets, bumper pads, and non-fitted sheets. Do not put baby to sleep on the couch, nursing pillow, or car seat.



Avoid overheating during sleep by not over-bundling and by leaving the baby's face and head uncovered.



Avoid smoking, drinking alcohol, or using drugs during pregnancy and after birth. Caregivers who smoke should smoke outdoors, then change into a clean shirt and wash hands thoroughly before holding the baby.



Breastfeeding, using a pacifier, and staying up-todate on immunizations can help keep the baby healthy and prevent sleep-related deaths.



Additional suggestions include:

- Help baby build strength by playing with them during "tummy time"
- · Go to regular prenatal appointments during pregnancy
- · Avoid using products that may be unsafe check for product recalls at www.cpsc.gov



PLAN AHEAD

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- . It is easy to fall asleep with your infant if you are feeding or comforting the baby
- · Problem-solve ahead of time to make sure that you have a plan to make every sleep a safe sleep





ADOLESCENT SUICIDE

Characteristics

A LEADING CAUSE OF **DEATH IN YOUTH**

of death among children ages 10-14 and the second leading cause of death among adolescents ages 15-19.



DECADE TREND IN DEATHS BY SUICIDE, **HARRIS COUNTY, 2008-2017**



CAUSE OF DEATH AND AGE





RACE/ETHNICITY AND GENDER, HARRIS COUNTY, 2008-2017



in the general population.

ADOLESCENT SUICIDE

Resources and Risk Factors

CRISIS HOTLINES THE NATIONAL SUICIDE PREVENTION LIFELINE

suicidepreventionlifeline.org, deaf and HOH accessible

CRISIS TEXT LINE



THE TREVOR PROJECT



TRANS LIFELINE

WARNING SIGNS

OTHER RISK FACTORS



bit.ly/cfrtreport

PROTECTIVE FACTORS

CHILD ABUSE AND NEGLECT

Child abuse and neglect (CAN) occurs whenever a caregiver, through their action or inaction, causes a child to be harmed. Abuse can take many forms, primarily physical, emotional, sexual, or through exploitation.

OUTCOMES OF CHILD ABUSE AND NEGLECT

Survivors are not only at risk of physical injuries, but also toxic stress, which can negatively impact the child's learning and memory, their ability to form healthy relationships, cope with stress, and manage their emotions... difficulties which can persist into adulthood.

RACE/ETHNICITY OF

In Harris County, Black

CAN-RELATED DEATHS

children are more likely to

abuse than children of all other racial groups.

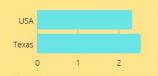
of CAN homicides

occur before the

child's first

birthday

experience death from child



Annual deaths per 100,000 children age 0-17, due to Child Abuse or Neglect, 2017

DECADE TREND IN ANNUAL DEATHS DUE TO CHILD ABUSE AND NEGLECT, HARRIS COUNTY, 2008–2017



AGE AND CAUSE OF DEATH DUE TO CHILD ABUSE AND

NEGLECT IN HARRIS COUNTY. 2008–2017

Over the last decade, there has been a 58% decrease in child deaths due to child abuse and neglect in Harris County.

Other (1.12)

White (2.11)

White, Hispanic, Other

39%

of CAN deaths

under age 3 were

result of an

abusive traumatic

head injury

Race/Ethnicity

PREVENTIN CHILD ABU AND NEGLECT

Prevention efforts center around supporting parents and caregivers

PARENT STRESSORS

- · Family stress, poverty, or lack of social support
- · Lack of parenting skills, or feeling unprepared for the challenges of raising children
- Misunderstanding of child development
- · Parental mental illness, or substance use
- · Violence in the home or history of abuse · Non-biological transient caregiver in the home

other factors can affect the way a parent is able to care for the child and may increase the risk of harm.

and responsive caregiver. Stress and

Children need a safe and stable home environment with a nurturing



COMMON TRIGGERS

Crying: it is normal for newborns to cry often, sometimes inconsolably, but they will grow out of it..



Toilet Training: learn the process and know when your child is developmentally ready

If you are becoming overwhelmed by crying, it is okay to safely leave the baby in the crib for 10-15 minutes and walk away to take a quick break.





Never leave your child with someone who is impatient or quick to anger

INTIMATE PARTNER VIOLENCE



Studies have shown a co-occurrence of intimate partner violence (IPV) and child abuse.



On average 1 in 4 women in the US have experienced IPV.

POSITIVE PARENTING PRACTICES

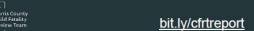
To build a healthy relationship with your child, try:



- · Establish a routine · Give positive feedback for good behavior
- · Listen attentively
- · Designate play time together
- · It's okay to ask for help!
- · Every child and parent is unique

RESOURCES

- CDC Parent Information: from pregnancy to teenagers. www.cdc.gov/parents
 National Domestic Violence Hotline (<a href="theta-th
- Texas Abuse Hotline: 24/7 report suspected child maltreatment. 1-800-252-5400
 Texas Parenting Tips: advice for parents of babies through teenagers: www.getparentingtips.com



Black (5.09)



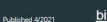
of CAN homicides

occur in children

younger than 3

vears old







To request PDFs of the resources above please email harriscfrt@bcm.edu