



## AMCHP Applauds Congressional Interest in Childhood Injury Prevention

Washington, D.C., May 1 - Michael Fraser, Ph.D., CEO of the Association of Maternal and Child Health Programs (AMCHP), issued this statement today in conjunction with the Senate Health, Education, Labor and Pensions Committee's hearing on childhood injury prevention:

“AMCHP commends Chairman Kennedy and members of the Senate Health, Education, Labor and Pensions Committee for convening today's hearing on opportunities to prevent childhood injuries. Despite decades of substantial public health progress, injury remains the leading cause of death among children in the U.S. Because of this tragic toll, supporting efforts to promote safe communities and prevent childhood injuries is a high priority of AMCHP's public policy agenda.

Perhaps no other issue represents the disconnect between science and policy than our national approach to injury prevention. The U.S. spends literally tens of **billions** of dollars every year to provide health insurance to children – in part to treat injuries – while last year the entire budget of the CDC's National Center for Injury Prevention and Control was only \$134 million. At this level the CDC is able to fund only 30 states for basic injury prevention programs. There are few better illustrations of where our public policy favors treatment over prevention.

Similarly, the Title V Maternal and Child Health (MCH) Services Block Grant - which is intended to improve the health of all children and families and includes two national performance measures related to injury prevention - has been reduced by over \$60 million over the past six years. Most state MCH programs have identified injury prevention as a pressing need, but have been hampered by limited and declining resources to implement proven programs and policies that prevent injuries.

Today's hearing can hopefully begin a national dialogue on how the Congress can move desperately needed public resources upstream to focus on the prevention of childhood injuries and reduce the demand on health insurance programs to pay for treatment.

We know that public health efforts to prevent injuries have been highly successful and deserve to be celebrated. Injuries to children are down 45 percent over the past 20 years, and the CDC estimates that 240,000 lives were saved between 1966 and 1990 because of improved motor vehicle and highway design, increased use of safety belts and motorcycle helmets, and enforcement of laws regarding drinking and driving and speeding. Similar results are possible with other types of injuries.

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To continue and accelerate progress, fully-funded state programs can:

- Educate families on the appropriate type and use of child safety seats via partnerships with local children's safety coalitions and state departments of transportation, and support programs to dispense car seats, cribs, smoke detectors and other home safety equipment;
- Support home visiting and other community-based case management programs that promote injury prevention;
- Work with providers to assess for intimate partner violence in health care visits, including prenatal care and postpartum visits; and,
- Promote "Back to Sleep" campaigns in settings that provide prenatal care, well child care and parenting education classes such as WIC clinics, social service agencies, community health centers and child care centers.

Our country has already made significant progress in establishing some of the infrastructure, policies and programs that combat childhood injury. By expanding these systems to meet current needs and utilizing the proven programs and strategies that address preventable injuries, we can save even more children's lives while providing a cost savings to the nation during economically troubling times. **Fully funding the Title V MCH Block Grant at \$850 million and expanding CDC Injury Center funding to support all states are two important steps Congress can take to enhance childhood injury prevention.**

We congratulate Safe Kids Worldwide on their 20<sup>th</sup> anniversary, and thank both them and our partners in the State and Territorial Injury Prevention Directors Association for their tremendous leadership. Finally, we again thank Senator Kennedy and the Committee for holding this important hearing and look forward to working together to accelerate progress on this important issue."

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*AMCHP is the national organization representing state public health leaders and others working to improve the health and well-being of women, children and youth, including those with special health care needs, and families. For more information, visit [www.amchp.org](http://www.amchp.org). For more information, please contact Brent Ewig, Director of Public Policy and Government Affairs at [bewig@amchp.org](mailto:bewig@amchp.org) or 202-775-0436.*