

EXECUTIVE SUMMARY - Health of Londoners - Injury Prevention

A report for the NHS Executive North Thames - Frances Bunn, Carolyn DiGiuseppi and Ian Roberts

The government health strategy, *Saving Lives: Our Healthier Nation*, set a target to reduce the injury death rate by at least one fifth and to reduce the rate of serious injury by at least one tenth by 2010. This report aims to facilitate the achievement of these targets by identifying, on the basis of evidence from systematic reviews, those injury prevention interventions and research activities that would have the greatest impact on rates of death and serious injury in London.

Ensuring the safety of pedestrians is a major public health issue for London. Each year about 120 Londoners die in pedestrian-motor vehicle collisions with 2,000 seriously injured. Compared with the rest of England, people in London walk more and use their cars less. However, there is evidence of a steep decline in walking. Unchecked, this reduction in activity levels will have important health implications. Reducing traffic speeds and volumes in London could have a substantial impact on the health of Londoners. Fires are another leading cause of injury death in London with steep social class gradients in death rates. Smoke alarms reduce the risk of fire death but homes at greatest risk are least likely to have smoke alarms. A co-ordinated pan-London strategy is required to increase the prevalence of functioning alarms in inner London local authority and private rental accommodation. Pedestrian injuries and fires predominantly affect children and older adults but for young adults in the inner London boroughs opiate overdose is the major killer. Whilst the prevention of opiate abuse falls outside the remit of this review, there is a need for an integrated response to this public health problem. Among older females falls are a leading cause of unintentional injury death; multifaceted interventions, including exercise programmes, need to be established.

Injury kills and disables and there is a clear imperative to take action. Prevention policy should be made on the basis of the best available evidence and this report attempts to identify and collate this evidence. Nevertheless, the effectiveness of many, if not most, injury prevention interventions remains in doubt. For this reason, evaluation must be an integral part of injury prevention programmes. By rigorously testing and refining our strategies we will make the best use of existing resources for injury control and provide a sound evidence base on which to proceed.