Using Federal Data to Optimize and Inform Prevention Programs and Research

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National Center for Injury Prevention and Control
Centers for Disease Control and Prevention

3rd Annual Injury Prevention Coordinators Symposium
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Inventory of National Injury Data Systems

https://www.cdc.gov/injury/wisqars/InventoryInjuryDataSys.html
Behavioral Risk Factor Surveillance System (BRFSS)
Behavioral Risk Factor Surveillance System (BRFSS)

- CDC’s Chronic Disease Center (NCCDPHP)
- Scope: Started in 1984; nationwide in 1993; now 50 states, DC, and several US territories
- Methods
  - Telephone (land and cell) interviews (>500,000/year)
  - U.S. adults 18 years and older
  - Fixed Core, rotating core, optional modules for self-reported health behaviors
- Access
  - Online querying (https://www.cdc.gov/brfss/data_tools.htm)
    - Prevalence and Trends
    - Cross tabulations and some regression capabilities
BRFSS Injury Questions

- Core Questions
  - Drink and Drive (2010, 2012, 2014)
  - Seat Belt Use (2011-2015)

- Recent Optional Modules
  - Adverse Childhood Experiences (2004, 2009-2012)
  - Carbon Monoxide Detectors (2009)
  - Intimate Partner Violence (2005-2007)
  - Sexual Violence (2005-2007)
Falls and Fall Injuries Among Adults with Arthritis — United States, 2012

Kamil E. Barbour, PhD¹, Judy A. Stevens, PhD², Charles G. Helmick, MD¹, Yao-Hua Luo, PhD¹, Louise B. Murphy, PhD¹, Jennifer M. Hootman, PhD¹, Kristina Theis, MPH¹, Lynda A. Anderson, PhD¹, Nancy A. Baker, ScD³, David E. Sugerman, MD²

- Data from 2012 BRFSS
- Prevalence of falling in past 12 months significantly higher among adults with arthritis.
- Among >45 years with arthritis, 46 states and DC fall prevalence >30% and 16 states ≥40%

Youth Risk Behavior Surveillance System (YRBSS)
Youth Risk Behavior Surveillance System (YRBSS)

- CDC’s Chronic Disease Center (NCCDPHP)
- Scope
  - Developed in 1990; National data collection; Some representative State-level data available; Some cities also available
- Methods
  - School based survey
  - 9th through 12th grade students (public and private schools)
  - National sample >15,000 students
- Access
  - Online querying (https://nccd.cdc.gov/youthonline/App/Default.aspx)
YRBSS Injury Questions

- Unintentional Injuries
  - Used bicycle helmets
  - Uses seat belts
  - Rode with driver who had been drinking
  - Drink and drive
  - Texted while driving car

- Violence
  - Carried weapon, gun
  - Threatened or injured with weapon on school property
  - Was in physical fight, injured

- Felt unsafe to go to school
- Was electronically bullied
- Experienced physical or sexual dating violence

- Suicide-Related
  - Felt sad or hopeless
  - Seriously considered attempting suicide
  - Made a plan for suicide
  - Attempted suicide
  - Attempted suicide that resulted in injury, poisoning, or overdose
Texting While Driving and Other Risky Motor Vehicle Behaviors Among US High School Students

<table>
<thead>
<tr>
<th></th>
<th>Any TWD in past 30 days (≥1d) % (95% CI)</th>
<th>TWD every day (30d) % (95% CI)</th>
</tr>
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<tbody>
<tr>
<td>Overall (n=8,505)</td>
<td>45.5 (40.8-48.2)</td>
<td>11.5 (10.1-13.1)</td>
</tr>
<tr>
<td>Age (years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>32.6 (28.8-36.6)</td>
<td>7.4 (5.9-9.3)</td>
</tr>
<tr>
<td>17</td>
<td>50.0 (44.9-55.1)</td>
<td>12.3 (10.5-14.5)</td>
</tr>
<tr>
<td>≥18</td>
<td>57.7 (53.6-61.7)</td>
<td>18.1 (15.4-21.2)</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>42.3 (38.0-46.8)</td>
<td>10.3 (8.5-12.3)</td>
</tr>
<tr>
<td>Male</td>
<td>46.4 (42.8-50.0)</td>
<td>12.6 (11.2-14.2)</td>
</tr>
<tr>
<td>Race/ethnicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White*</td>
<td>50.7 (45.8-55.6)</td>
<td>13.0 (11.2-15.0)</td>
</tr>
<tr>
<td>Black*</td>
<td>30.1 (25.1-35.6)</td>
<td>8.6 (6.9-10.6)</td>
</tr>
<tr>
<td>Hispanic</td>
<td>38.8 (35.8-41.9)</td>
<td>9.9 (8.3-11.8)</td>
</tr>
</tbody>
</table>

* Non-Hispanic

2011 National YRBS Data

Ref: Pediatrics. 2013:131:e1708-e1715
Fatal Accident Reporting System (FARS)
Fatal Accident Reporting System (FARS)

- Run by the National Highway Traffic Safety Administration (NHTSA-DOT)
- Scope
  - Established in 1975
  - Census of all MV crashes on public roads that resulted in at least 1 death within 50 states, DC and Puerto Rico
- Methods
  - States compile and report data to NHTSA
  - Data sources: Police Reports, Vehicle Reg. files, Driver License files, State Highway Depart. data, vital records/death certificates, coroner/ME reports, EMS reports
- Access
  - Public use data files from FTP site (ftp://ftp.nhtsa.dot.gov/fars/)
  - Online querying (https://www-fars.nhtsa.dot.gov//QueryTool/QuerySection/SelectYear.aspx)
FARS Crash Information Collected

- **Crash**
  - Date, time, location
  - Weather conditions

- **Vehicles**
  - Make, model, year, body type
  - Impact points
  - Number of occupants
  - Sequence of events

- **People Involved**
  - Driver
    - Registration state
    - License type and status
    - Previous violations
  - Occupants
    - Age, sex
    - Seating position
    - Restraint use
    - Alcohol/drug involvement
    - Injury severity
  - Bicyclists/pedestrians
Erin K. Sauber-Schatz, PhD¹, Bethany A. West, MPH¹, Gwen Bergen, PhD¹

FIGURE 1. Motor vehicle occupant deaths per 100,000 population for children aged 0–12 years, by age group and year — United States, 2002–2011

Ref: MMWR. 2014; 63(5):113-118.
National Violent Death Reporting System (NVDRS)
National Violent Death Reporting System (NVDRS)

- NCIPC (Injury Center) at CDC
- Scope
  - 2000: pilot
  - 2003: Data collection begins with 6 states
  - 2014: 32 states total
  - 2016: 8 additional states, DC, and Puerto Rico added
Current NVDRS States

- OR, AK, HI, and PR are in yellow, indicating the year 2002.
- CO and NM are in green, indicating the year 2003.
- UT and SC are in orange, indicating the year 2004.
- GA is in dark green, indicating the year 2009.
- WA is in purple, indicating the year 2014.
- All other states are colored differently according to the year they started participating in the NVDRS program.
National Violent Death Reporting System (NVDRS)

- **Methods**
  - Active, ongoing state-based surveillance system
  - Information abstracted using a web-based application
  - Provides comprehensive information on violent deaths within participating states to fully characterize incidents

- **Primary required data sources:**
  - Death certificates
  - Coroner or medical examiner (CME) reports (including toxicology) (have narratives)
  - Law enforcement (LE) reports (have narratives)

- **Secondary optional data sources:**
  - Child Fatality Review (CFR) team data
  - Intimate Partner Violence (IPV) Review team data
  - Crime lab data
  - Supplementary Homicide Reports
  - Hospital data
National Violent Death Reporting System (NVDRS)

- Access
  - Online querying through WISQARS (https://www.cdc.gov/injury/wisqars/)
  - Restricted Access Database available upon request (https://www.cdc.gov/violenceprevention/nvdrs/rad.html)
Leading Key Circumstances Suicide Deaths by Decedent’s Sex

<table>
<thead>
<tr>
<th></th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Method</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Firearm</td>
<td><strong>n=9,876</strong></td>
<td><strong>n=2,869</strong></td>
<td><strong>N=12,747</strong></td>
</tr>
<tr>
<td>Hanging/Suffocation</td>
<td>57%</td>
<td>32%</td>
<td>51%</td>
</tr>
<tr>
<td>Poisoning</td>
<td>25%</td>
<td>24%</td>
<td>25%</td>
</tr>
<tr>
<td></td>
<td>10%</td>
<td>35%</td>
<td>16%</td>
</tr>
<tr>
<td><strong>Diagnosed Mental Health Problem</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td><strong>n=3,572</strong></td>
<td><strong>n=1,632</strong></td>
<td><strong>N=5,204</strong></td>
</tr>
<tr>
<td>Anxiety disorder</td>
<td>72%</td>
<td>76%</td>
<td>73%</td>
</tr>
<tr>
<td>Bipolar disorder</td>
<td>14%</td>
<td>18%</td>
<td>15%</td>
</tr>
<tr>
<td></td>
<td>12%</td>
<td>17%</td>
<td>14%</td>
</tr>
<tr>
<td><strong>Type of Recent Crisis</strong></td>
<td><strong>n=2,929</strong></td>
<td><strong>n=715</strong></td>
<td><strong>N=3,644</strong></td>
</tr>
<tr>
<td>Intimate Partner</td>
<td>44%</td>
<td>39%</td>
<td>43%</td>
</tr>
<tr>
<td>Criminal Legal</td>
<td>15%</td>
<td>7%</td>
<td>14%</td>
</tr>
<tr>
<td>Physical Health</td>
<td>13%</td>
<td>12%</td>
<td>13%</td>
</tr>
<tr>
<td>Family Relationship</td>
<td>8%</td>
<td>14%</td>
<td>9%</td>
</tr>
</tbody>
</table>

Injury Deaths: National Vital Statistics System (Death Certificate Data)
## National Vital Statistics System (Death Certificate Data)

- **CDC’s National Center for Health Statistics**
- **Scope**
  - Census of all death certificates for U.S. residents
- **Methods**
  - States send to NCHS, creation of national database
  - Single underlying cause of death
    - Up to 20 additional multiple causes
    - 1999-present: ICD-10 coded
  - Age, race, ethnicity
  - Place of residence (state, county)
  - Place of death, month and week day of death
  - Whether an autopsy was performed
National Vital Statistics System (Death Certificate Data)

- **Access**

- **Online querying**
  - WISQARS
  - WONDER
  https://wonder.cdc.gov/
### 10 Leading Causes of Death by Age Group, United States - 2015

<table>
<thead>
<tr>
<th>Rank</th>
<th>&lt;1</th>
<th>1-4</th>
<th>5-9</th>
<th>10-14</th>
<th>15-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
<th>Total</th>
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<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>633,842</strong></td>
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<td>2</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td><strong>146,571</strong></td>
</tr>
<tr>
<td>5</td>
<td><strong>1,291</strong></td>
<td><strong>147</strong></td>
<td><strong>88</strong></td>
<td><strong>156</strong></td>
<td><strong>97</strong></td>
<td><strong>3,522</strong></td>
<td><strong>2,085</strong></td>
<td><strong>4,836</strong></td>
<td><strong>8,936</strong></td>
<td><strong>16,168</strong></td>
<td><strong>140,323</strong></td>
</tr>
<tr>
<td>6</td>
<td><strong>910</strong></td>
<td><strong>54</strong></td>
<td><strong>44</strong></td>
<td><strong>93</strong></td>
<td><strong>276</strong></td>
<td><strong>584</strong></td>
<td><strong>586</strong></td>
<td><strong>7,986</strong></td>
<td><strong>5,712</strong></td>
<td><strong>6,733</strong></td>
<td><strong>109,495</strong></td>
</tr>
<tr>
<td>7</td>
<td><strong>503</strong></td>
<td><strong>54</strong></td>
<td><strong>44</strong></td>
<td><strong>93</strong></td>
<td><strong>276</strong></td>
<td><strong>584</strong></td>
<td><strong>586</strong></td>
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<td><strong>109,495</strong></td>
</tr>
<tr>
<td>8</td>
<td><strong>462</strong></td>
<td><strong>54</strong></td>
<td><strong>44</strong></td>
<td><strong>93</strong></td>
<td><strong>276</strong></td>
<td><strong>584</strong></td>
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<td><strong>5,712</strong></td>
<td><strong>6,733</strong></td>
<td><strong>109,495</strong></td>
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<tr>
<td>9</td>
<td><strong>428</strong></td>
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<td><strong>93</strong></td>
<td><strong>276</strong></td>
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<td>10</td>
<td><strong>406</strong></td>
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<td><strong>44</strong></td>
<td><strong>93</strong></td>
<td><strong>276</strong></td>
<td><strong>584</strong></td>
<td><strong>586</strong></td>
<td><strong>7,986</strong></td>
<td><strong>5,712</strong></td>
<td><strong>6,733</strong></td>
<td><strong>109,495</strong></td>
</tr>
</tbody>
</table>

**Data Source:** National Vital Statistics System, National Center for Health Statistics, CDC.

Produced by: National Center for Injury Prevention and Control, CDC using WISQARS™.
Trends in Suicide by Level of Urbanization — United States, 1999–2015

Scott R. Kegler, PhD¹; Deborah M. Stone, ScD²; Kristin M. Holland, PhD²

FIGURE. Suicide rates* by level of county urbanization† — United States, 1999–2015

Non-fatal Injuries
National Electronic Injury Surveillance System – All Injury Program (NEISS-AIP)

Use for section headers
National Electronic Injury Surveillance System – All Injury Program (NEISS-AIP)

- U.S. Consumer Product Safety Commission (CPSC) and CDC’s Injury Center (NCIPC)
- Scope
  - National Estimates of Injury-related Emergency Department Visits and Hospitalizations
- Methods
  - NEISS-AIP Started in 2000
  - First time, injury-related visits on all types and causes of injuries
    - Injuries where no product is mentioned (e.g., fell on ground)
    - Injuries related to products not currently collected (e.g., motor vehicles)
    - Intentional injuries; assaults or suicide attempts
  - Nationally representative sample of 66 of 100 NEISS U.S. hospitals with ≥ 6 beds and an ED
National Electronic Injury Surveillance System – All Injury Program (NEISS-AIP)

- **Methods**
  - Approximately 500,000 cases per year ($3.40 USD per case)
  - Dedicated coders abstract medical records
  - Extensive training and quality assurance measures with both automated and visual edits
  - Data on mechanism and intent of injury

- **Access**
  - Public use data sets ([https://www.icpsr.umich.edu/icpsrweb/ICPSR/series/198](https://www.icpsr.umich.edu/icpsrweb/ICPSR/series/198))
  - Online querying
    - WISQARS

V Coronado, T Haileyesus, T Cheng, J Bell, J Haarbauer-Krupa, M Lionbarger, J Flores-Herrara, L McGuire, J Gilchrist

Ref: J Head Trauma Rehabil. 2015. 30(3):185-197
Web-based Injury Statistics Query and Reporting System

https://www.cdc.gov/injury/wisqars
CDC’s WISQARS™ (Web-based Injury Statistics Query and Reporting System) is an interactive, online database that provides fatal and nonfatal injury, violent death, and cost of injury data from a variety of trusted sources. Researchers, the media, public health professionals, and the public can use WISQARS™ data to learn more about the public health and economic burden associated with unintentional and violence-related injury in the United States.

- FATAL INJURY DATA
- COST OF INJURY REPORTS
- NONFATAL INJURY DATA
- FATAL INJURY MAPPING
- VIOLENT DEATHS
- ABOUT US
Welcome to WISQARS™

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- ABOUT US
Fatal Injury Data

Reports, Charts, and Maps

- Cost of Injury Reports 2010
- Fatal Injury Maps 2008-2014
- Fatal Injury Reports 1981-2015
- Years of Potential Life Lost (YPLL) 1981-2015
Fatal Injury Data

Reports, Charts, and Maps

- Cost of Injury Reports 2010
- Fatal Injury Maps 2008-2014
- Fatal Injury Reports 1981-2015
- Years of Potential Life Lost (YPLL) 1981-2015

Year Range / Census Region

- 1999 to 2015 (ICD-10), National and Regional
- 1999 to 2015 (ICD-10), National, Regional and State (Restricted)
- 1981 to 1998 (ICD-9), National, Regional and State
Select specific options.

<table>
<thead>
<tr>
<th>Census Region</th>
<th>Year(s) of Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>2015 to 2015</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>Hispanic Origin</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Races</td>
<td>All</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex</th>
<th>Output Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Both Sexes</td>
<td>Standard Output</td>
</tr>
</tbody>
</table>

Submit Request or Reset

Advanced Options (not required)

Select age groups.
- All Ages (includes unknown age)
- Age Groups 0-4 to 0-4
- Custom Age Range <1 to <1

Compare injury rates using age-adjusting.
Select Standardized Year for Age-Adjusting:
- Use 2000 as the Standard Year.
- No Age-Adjusting Requested

Select output group(s).
1. None
2. None
3. None
4. None

Submit Request or Reset
### 2010 - 2015, United States
Unintentional MV Traffic Deaths and Rates per 100,000
All Races, Both Sexes, All Ages

ICD-10 Codes: V30-V39 (4.9), V40-V49 (4.9), V50-V59 (4.9),
V60-V69 (4.9), V70-V79 (4.9), V81.1 V82.1,V83-V86 (0.3),
V20-V28 (3-9),V29 (4.9),V12-V14 (3-9),V19 (4-6),
V02-V04 (1.9),V09.2,V80 (3.5),V87(0-8),V89.2

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Deaths</th>
<th>Population***</th>
<th>Crude Rate</th>
<th>Age-Adjusted Rate**</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>33,687</td>
<td>308,745,538</td>
<td>10.91</td>
<td>10.70</td>
</tr>
<tr>
<td>2011</td>
<td>33,783</td>
<td>311,718,857</td>
<td>10.84</td>
<td>10.60</td>
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<tr>
<td>2012</td>
<td>34,935</td>
<td>314,102,623</td>
<td>11.12</td>
<td>10.84</td>
</tr>
<tr>
<td>2013</td>
<td>33,804</td>
<td>316,427,395</td>
<td>10.68</td>
<td>10.39</td>
</tr>
<tr>
<td>2014</td>
<td>33,736</td>
<td>318,907,401</td>
<td>10.58</td>
<td>10.26</td>
</tr>
<tr>
<td>2015</td>
<td>36,161</td>
<td>321,418,820</td>
<td>11.25</td>
<td>10.88</td>
</tr>
<tr>
<td>Total</td>
<td>206,106</td>
<td>1,891,320,634</td>
<td>10.90</td>
<td></td>
</tr>
</tbody>
</table>
Welcome to WISQARS™

2015 Nonfatal Injury Data Now Available

CDC’s WISQARS™ (Web-based Injury Statistics Query and Reporting System) is an interactive, online database that provides fatal and nonfatal injury, violent death, and cost of injury data from a variety of trusted sources. Researchers, the media, public health professionals, and the public can use WISQARS™ data to learn more about the public health and economic burden associated with unintentional and violence-related injury in the United States.

FATAL INJURY DATA

NONFATAL INJURY DATA

VIOLENT DEATHS

COST OF INJURY REPORTS

FATAL INJURY MAPPING

ABOUT US
### Unintentional Falls, All Ages, United States, 2015

#### Deaths and Type of Cost

<table>
<thead>
<tr>
<th>Year</th>
<th>Mechanism</th>
<th>Intent</th>
<th>Unintentional</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>Fall</td>
<td></td>
<td>33,381</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medical Cost Total</td>
<td>$863,989,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Work Loss Cost Total</td>
<td>$9,442,952,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Combined Cost Total</td>
<td>$10,306,941,000</td>
</tr>
</tbody>
</table>

#### Hospitalizations and Type of Cost

<table>
<thead>
<tr>
<th>Year</th>
<th>Mechanism</th>
<th>Intent</th>
<th>Unintentional</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>Fall</td>
<td></td>
<td>1,338,502</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medical Cost Total</td>
<td>$56,363,889,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Work Loss Cost Total</td>
<td>$83,856,774,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Combined Cost Total</td>
<td>$140,220,663,000</td>
</tr>
</tbody>
</table>

#### ED Visits and Type of Cost

<table>
<thead>
<tr>
<th>Year</th>
<th>Mechanism</th>
<th>Intent</th>
<th>Unintentional</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>Fall</td>
<td></td>
<td>7,895,687</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medical Cost Total</td>
<td>$21,797,706,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Work Loss Cost Total</td>
<td>$32,845,973,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Combined Cost Total</td>
<td>$54,643,678,000</td>
</tr>
</tbody>
</table>

- Medical: $79,025,584,000
- Work Loss: $126,145,699,000
- Total Cost: $205,171,282,000
Welcome to WISQARS™

CDC’s WISQARS™ (Web-based Injury Statistics Query and Reporting System) is an interactive, online database that provides fatal and nonfatal injury, violent death, and cost of injury data from a variety of trusted sources. Researchers, the media, public health professionals, and the public can use WISQARS™ data to learn more about the public health and economic burden associated with unintentional and violence-related injury in the United States.

FATAL INJURY DATA

NONFATAL INJURY DATA

VIOLENT DEATHS

COST OF INJURY REPORTS

FATAL INJURY MAPPING

ABOUT US
2008-2014, United States
Smoothed Age-adjusted Death Rates per 100,000 Population
All Injury, Suicide, All Races, All Ethnicities, Both Sexes, All Ages
Annualized Age-adjusted Rate for United States: 12.26

Reports for All Ages include those of unknown age.
* Rates based on 20 or fewer deaths may be unstable. These rates are suppressed for counties (see legend above); such rates in the title have an asterisk.
The standard population for age-adjustment represents the year 2000, all races, both sexes.
Rates appearing in this map have been geospatially smoothed.

Produced by: the Statistics, Programming & Economics Branch, National Center for Injury Prevention & Control, CDC
Data Sources: NCHS National Vital Statistics System for numbers of deaths; US Census Bureau for population estimates.
Welcome to WISQARS™

CDC’s WISQARS™ (Web-based Injury Statistics Query and Reporting System) is an interactive, online database that provides fatal and nonfatal injury, violent death, and cost of injury data from a variety of trusted sources. Researchers, the media, public health professionals, and the public can use WISQARS™ data to learn more about the public health and economic burden associated with unintentional and violence-related injury in the United States.

- FATAL INJURY DATA
- COST OF INJURY REPORTS
- NONFATAL INJURY DATA
- FATAL INJURY MAPPING
- VIOLENT DEATHS
- ABOUT US
1. **Select a report type.** (Select only one button from the eight options below.)

   - Violent Death Counts and Rates
   - Violent Death Counts and Percentages by KNOWN CIRCUMSTANCES of DEATH, Place of Injury, Pregnancy Status, Homeless Status, and Military Status
   - Suicide Counts and Rates
   - Suicide Counts and Percentages by KNOWN CIRCUMSTANCES of DEATH
   - All Violent Incident Counts and Percentages
   - Single-Victim Violent Incident Counts and Percentages
   - Multiple-Victim Violent Incident Counts and Percentages

   **Deaths and Rates**
   - Age-adjusted Rates, Crude Rates and Death Counts
   - Use [2000] as the Standard Year
   - Crude Rates and Death Counts

2. **What was the intent or manner of the injury based on the abstractor-assigned manner of death?** (Select one or more boxes.)

   - All Intents (Uncheck box to select sub-groups)
     - Unintentional firearm
     - Homicide
     - Legal intervention
     - Suicide
     - Undetermined intent
     - Homicide followed by Suicide

3. **Specify the relationship of victim to suspect.** (When applicable)

   - All (Uncheck box to select sub-groups)
     - Spouse or other intimate partner (current or ex)
     - Parent
     - Child
     - Other Relative
     - Victim injured by intimate partner of relative
     - Acquaintance or friend
     - Rival gang member
     - Stranger
     - Victim injured by law enforcement officer
     - Other specified relationship
     - Unknown
4. What was the **cause or mechanism** of the injury based on the abstractor-assigned manner of death? (Select one or more boxes.)

- **Standard Injury Mortality Cause Groupings**
  - [ ] All injury (Uncheck box to select sub-groups)
    - [ ] Firearm
    - [ ] Cut/Pierce/Stab with sharp instrument
    - [ ] Struck by/against
    - [ ] Poisoning
    - [ ] Hanging, strangulation, suffocation
    - [ ] Fall
    - [ ] Drowning
    - [ ] Fire/Blaze
    - [ ] Motor vehicle, including buses, motorcycles and other
    - [ ] Other
    - [ ] Unknown

- **Firearm**
  - [ ] All (Uncheck box to select sub-groups)
    - [ ] Handgun
    - [ ] Shotgun
    - [ ] Rifle
    - [ ] Other firearm
    - [ ] Combination of firearms
    - [ ] Unknown/Not reported

- **Poisoning**
  - [ ] All (Uncheck box to select sub-groups)
    - [ ] Street/recreational drugs only
    - [ ] Alcohol only
    - [ ] Prescription and over-the-counter (OTC) drugs
    - [ ] Carbon monoxide or other gas only
    - [ ] Multiple drug combinations
    - [ ] Other specified poison
    - [ ] Unknown drugs/Not reported

- **Struck By/Against**
  - [ ] All (Uncheck box to select sub-groups)
    - [ ] Blunt instrument
    - [ ] Personal weapons (hands, feet)

5. Select specific options. (Make multiple selections by dragging mouse or by holding down "control" [Ctrl] key.)

**Select Year(s) of Report**
- 2014
- 2013
- 2012
- 2011

**Select Individual State(s)**
- All funded states (For years selected)
- Alaska (2003 - 2014)
- Colorado (2004 - 2014)
- Georgia (2004 - 2014)

**Victim: Race**
- All Races
- White
- Black
- Am Indian/AK Native
- Asian/Pac Islander

**Victim: Ethnicity**
- All Ethnicity
- Non-Hispanic
- Hispanic
- Unknown

**Victim: Sex**
- Both Sexes
- Males
- Females
Select Additional Characteristics of Victims. (Make multiple selections by dragging mouse or by holding down "Control" [Ctrl] key.)

**Victim: Place of Injury**
- All
- House/apartment/yard/driveway
- Residential institution/shelter/prison
- Highway/road/automobile
- Recreational/cultural area/public building
- Commercial/industrial/construction area
- Natural area/countryside/forest
- Other including school/sports areas
- Unknown/Missing

**Victim: Pregnancy Status**
- All
- Pregnant
- Not Pregnant
- Unknown/Missing

**Victim: Homeless Status**
- All
- Homeless
- Not Homeless
- Unknown/Missing

**Victim: Military Status**
- All
- Current/Former Military
- Non-Military
- Unknown/Missing

---

**Advanced Options**

**Select Victims' Age Group**
(Note that for suicide ages 0-9 are suppressed based on a child’s inability to form and understand suicidal intent and consequences.)

- All Ages (includes unknown age)
- Age Groups 0-4 to 0-4
- Single Age Range <1 to <1

(For crude rates only.)

---

**Select Output Group(s)**

<table>
<thead>
<tr>
<th>Down/Rows</th>
<th>Across/Columns</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

**Select Report Format**

- HTML

[Submit Request]
### 2014, NVDRS States: AK, CO, GA, KY, MA, MD, MI, NC, NJ, NM, OH, OK, OR, RI, SC, UT, VA, WI
**All Victims Death Counts and Rates per 100,000**
Homicide, Spouse/Intimate Partner, Parent, Child, Other Relative, Firearm
All Races, Both Sexes, All Ages

<table>
<thead>
<tr>
<th>Sex</th>
<th>Male</th>
<th>Female</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number of Deaths</td>
<td>Population</td>
<td>Crude Rate</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>191</td>
<td>52,308,010</td>
<td>0.37</td>
</tr>
</tbody>
</table>
WISQARS Updates and Enhancements

Total Deaths: 199k

Drug Poisoning: 24%
Fall: 17%
Suffocation: 9.3%
Mv Traffic, Unspecified: 7.9%

Firearm:
- Mv Traffic, Occupant: 4.1%
- Unspecified: 4.0%

Mv Traffic, Pedestrian: 2.6%
Non-Drug Poisoning: 2.5%
Drowning: 2.0%
Fire/Flame: 1.6%
Cut/Pierce: 1.3%

Graphs showing trends and data analysis.
Thank you!

Contact Info:
Mick Ballesteros
mballesteros@cdc.gov
770-488-1481

For more information, contact CDC
1-800-CDC-INFO (232-4636)

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.