15
Injury and Violence Prevention

Injury Prevention
15-1  Nonfatal head injuries
15-2  Nonfatal spinal cord injuries
15-3  Firearm-related deaths
15-4  Proper firearm storage in homes
15-5  Nonfatal firearm-related injuries
15-6  Child fatality review
15-7  Nonfatal poisonings
15-8  Deaths from poisoning
15-9  Deaths from suffocation
15-10 Emergency department surveillance systems
15-11 Hospital discharge surveillance systems
15-12 Emergency department visits

Unintentional Injury Prevention
15-13 Deaths from unintentional injuries
15-14 Nonfatal unintentional injuries
15-15 Deaths from motor vehicle crashes
15-15a Rate per 100,000 population
15-15b Rate per 100 million vehicle miles traveled
15-16 Pedestrian deaths
15-17 Nonfatal motor vehicle injuries
15-18 Nonfatal pedestrian injuries
15-19 Safety belts
15-20 Child restraints
15-21 Motorcycle helmet use
15-22 Graduated driver licensing
15-23 Bicycle helmet use
15-24 Bicycle helmet laws
15-25 Residential fire deaths
15-26 Functioning smoke alarms in residences
15-26a Total population
15-26b Residences
15-27 Deaths from falls
15-28 Hip fractures
15-28a Females aged 65 years and older
15-28b Males aged 65 years and older
15-29 Drownings
15-30 Dog bite injuries
15-31 Injury protection in school sports

**Violence and Abuse Prevention**

15-32 Homicides
15-33 Maltreatment and maltreatment fatalities of children
15-33a Maltreatment
15-33b Maltreatment fatalities
15-34 Physical assault by intimate partners
15-35 Rape or attempted rape
15-36 Sexual assault other than rape
15-37 Physical assaults
15-38 Physical fighting among adolescents
15-39 Weapon carrying by adolescents on school property
15-1. Reduce hospitalizations for nonfatal head injuries.

**National Data Source**
National Hospital Discharge Survey (NHDS), CDC, NCHS.

**State Data Source**
State hospital discharge systems.

**Healthy People 2000 Objective**
9.9 (Unintentional Injuries), age adjusted to 2000 standard population.

**Measure**
Rate per 100,000 population (age adjusted—see Comments).

**Baseline**
60.6 (1998).

**Numerator**
Number of hospitalizations for nonfatal head injuries (principal diagnosis of ICD-9-CM codes 800-801, 803-804, 850-854, 870-873, 925).

**Denominator**
Number of persons.

**Population Targeted**
U.S. civilian population.

**Questions Used To Obtain the National Data**
From the 1998 National Hospital Discharge Survey:

- Final Diagnoses (Including E-code diagnoses):
- Principal:

**Expected Periodicity**
Annual.

**Comments**
Principal diagnosis is the diagnosis chiefly responsible for admission of the person to the hospital.

Data are age-adjusted to the 2000 standard population. Age-adjusted rates are the weighted sums of age-specific rates. For a discussion of age adjustment see Part A, section 5.

See Part C for a description of NHDS and Appendix A for focus area contact information.
15-2. Reduce hospitalizations for nonfatal spinal cord injuries.

**National Data Source**  National Hospital Discharge Survey (NHDS), CDC, NCHS.

**State Data Source**  State hospital discharge systems.

**Healthy People 2000 Objective**  9.10 (Unintentional Injuries), age adjusted to 2000 standard population.

**Measure**  Rate per 100,000 population (age adjusted—see Comments).


**Numerator**  Number of hospitalizations for nonfatal spinal cord injuries (principal diagnosis of ICD-9-CM codes 806, 952).

**Denominator**  Number of persons.

**Population Targeted**  U.S. civilian population.

**Questions Used To Obtain the National Data**  From the 1998 National Hospital Discharge Survey:

- Final Diagnoses (Including E-code diagnoses):
- Principal:

**Expected Periodicity**  Annual.

**Comments**  Principal diagnosis is the diagnosis chiefly responsible for admission of the person to the hospital.

Data are age-adjusted to the 2000 standard population. Age-adjusted rates are the weighted sums of age-specific rates. For a discussion of age adjustment see Part A, section 5.

See Part C for a description of NHDS and Appendix A for focus area contact information.


**National Data Source**  National Vital Statistics System (NVSS), CDC, NCHS.
<table>
<thead>
<tr>
<th>State Data Source</th>
<th>National Vital Statistics System (NVSS), CDC, NCHS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy People 2000 Objective</td>
<td>7.3 (Violent and Abusive Behavior), age adjusted to 2000 standard population.</td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 100,000 population (age adjusted—see Comments).</td>
</tr>
<tr>
<td>Baseline</td>
<td>11.3 (1998).</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of firearm-related deaths (ICD-9 codes E922, E955.0-E955.4, E965.0-E965.4, E970, E985.0-E985.4).</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>U.S. resident population.</td>
</tr>
<tr>
<td>Questions Used To Obtain the National Data</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Expected Periodicity</td>
<td>Annual.</td>
</tr>
</tbody>
</table>
| Comments | Data are age-adjusted to the 2000 standard population. Age-adjusted rates are the weighted sums of age-specific rates. For a discussion of age adjustment see Part A, section 5. 

This objective differs from Healthy People 2000 objective 7.3, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data. 

See Part C for a description of NVSS and Appendix A for focus area contact information. |

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15-4. Reduce the proportion of persons living in homes with firearms that are loaded and unlocked.

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Health Interview Survey (NHIS), CDC, NCHS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.</td>
</tr>
<tr>
<td>Healthy People 2000 Objective</td>
<td>7.11 (Violent and Abusive Behavior), age adjusted to 2000 standard population.</td>
</tr>
<tr>
<td>Measure</td>
<td>Percent (age adjusted—see Comments).</td>
</tr>
</tbody>
</table>

Numerator: Number of persons aged 18 years and older who report living in homes with firearms loaded and unlocked.

Denominator: Number of persons aged 18 years and older who report living in homes with firearms.


Questions Used To Obtain the National Data: From the 1998 National Health Interview Survey:

[NUMERATOR:]
- Is at least one of the firearms kept unloaded and unlocked?

[DENOMINATOR:]
- Are any firearms now kept in or around your home? Include those kept in a garage, outdoor storage area, truck or car.

Expected Periodicity: Periodic.

Comments: The questions for this objective are periodically included in supplements to NHIS. BRFSS items are collected in rotating modules (approximately every 3 years).

Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For a discussion of age adjustment see Part A, section 5.

See Part C for a description of NHIS and BRFSS and Appendix A for focus area contact information.

15-5. Reduce nonfatal firearm-related injuries.

National Data Source: National Electronic Injury Surveillance System (NEISS), CPSC.

State Data Source: Not identified.

Healthy People 2000 Objective: Not applicable.

Measure: Rate per 100,000 population.
| **Baseline** | 24 (1997). |
| **Numerator** | Number of nonfatal firearm-related cases treated in U.S. hospital emergency department records. |
| **Denominator** | Number of persons. |
| **Population Targeted** | U.S. resident population. |
| **Questions Used To Obtain the National Data** | Not applicable. |
| **Expected Periodicity** | Periodic. |
| **Comments** | A firearm-related injury is defined as a penetrating injury or gunshot wound from a weapon using a powder charge to fire a projectile. NEISS does not use ICD codes, however, reporters are given extensive training and report any gun-related injury cases in the emergency department record. Victims may also have other types of injuries, but if the incident involved a gun, it is included. Coders also attempt to capture data on intent, when appropriate information is provided in the medical record. See Appendix A for focus area contact information. |

15-6. **(Developmental) Extend State-level child fatality review of deaths due to external causes for children aged 14 years and under.**

| **Comments** | An operational definition could not be specified at the time of publication. The proposed data source is the Inter-Agency Council on Child Abuse and Neglect (ICAN) National Database, FBI Uniform Crime Report, DOJ. See Appendix A for focus area contact information. |
15-7. **Reduce nonfatal poisonings.**

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Hospital Ambulatory Medical Care Survey (NHAMCS), NCHS, CDC.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>Not identified.</td>
</tr>
<tr>
<td>Healthy People 2000</td>
<td>Adapted from 9.8 (Unintentional Injuries).</td>
</tr>
<tr>
<td>Objective</td>
<td></td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 100,000 population (age adjusted—see Comments).</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of emergency room visits for nonfatal poisonings (first-listed ICD-9-CM codes E850-E869, E950-E952, E962, E972, E980-E982).</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>U.S. civilian, noninstitutionalized population.</td>
</tr>
<tr>
<td>Questions Used To</td>
<td>From the 1997-98 National Hospital Ambulatory Medical Care Survey:</td>
</tr>
<tr>
<td>Obtain the National</td>
<td></td>
</tr>
<tr>
<td>Data</td>
<td>Cause of injury. <em>Describe events that preceded injury</em> (e.g., reaction to penicillin, wasp sting, driver in motor vehicle traffic accident involving collision with parked vehicle, shot with a handgun during a brawl, etc.)</td>
</tr>
<tr>
<td>Expected Periodicity</td>
<td>Annual.</td>
</tr>
<tr>
<td>Comments</td>
<td>Data include all emergency room visits related to poisoning regardless of intent (intentional, unintentional, and undetermined).</td>
</tr>
<tr>
<td></td>
<td>This objective differs from Healthy People 2000 objective 9.8, which used data from NEISS, CPSC that were not age adjusted.</td>
</tr>
</tbody>
</table>
The NHAMCS uses ICD-9-CM codes assigned to the cause of injury to identify poisoning cases in emergency department records, whereas NEISS used emergency department admissions related to a specific list of regulated products that were classified as poisons. Hence, NEISS data may have undercounted poisoning admissions. Additionally, when the list of regulated products changed, some cases previously classified as poisonings may have been omitted from the reported rate of poisoning admissions.

Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion of age adjustment see Part A, section 5.

See Part C for a description of NHAMCS and Appendix A for focus area contact information.


<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Vital Statistics System (NVSS), CDC, NCHS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>National Vital Statistics System (NVSS), CDC, NCHS.</td>
</tr>
<tr>
<td>Healthy People 2000 Objective</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 100,000 population (age adjusted—see Comments).</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of poisoning deaths (ICD-9 codes E850-E869, E950-E952, E962, E972, E980-E982).</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>U.S. resident population.</td>
</tr>
<tr>
<td>Questions Used To Obtain the National Data</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Expected Periodicity</td>
<td>Annual.</td>
</tr>
</tbody>
</table>
Comments

Data are age adjusted to the 2000 standard. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.

See Part C for a description of NVSS and Appendix A for focus area contact information.


National Data Source
National Vital Statistics System (NVSS), CDC, NCHS.

State Data Source
National Vital Statistics System (NVSS), CDC, NCHS.

Healthy People 2000 Objective
Not applicable.

Measure
Rate per 100,000 population (age adjusted—see Comments).

Baseline

Numerator
Number of suffocation deaths (ICD-9 codes E911-E913, E953, E963, E983).

Denominator
Number of persons.

Population Targeted
U.S. resident population.

Questions Used To Obtain the National Data
Not applicable.

Expected Periodicity
Annual.

Comments
Data are age adjusted to the 2000 standard. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.

See Part C for a description of NVSS and Appendix A for focus area contact information.
15-10. Increase the number of States and the District of Columbia with statewide emergency department surveillance systems that collect data on external causes of injury.

**National Data Source**
External Cause of Injury Survey, American Public Health Association.

**State Data Source**
Not identified.

**Healthy People 2000 Objective**
Not applicable.

**Measure**
Number.

**Baseline**

**Numerator**
Number of States and the District of Columbia that “routinely collect” ICD-9-CM external cause of injury codes in their statewide hospital emergency department data system.

**Denominator**
Not applicable.

**Population Targeted**
Not applicable.

**Questions Used To Obtain the National Data**
From the 1998 How States Are Collecting and Using Cause of Injury Data Survey:

> Are ICD-9-CM E-coded data routinely collected in the statewide hospital emergency department data system?

**Expected Periodicity**
Periodic.

**Comments**
See Appendix A for focus area contact information.

15-11. Increase the number of States and the District of Columbia that collect data on external causes of injury through hospital discharge data systems.

**National Data Source**
External Cause of Injury Survey, American Public Health Association.

**State Data Source**
Not identified.

**Healthy People 2000 Objective**
Not applicable.
<table>
<thead>
<tr>
<th>Measure</th>
<th>Number.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Numerator</td>
<td>Number of States and the District of Columbia that “mandate” the use of ICD-9-CM external cause of injury codes in their statewide hospital discharge data systems.</td>
</tr>
<tr>
<td>Denominator</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Questions Used To Obtain the National Data</td>
<td>From the 1998 How States Are Collecting and Using Cause of Injury Data Survey:</td>
</tr>
<tr>
<td></td>
<td>✓ Is the collection of ICD-9-CM coded data in the statewide hospital discharge data system mandated by state law or a ruling by another body?</td>
</tr>
<tr>
<td>Expected Periodicity</td>
<td>Periodic.</td>
</tr>
<tr>
<td>Comments</td>
<td>For this objective, the term “mandate” refers to a State law or a ruling by another body (for example, the State hospital association) that requires hospitals to collect data on ICD-9-CM external cause of injury codes and report them to a statewide hospital discharge data system. See Appendix A for focus area contact information.</td>
</tr>
</tbody>
</table>

15-12. Reduce hospital emergency department visits caused by injuries.

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Hospital Ambulatory Medical Care Survey (NHAMCS), CDC, NCHS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>Not identified.</td>
</tr>
<tr>
<td>Healthy People 2000 Objective</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 1,000 population (age adjusted—see Comments).</td>
</tr>
<tr>
<td>Baseline</td>
<td>131 (1997).</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of emergency department visits due to injury or poisoning.</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
</tbody>
</table>
Population Targeted

U.S. civilian, noninstitutionalized population.

Questions Used To Obtain the National Data

From the 1997-98 National Hospital Ambulatory Medical Care Survey:

- Is this visit related to injury or poisoning?
- Cause of injury. Describe events that preceded injury (e.g., reaction to penicillin, wasp sting, driver in motor vehicle traffic accident involving collision with parked vehicle, shot with a handgun during a brawl, etc.)

Patient’s complaint(s), symptoms, or other reason(s) for this visit.

1. Most important
2. Other
3. Other

Physician’s diagnoses for this visit.

1. Primary diagnosis
2. Other
3. Other

Expected Periodicity

Annual.

Comments

An emergency department visit was considered to be related to injury if “yes” was checked in the first question above or if a cause of injury, a nature of injury diagnosis, or an injury-related reason for visit coded to first listed ICD-9-CM codes E800-E869, E880-E929, E950-E999 was reported in the response to the other questions above.

Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion of age adjustment see Part A, section 5.

See Part C for a discussion of NHAMCS and Appendix A for focus area contact information.

Unintentional Injury Prevention


National Data Source

National Vital Statistics System (NVSS), CDC, NCHS.
State Data Source  National Vital Statistics System (NVSS), CDC, NCHS.

Healthy People 2000 Objective  9.1 (Unintentional Injuries), age adjusted to 2000 standard population.

Measure  Rate per 100,000 population (age adjusted—see Comments).

Baseline  35.0 (1998).

Numerator  Number of deaths caused by unintentional injury (ICD-9 codes E800-E869, E880-E929).

Denominator  Number of persons.

Population Targeted  U.S. resident population.

Questions Used To Obtain the National Data  Not applicable.

Expected Periodicity  Annual.

Comments  Data are age adjusted to the 2000 standard. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.

This objective differs from Healthy People 2000 objective 9.1, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.

See Part C for a description of NVSS and Appendix A for focus area contact information.

15-14. (Developmental) Reduce nonfatal unintentional injuries.

Comments  An operational definition could not be specified at the time of publication.

This objective is adapted from Healthy People 2000 objective 9.2, which used data from the National Hospital Discharge System (NHDS), however, because of the underreporting of E-codes in NHDS, a new data source is needed.
Proposed national data sources are the National Hospital Ambulatory Medical Care Survey (NHAMCS), CDC, NCHS, and the National Electronic Injury Surveillance System (NEISS), CPSC.

See Part C for a description of NHAMCS and NEISS and Appendix A for focus area contact information.

15-15. Reduce deaths caused by motor vehicle crashes.

15-15a. Deaths per 100,000 population.

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Vital Statistics System (NVSS), CDC, NCHS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>National Vital Statistics System (NVSS), CDC, NCHS.</td>
</tr>
<tr>
<td>Healthy People 2000</td>
<td>Adapted from 9.3 (Unintentional Injuries).</td>
</tr>
<tr>
<td>Objective</td>
<td>Injury and Violence.</td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 100,000 population (age adjusted—see Comments).</td>
</tr>
<tr>
<td>Baseline</td>
<td>15.6 (1998).</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of unintentional injury traffic deaths (ICD-9 codes E810-E819).</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>U.S. resident population.</td>
</tr>
<tr>
<td>Questions Used To</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Obtain the National Data</td>
<td>Annual.</td>
</tr>
<tr>
<td>Expected Periodicity</td>
<td>Annual.</td>
</tr>
<tr>
<td>Comments</td>
<td>Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.</td>
</tr>
</tbody>
</table>
This objective differs from Healthy People 2000 objective 9.3, in that all data are age-adjusted data from NVSS. Data for objective 9.3 included both age-adjusted data from NVSS and crude rates from the Fatality Analysis Reporting System (FARS). In addition, the age-adjusted rates in objective 9.3 were adjusted to the 1940 standard population. See Appendix C for comparison data.

This objective is one of the measures used to track the Injury and Violence Leading Health Indicator. See Appendix H for a complete list.

See Part C for a description of NVSS and Appendix A for focus area contact information.

15-15b. Deaths per 100 million vehicle miles traveled (VMT).

National Data Sources
Fatality Analysis Reporting System (FARS), DOT, NHTSA; Highway Performance Monitoring System, DOT, FHWA.

State Data Sources
Fatality Analysis Reporting System (FARS), DOT, NHTSA; Highway Performance Monitoring System, DOT, FHWA.

Healthy People 2000 Objective
9.3 (Unintentional Injuries).

Measure
Rate per 100 million vehicle miles traveled (VMT).

Baseline
1.6 (1998).

Numerator
Number of motor vehicle crash deaths reported in FARS.

Denominator
Total vehicle miles traveled.

Population Targeted
U.S. resident population.

Questions Used To Obtain the National Data
Not applicable.

Expected Periodicity
Annual.
Comments  
FARS uses multiple data sources, including police reports, death certificates, and others. Race data were not collected in FARS until 1999. These data will be included in the data presentation for this objective when they become available for analysis.

The FHWA estimates total vehicle miles traveled using an algorithm that includes gas sales, vehicle registration, vehicle fuel economy data, and other data from the Highway Performance Monitoring System.

See Appendix A for focus area contact information.

15-16. Reduce pedestrian deaths on public roads.

National Data Source  Fatality Analysis Reporting System (FARS), DOT, NHTSA.

State Data Source  Fatality Analysis Reporting System (FARS), DOT, NHTSA.

Healthy People 2000 Objective  9.3f (Unintentional Injuries).

Measure  Rate per 100,000 population.

Baseline  1.9 (1998).

Numerator  Number of pedestrian deaths reported in FARS.

Denominator  Number of persons.

Population Targeted  U.S. resident population

Questions Used To Obtain the National Data  Not applicable.

Expected Periodicity  Annual.

Comments  FARS uses multiple sources, including police reports, death certificates (coded to ICD-9 E810-E819), and other sources. FARS data do not include pedestrian deaths on private roadways, such as driveways. Driveways are a common location for pedestrian deaths for pedestrians aged 0-2 years.

See Appendix A for focus area contact information.
### 15-17. Reduce nonfatal injuries caused by motor vehicle crashes.

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>General Estimates System (GES), DOT, NHTSA.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>Not identified.</td>
</tr>
<tr>
<td>Healthy People 2000</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Objective</td>
<td></td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 100,000 population.</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of nonfatal motor vehicle crash-related injuries reported in police reports.</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>U.S. resident population.</td>
</tr>
<tr>
<td>Questions Used To</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Obtain the National Data</td>
<td></td>
</tr>
<tr>
<td>Expected Periodicity</td>
<td>Annual.</td>
</tr>
<tr>
<td>Comments</td>
<td>GES data are from a nationally representative sample of police-reported motor vehicle crashes. To be included, the crash must involve a motor vehicle traveling on a traffic way and involve property damage, injury, or death. See Appendix A for focus area contact information.</td>
</tr>
</tbody>
</table>

### 15-18. Reduce nonfatal pedestrian injuries on public roads.

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>General Estimates System (GES), DOT, NHTSA.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>Not identified.</td>
</tr>
<tr>
<td>Healthy People 2000</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Objective</td>
<td></td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 100,000 population.</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of nonfatal pedestrian injuries reported in police reports.</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
</tbody>
</table>

Questions Used To Obtain the National Data: Not applicable.

Expected Periodicity: Annual.

Comments: GES data are from a nationally representative sample of police-reported motor vehicle crashes. To be included, the crash must involve a motor vehicle traveling on a traffic way and involve property damage, injury, or death.

See Appendix A for focus area contact information.


National Data Source: National Occupant Protection Use Survey (NOPUS), DOT, NHTSA.

State Data Source: Not identified.

Healthy People 2000 Objective: 9.12 (Unintentional Injuries).

Measure: Percent.


Numerator: Number of persons observed using restraints.

Denominator: Number of persons.


Questions Used To Obtain the National Data: Not applicable.

Expected Periodicity: Biennial.

Comments: NOPUS uses observational data collected at intersections, highway ramps, and parking lots. Four observers (each responsible for a different seat in the vehicle) report occupant restraint use.
The data for students in grades 9 through 12 are tracked separately with the Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP (see Part C for a discussion of YRBSS). The numerator for that measure is the number of students in grades 9 through 12 who report that they wore a seat belt sometimes, most of the time, or always when they were riding in a car. The denominator is the number of students in grades 9 through 12. The questions from the 1999 Youth Risk Behavior Survey follow:

- How often do you wear a seat belt when riding in a car driven by someone else?

Never  Rarely  Sometimes  Most of the time  Always

See Appendix A for focus area contact information.


National Data Source  National Occupant Protection Use Survey (NOPUS), Controlled Intersection Study, DOT, NHTSA.

State Data Source  Not identified.

Healthy People 2000 Objective  9.12 (Unintentional Injuries).

Measure  Percent.


Numerator  Number of children aged 4 and under observed in safety seats or restraints.

Denominator  Number of children aged 4 years and under.

Population Targeted  U.S. resident population.

Questions Used To Obtain the National Data  Not applicable.

Expected Periodicity  Biennial.

Comments  NOPUS uses observational data collected at intersections, highway ramps, and parking lots. Four observers (each responsible for a different seat in the vehicle) report occupant restraint use.
See Appendix A for focus area contact information.

15-21. Increase the proportion of motorcyclists using helmets.

National Data Source: National Occupant Protection Use Survey (NOPUS), DOT, NHTSA.

State Data Source: Not identified.

Healthy People 2000 Objective: 9.13 (Unintentional Injuries).

Measure: Percent.


Numerator: Number of motorcyclists observed wearing helmets.

Denominator: Number of motorcycle operators and passengers observed.

Population Targeted: Motorcycle operators and passengers.

Questions Used To Obtain the National Data: Not applicable.

Expected Periodicity: Biennial.

Comments: NOPUS uses observational data collected at intersections, highway ramps, and parking lots. Four observers (each responsible for a different seat in cars, two observers for motorcycles) report occupant helmet use.

The data for students in grades 9 through 12 come from the Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP (see Part C for a discussion of YRBSS). The numerator for that measure is the number of students in grades 9 through 12 who report that they sometimes, most of the time, or always wore a helmet when riding a motorcycle. The denominator is the number of students in grades 9 through 12 who report that they rode a motorcycle at least once in the past 12 months. The questions from the 1999 Youth Risk Behavior Survey are:
During the past 12 months, how many times did you ride a motorcycle?

- 0 times
- 1 to 10 times
- 11 to 20 times
- 21 to 39 times
- 40 or more times

When you rode a motorcycle during the past 12 months, how often did you wear a helmet?

- I did not ride a motorcycle during the past 12 months
- Never wore a helmet
- Rarely wore a helmet
- Sometimes wore a helmet
- Most of the time wore a helmet
- Always wore a helmet

See Appendix A for focus area contact information.

15-22. Increase the number of States and the District of Columbia that have adopted a graduated driver licensing model law.

**National Data Source**
U.S. Licensing Systems for Young Drivers, Insurance Institute for Highway Safety.

**State Data Source**
Not identified.

**Healthy People 2000 Objective**
9.26 (Unintentional Injuries).

**Measure**
Number.

**Baseline**
23 (1999).

**Numerator**
Number of jurisdictions with the core components.

**Denominator**
Not applicable.

**Population Targeted**
Not applicable.

**Questions Used To Obtain the National Data**
Not applicable.

**Expected Periodicity**
Annual.
Core components are noted in the National Committee on Uniform Traffic Laws and Ordinances (NCUTLO) model law and include 6 months in the learner stage and 6 months in the intermediate driving stage with night-driving restrictions. Participants are also required to have no safety belt violations and to be conviction free during the holding periods. Data are compiled by periodic review of laws for the presence of these components.

See Appendix A for focus area contact information.

15-23. (Developmental) Increase use of helmets by bicyclists.

An operational definition could not be specified at the time of publication.

Proposed national data sources include CPSC, the Behavioral Risk Factor Surveillance System, and the World Health Organization Study of Health Behavior in School Children.

This objective is modified from Healthy People objective 9.13, which used data from the National Occupant Protection Use Survey.

See Appendix A for focus area contact information.

15-24. Increase the number of States and the District of Columbia with laws requiring bicycle helmets for bicycle riders.

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Safe Kids Campaign.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>Not identified.</td>
</tr>
<tr>
<td>Healthy People 2000</td>
<td>9.24 (Unintentional Injuries).</td>
</tr>
<tr>
<td>Objective</td>
<td></td>
</tr>
<tr>
<td>Measure</td>
<td>Number.</td>
</tr>
<tr>
<td>Baseline</td>
<td>10 (1999).</td>
</tr>
</tbody>
</table>
**15-25. Reduce residential fire deaths.**

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Vital Statistics System (NVSS), CDC, NCHS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>National Vital Statistics System (NVSS), CDC, NCHS.</td>
</tr>
<tr>
<td>Healthy People 2000 Objective</td>
<td>9.6 (Unintentional Injuries), age adjusted to 2000 standard population.</td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 100,000 population (age adjusted—see Comments).</td>
</tr>
<tr>
<td>Baseline</td>
<td>1.2 (1998).</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of unintentional fire-related injury deaths (ICD-9 codes E890-E899)</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>U.S. resident population.</td>
</tr>
<tr>
<td>Questions Used To Obtain the National Data</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>Expected Periodicity</td>
<td>Annual.</td>
</tr>
<tr>
<td>Comments</td>
<td>A small proportion of the deaths reported may have occurred in locations other than residences.</td>
</tr>
</tbody>
</table>
Data are age adjusted to the 2000 standard. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.

This objective differs from Healthy People 2000 objective 9.6, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.

See to Part C for a description of NVSS and Appendix A for focus area contact information.


15-26a. Total population living in residences with functioning smoke alarm on every floor.

National Data Source: National Health Interview Survey (NHIS), CDC, NCHS.

State Data Source: Not identified.

Healthy People 2000 Objective: 9.17 (Unintentional Injuries), age adjusted to 2000 standard population.

Measure: Percent (age adjusted—see Comments).


Numerator: Number of persons aged 18 years and older who report living in residences with functional smoke alarms on each habitable floor.

Denominator: Number of persons aged 18 years and older.


Questions Used To Obtain the National Data:

- Do you have at least one working smoke detector on each floor of your home? Include a finished basement or attic.

Expected Periodicity: Periodic.
Comments
The data for this objective are based on the response of one adult per household. The response of the adult household respondent is applied to all members of the household.

Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For a discussion of age adjustment see Part A, section 5.

See Part C for a description of NHIS and Appendix A for focus area contact information.

15-26b. Residences with a functioning smoke alarm on every floor.

National Data Source National Health Interview Survey (NHIS), CDC, NCHS.

State Data Source Not identified.

Healthy People 2000 Objective Adapted from 9.17 (Unintentional Injuries).

Measure Percent.


Numerator Number households with functional smoke alarms on each habitable floor of their residence.

Denominator Number of households.

Population Targeted U.S. civilian, noninstitutionalized population.

Questions Used To Obtain the National Data From the 1998 National Health Interview Survey:

➢ Do you have at least one working smoke detector on each floor of your home? Include a finished basement or attic.

Expected Periodicity Periodic.

Comments The data for this objective are based on the response of one adult per household. The response of the adult household respondent is considered the response for one “household.”
This objectives differs from Healthy People 2000 objective 9.17, which tracked the proportion of residences with smoke detectors using data from Rodale Press and CPSC.

See Part C for a description of NHIS and Appendix A for focus area contact information.

15-27. Reduce deaths from falls.

**National Data Source**  National Vital Statistics System (NVSS), CDC, NCHS.

**State Data Source**  National Vital Statistics System (NVSS), CDC, NCHS.

**Healthy People 2000 Objective**  9.4 (Unintentional Injuries), age adjusted to 2000 standard population.

**Measure**  Rate per 100,000 population (age adjusted—see Comments).

**Baseline**  4.7 (1998).

**Numerator**  Number of unintentional deaths from falls (ICD-9 codes E880-E886, E888).

**Denominator**  Number of persons.

**Population Targeted**  U.S. resident population.

**Questions Used To Obtain the National Data**  Not applicable.

**Expected Periodicity**  Annual.

**Comments**  Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.

This objective differs from Healthy People 2000 objective 9.4, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.

See Part C for a description of NVSS and Appendix A for focus area contact information.

15-28a. Females aged 65 years and older.

National Data Source National Hospital Discharge Survey (NHDS), CDC, NCHS.

State Data Source State hospital discharge systems.

Healthy People 2000 Objective 9.7 (Unintentional Injuries), age adjusted to 2000 standard population.

Measure Rate per 100,000 population (age adjusted—see Comments).

Baseline 1,055.8 (1998).

Numerator Number of hospitalizations for hip fractures (principal diagnosis of ICD-9-CM code 820) among females aged 65 years and older.

Denominator Number of females aged 65 years and older.

Population Targeted U.S. civilian population.

Questions Used To Obtain the National Data From the 1998 National Hospital Discharge Survey:

- Final diagnoses (including E-code diagnoses):
- Principal:

Expected Periodicity Annual.

Comments Principal diagnosis is the diagnosis chiefly responsible for admission of the person to the hospital.

Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion of age adjustment see Part A, section 5.

This objective differs from Healthy People 2000 objective 9.7, which measured hip fractures for the total population and did not have two separate measures for males and females. In addition, the data for this objective are age adjusted.

See Part C for a description of NHDS and Appendix A for focus area contact information.
15-28b. Males aged 65 years and older.

**National Data Source**
National Hospital Discharge Survey (NHDS), CDC, NCHS.

**State Data Source**
State hospital discharge systems.

**Healthy People 2000 Objective**
9.7 (Unintentional Injuries), age adjusted to 2000 standard population.

**Measure**
Rate per 100,000 population (age adjusted—see Comments).

**Baseline**
592.7 (1998).

**Numerator**
Number of hip fractures (principal ICD-9-CM code 820) among males aged 65 years and older.

**Denominator**
Number of males aged 65 years and older.

**Population Targeted**
U.S. civilian population.

**Questions Used To Obtain the National Data**
From the 1998 National Hospital Discharge Survey:
- Final diagnoses (including E-code diagnoses):
- Principal:

**Expected Periodicity**
Annual.

**Comments**
See Comments provided with objective 8-28a for more information.

15-29. Reduce drownings.

**National Data Source**
National Vital Statistics System (NVSS), CDC, NCHS.

**State Data Source**
National Vital Statistics System (NVSS), CDC, NCHS.

**Healthy People 2000 Objective**
9.5 (Unintentional Injuries), age adjusted to 2000 standard population.

**Measure**
Rate per 100,000 (age adjusted—see Comments).

**Baseline**
1.6 (1998).

**Numerator**
Number of drowning deaths (ICD-9 codes E830, E832, E910).
Denominator | Number of persons.
--- | ---
Population Targeted | U.S. resident population.
Questions Used To Obtain the National Data | Not applicable.
Expected Periodicity | Annual.
Comments | Data are age adjusted to the 2000 standard. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.

This objective differs from Healthy People 2000 objective 9.5, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.

See Part C for a description of NVSS and Appendix A for focus area contact information.

15-30. Reduce hospital emergency department visits for nonfatal dog bite injuries.

National Data Source | National Hospital Ambulatory Medical Care Survey (NHAMCS), CDC, NCHS.
State Data Source | Not identified.
Healthy People 2000 Objective | Not applicable.
Measure | Rate per 100,000 population (age adjusted—see Comments).
Baseline | 151.4 (1997).
Numerator | Number of emergency room visits for dog bite injuries (first-listed ICD-9-CM codes E906.0).
Denominator | Number of persons.
Population Targeted | U.S. civilian, noninstitutionalized population.
Questions Used To Obtain the National Data | From the 1997-98 National Hospital Ambulatory Medical Care Survey:
 Cause of injury. Describe events that preceded injury (e.g., reaction to penicillin, wasp sting, driver in motor vehicle traffic accident involving collision with parked vehicle, shot with a handgun during a brawl, etc.)

Expected Periodicity
Annual.

Comments
Data are age adjusted to the 2000 standard population. Age-adjusted percents are weighted sums of age-specific percents. For a discussion of age adjustment see Part A, section 5.

See Part C for a discussion of NHAMCS and Appendix A for focus area contact information.

15-31. (Developmental) Increase the proportion of public and private schools that require use of appropriate head, face, eye, and mouth protection for students participating in school-sponsored physical activities.

Comments
An operational definition could not be specified at the time of publication. The proposed national data source is the School Health Policies and Programs Study (SHPPS), CDC, NCCDPHP.

The expected numerator is the number of schools that require students to wear appropriate protective gear when engaged in physical activities during physical education, intramural activities, physical activity clubs, and interscholastic sports. The expected denominator is the number of schools with intramural activities or physical activity clubs and interscholastic sports.

The expected questions to be used to obtain data from the 2000 School Health Policies and Programs Study, Physical Education Questionnaire follow:

- Must students wear appropriate protective gear when engaged in physical activities during physical education?
- Must students wear appropriate protective gear when engaged in intramural activities or physical activity clubs?
- Must students wear appropriate protective gear when engaged in interscholastic sports?
This objective is adapted from Healthy People 2000 objective 9.19 (also 13.16), which was tracked with proxy data from the National Healthy Interview Survey (NHIS), CDC, NCHS.

See Appendix A for focus area contact information.

Violence and Abuse Prevention

**15-32. Reduce homicides.**

<table>
<thead>
<tr>
<th><strong>National Data Source</strong></th>
<th>National Vital Statistics System (NVSS), CDC, NCHS.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>State Data Source</strong></td>
<td>National Vital Statistics System (NVSS), CDC, NCHS.</td>
</tr>
<tr>
<td><strong>Healthy People 2000 Objective</strong></td>
<td>7.1 (Violent and Abusive Behavior), age adjusted to 2000 standard population.</td>
</tr>
<tr>
<td><strong>Leading Health Indicator</strong></td>
<td>Injury and Violence.</td>
</tr>
<tr>
<td><strong>Measure</strong></td>
<td>Rate per 100,000 population (age adjusted—see Comments).</td>
</tr>
<tr>
<td><strong>Baseline</strong></td>
<td>6.5 (1998).</td>
</tr>
<tr>
<td><strong>Numerator</strong></td>
<td>Number of deaths due to homicides (ICD-9 codes E960-E969).</td>
</tr>
<tr>
<td><strong>Denominator</strong></td>
<td>Number of persons.</td>
</tr>
<tr>
<td><strong>Population Targeted</strong></td>
<td>U.S. resident population.</td>
</tr>
<tr>
<td><strong>Questions Used To Obtain the National Data</strong></td>
<td>Not applicable.</td>
</tr>
<tr>
<td><strong>Expected Periodicity</strong></td>
<td>Annual.</td>
</tr>
</tbody>
</table>

**Comments**

Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates. For a discussion on age adjustment see Part A, section 5.

This objective differs from Healthy People 2000 objective 7.1, which adjusted the death rates using the 1940 standard population. See Appendix C for comparison data.
This measure also differs slightly from the cause of death, homicide and legal intervention (ICD-9 E960-E978), which is shown in other publications.¹,²

This objective is one of the measures used to track the Injury and Violence Leading Health Indicator. See Appendix H for a complete list.

See Part C for a description of NVSS and Appendix A for focus area contact information.

15-33. **Reduce maltreatment and maltreatment fatalities of children.**

15-33a. **Reduce maltreatment of children.**

**National Data Source**

National Child Abuse and Neglect Data System (NCANDS), Summary Data Component Survey, ACYF, ACF.

**State Data Source**

State data reports of maltreatment from State child welfare agencies.

**Healthy People 2000 Objective**

Adapted from 7.4 (Violent and Abusive Behavior).

**Measure**

Rate per 1,000 population.

**Baseline**


**Numerator**

Number of children aged 18 years and under found to be victims of maltreatment by State child welfare agencies.

**Denominator**

Children aged 18 years and under.

**Population Targeted**

U.S. resident population.

**Questions Used To Obtain the National Data**

- Enter the number of children by disposition who were the subject of a CPS investigation or assessment _____.

**Expected Periodicity**

Annual.
Comments

Maltreatment is defined as an act or failure to act by a parent, caretaker, other person, as defined under State law, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act that presents an imminent risk of serious harm. State definitions may include additional criteria.

This objective differs from Healthy People 2000 objective 7.4 in that it is counting children who have been abused; objective 7.4 counted “reports” of abuse.

See Appendix A for focus area contact information.

15-33b. Reduce child maltreatment fatalities.

National Data Source
National Child Abuse and Neglect Data System (NCANDS), Summary Data Component Survey, ACYF, ACF.

State Data Source
State data reports of maltreatment from State child welfare agencies.

Healthy People 2000 Objective
Adapted from 7.4 (Violent and Abusive Behavior).

Measure
Rate per 100,000 population.

Baseline
1.6 (1998).

Numerator
Number of reported child fatalities due to maltreatment among children aged 18 years and under.

Denominator
Children aged 18 years and under.

Population Targeted
U.S. resident population.

Questions Used To Obtain the National Data
From the 1999 State Data Component Survey:

- Enter the number of child victims who died as a result of child abuse or neglect ____.

Expected Periodicity
Annual.
Comments

Child fatality due to maltreatment is defined as the death of a child as a result of abuse or neglect, because either (a) an injury resulting from the abuse or neglect of a child was the cause of the death, or (b) abuse and/or neglect were contributing factors to the cause of death. Data on child fatalities are collected from all States; some State offices of child protective services work closely with Health Departments or the coroner's office, whereas others rely more on their own records, including deaths reported to them by law enforcement.

This objective differs from Healthy People 2000 objective 7.4 in that it measures fatalities due to child maltreatment. Objective 7.4 measured reports of child maltreatment.

See Appendix A for focus area contact information.

15-34. Reduce the rate of physical assault by current or former intimate partners.

<table>
<thead>
<tr>
<th>National Data Source</th>
<th>National Crime Victimization Survey (NCVS), DOJ, BJS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Data Source</td>
<td>Not identified.</td>
</tr>
<tr>
<td>Healthy People 2000</td>
<td>Adapted from 7.5 (Violent and Abusive Behavior).</td>
</tr>
<tr>
<td>Objective</td>
<td></td>
</tr>
<tr>
<td>Measure</td>
<td>Rate per 1,000 population.</td>
</tr>
<tr>
<td>Numerator</td>
<td>Number of persons aged 12 years and older who report being threatened or assaulted by current or former spouse, boyfriend, or girlfriend.</td>
</tr>
<tr>
<td>Denominator</td>
<td>Number of persons aged 12 years and older.</td>
</tr>
<tr>
<td>Population Targeted</td>
<td>Noninstitutionalized population.</td>
</tr>
<tr>
<td>Questions Used To</td>
<td>From the 1998 National Crime Victimization Survey:</td>
</tr>
<tr>
<td>Obtain the National</td>
<td></td>
</tr>
<tr>
<td>Data</td>
<td></td>
</tr>
</tbody>
</table>
Other than any incidents already mentioned, has anyone attacked or threatened you in any of these ways:

a) With any weapon, for instance, a gun or knife
b) With anything like a baseball bat, frying pan, scissors or stick
c) By something thrown, such as a rock or bottle
d) Include any grabbing, punching, or choking
e) Any rape, attempted rape or other type of sexual attack
f) Any face-to-face threats
OR
g) Any attack or threat or use of force by anyone at all? Please mention it even if you are not certain that it was a crime.

(Briefly describe incident.)

People often don’t think of incidents committed by someone they know. (Other than incidents already mentioned) did you have something stolen from you OR were you attacked or threatened by (Exclude telephone threats)…

a) Someone at work or school
b) A neighbor or friend
c) A relative or family member
d) Any other person you’ve met or known?

(Briefly describe incident.)

Expected Periodicity Annual.
Comments This objective differs from Healthy People 2000 objective 7.5, which included females only.

See Part C for a description of NCVS and Appendix A for focus area contact information.

15-35. Reduce the annual rate of rape or attempted rape.

National Data Source National Crime Victimization Survey (NCVS), DOJ, BJS.
State Data Source Not identified.
Healthy People 2000 Objective Adapted from 7.7 (Violent and Abusive Behavior).
Measure Rate per 1,000 population.
Baseline 0.8 (1998).
Numerator: Number of persons aged 12 years and older who reported being raped or a victim of an attempted rape.

Denominator: Number of persons aged 12 years and older.

Population Targeted: Noninstitutionalized population.

Questions Used To Obtain the National Data:
- Other than any incidents already mentioned, has anyone attacked or threatened you in any of these ways:
  - Any rape, attempted rape, or other type of sexual attack? (Briefly describe the incident.)

Expected Periodicity: Annual.

Comments: This objective differs from Healthy People 2000 objective 7.7, which included females only.

See Part C for a description of NCVS and Appendix A for focus area contact information.

15-36. Reduce sexual assault other than rape.

National Data Source: National Crime Victimization Survey (NCVS), U. S. Department of Justice, Bureau of Justice Statistics.

State Data Source: Not identified.

Healthy People 2000 Objective: Not applicable.

Measure: Rate per 1,000 population.

Baseline: 0.6 (1998).

Numerator: Number of persons aged 12 years and older who report being threatened or physically assaulted in a sexual way other than rape.

Denominator: Number of persons aged 12 years and older.

Population Targeted: Noninstitutionalized population.
Questions Used To Obtain the National Data

- From the 1998 National Crime Victimization Survey:

  - Other than any incidents already mentioned, has anyone attacked or threatened you in any of these ways:
    - [Response categories include:]
      - Any rape, attempted rape, or other type of sexual attack?
    - (Briefly describe the incident.)

Expected Periodicity
Annual.

Comments
Sexual assaults include sexual attacks or threats other than rape or attempted rape against males and females.

See Part C for a description of NCVS and Appendix A for focus area contact information.

15-37. Reduce physical assaults.

National Data Source
National Crime Victimization Survey (NCVS), U.S. Department of Justice, Bureau of Justice Statistics.

State Data Source
Not identified.

Healthy People 2000 Objective
Adapted from 7.6 (Violent and Abusive Behavior).

Measure
Rate per 1,000 population.

Baseline

Numerator
Number of persons aged 12 years and older who report being physically assaulted.

Denominator
Number of persons aged 12 years and older.

Population Targeted
Noninstitutionalized population.

Questions Used To Obtain the National Data
From the 1998 National Crime Victimization Survey:
Other than any incidents already mentioned, has anyone attacked or threatened you in any of these ways:

a) With any weapon, for instance, a gun or knife  
b) With anything like a baseball bat, frying pan, scissors, or stick  
c) By something thrown, such as a rock or bottle  
d) Include any grabbing, punching, or choking  
e) Any rape, attempted rape or other type of sexual attack  
f) Any face-to-face threats  
OR  
g) Any attack or threat or use of force by anyone at all? Please mention it even if you are not certain that it was a crime.

(Briefly describe incident.)

Expected Periodicity  Annual.
Comments  This objective is modified from Healthy People 2000 objective 7.6, which tracked assault injuries. This objective tracks reports of assaults.

See Part C for a description of NCVS and Appendix A for focus area contact information.

15-38. Reduce physical fighting among adolescents.

National Data Source  Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
State Data Source  Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
Healthy People 2000 Objective  Adapted from 7.9 (Violent and Abusive Behavior).
Measure  Percent.
Baseline  36 (1999).
Numerator  Number of students in grades 9 through 12 who report being in a physical fight at least 1 time during the 12 months preceding the survey.
Denominator  Students in grades 9 through 12.
Population Targeted  Students in grades 9 through 12.
Questions Used To Obtain the National Data

From the 1999 Youth Risk Behavior Surveillance System:

- During the past 12 months, how many times were you in a physical fight?
  
  0 times
  1 time
  2 or 3 times
  4 or 5 times
  6 or 7 times
  8 or 9 times
  10 or 11 times
  12 or more times

Expected Periodicity
Biennial.

Comments
This objective differs from Healthy People 2000 objective 7.9 in that it measures prevalence; objective 7.9 measured incidence.

See Part C for a description of YRBSS and Appendix A for focus area contact information.


National Data Source
Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.

State Data Source
Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.

Healthy People 2000 Objective
Adapted from 7.10 (Violent and Abusive Behavior).

Measure
Percent.

Baseline
6.9 (1999).

Numerator
Number of students in grades 9 through 12 who report carrying a weapon on school property at least 1 day in the 30 days preceding the survey.

Denominator
Students in grades 9 through 12.

Population Targeted
Students in grades 9 through 12.

Questions Used To Obtain the National Data
From the 1999 Youth Risk Behavior Surveillance System:
During the past 30 days, on how many days did you carry a weapon, such as a gun, knife, or club on school property?

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

**Expected Periodicity**

Biennial.

**Comments**

This objective differs from Healthy People 2000 objective 7.10 in that it is limited to weapon carrying on school grounds; objective 7.10 tracked weapon carrying in any location.

See Part C for a description of YRBSS and Appendix A for focus area contact information.

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**References**

