

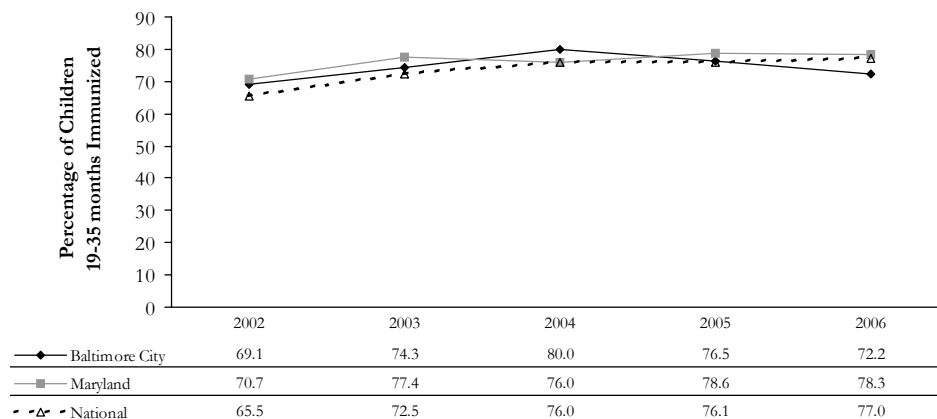
Childhood Immunizations

Importance: Vaccines help prevent infectious diseases and save lives. They are responsible for the control of many infectious diseases that were once common in this country, including polio, measles, diphtheria, pertussis (whooping cough), rubella (German measles), mumps, tetanus, and *Haemophilus influenzae* type b.

National statistic: 77.4% of children (2007, 4:3:1:3:3:1).

Healthy People 2010 goal: Reduce or eliminate indigenous cases of vaccine-preventable diseases (for specific targets see: <http://www.healthypeople.gov/document/html/objectives/14-01.htm>).

Estimated Overall Vaccination Coverage Among Children 19-35 Months of Age, Baltimore City, Maryland, and U.S. 2002-2006



Source: Centers for Disease Control and Prevention, National Immunization Survey. Overall Immunization Coverage: % of children 19-35 months who receive 4:3:1:3:3:1 vaccine series (i.e., >4 doses of diphtheria, tetanus toxoid, and any acellular pertussis vaccine [DTaP]; >3 doses of poliovirus vaccine; >1 dose of measles, mumps, and rubella vaccine [MMR]; >3 doses of *Haemophilus influenzae* type b [Hib] vaccine; >3 doses of hepatitis B vaccine [HepB]; and >1 dose of V_{AR}).

- In March of 2006, The Centers for Disease Control and Prevention (CDC) National Immunization Program recognized Baltimore City with a “Most Improved” award for childhood immunization coverage among U.S. cities.
- In 2007, the state of Maryland led the nation in immunizations for toddlers aged 19-35 months. Estimated coverage for the 4:3:1:3:3:1 series in Maryland was 91.3%.

Childhood Lead Poisoning

Elevated Blood-Lead Level (EBL): A blood lead level of $\geq 10\mu\text{g}/\text{dL}$

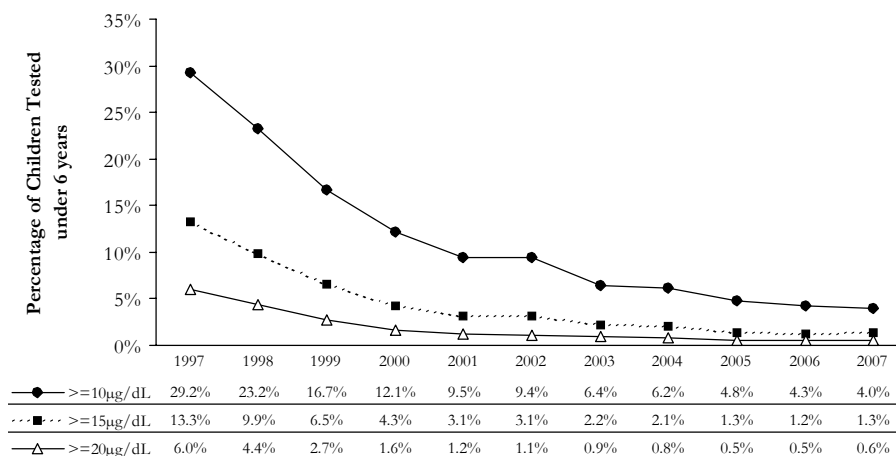
Importance: If left unaddressed, elevated blood lead levels can lead to learning disabilities and behavioral issues. At extreme levels, EBLs can cause seizures and prove fatal.

National statistic: In 2006, 1.2% children under 6 years

Healthy People 2010 goal: 0%

- The percentage of Baltimore City children tested with elevated blood lead levels has decreased dramatically in the past decade (a decline of over 75%).
- In 2007, 552 Baltimore City children tested had a blood lead level of $\geq 10\mu\text{g}/\text{dL}$; 85 children tested had a blood level of $\geq 20\mu\text{g}/\text{dL}$ (based on “highest venous test” only).

Elevated Blood Lead Levels among Children Tested, Baltimore City 1997-2007



Source: Maryland Department of the Environment, Lead Poisoning Prevention Program, Childhood Blood Lead Surveillance in Maryland, Annual Report, Supplement 2. These data represent children determined to have an EBL based on the “highest venous test” only. In Baltimore City, children are required to receive a blood test for lead at 12 and 24 months of age. Approximately 30% of children age 0-6 in Baltimore City were tested for blood lead level in 2006 (with the highest testing rates among children 0-2 years of age).

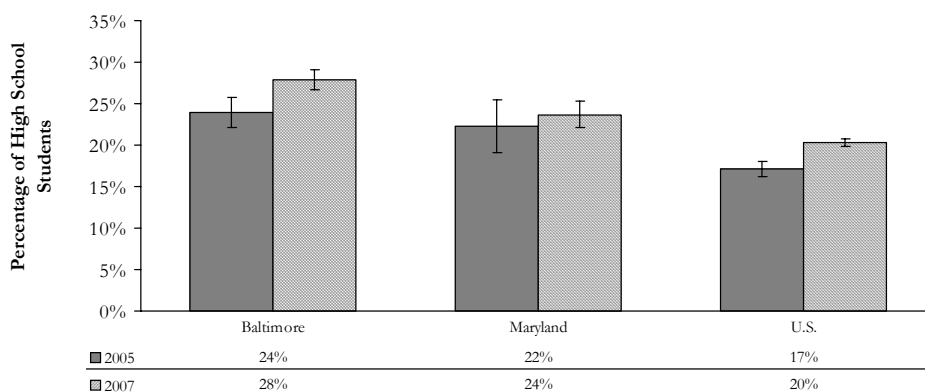
Asthma

Importance: According to the CDC, asthma accounts for about 14 million days of school absenteeism annually; the estimated cost of treating children under 18 years is \$3.2 billion annually. In 2004, asthma accounted for 7 million doctor visits (958 per 10,000) among children 0-17 years. Among children 0-4 years during this same year, there were 168 per 10,000 emergency department (ED) visits and 60 per 10,000 hospitalizations.

National statistic: 8.9% prevalence in children (2005)

Healthy People 2010 goal: Visits to an ED: 80 per 10,000 for children under 5 years; 50 per 10,000 for children over 5 years

Percentage (and 95% CI) of High School Students Who Had Ever Been Told By a Doctor or Nurse That They Had Asthma, Baltimore City, Maryland, and U.S., 2005 and 2007



Source: Centers for Disease Control, 2005 and 2007 Youth Risk Behavior Survey. Available at <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>. Accessed September 15th, 2008. See technical notes for a description of the YRBSS data and methodology (error bars represent a 95% confidence interval for the estimate). Survey asked high school students if they "have ever been told by a doctor or nurse that they had asthma."

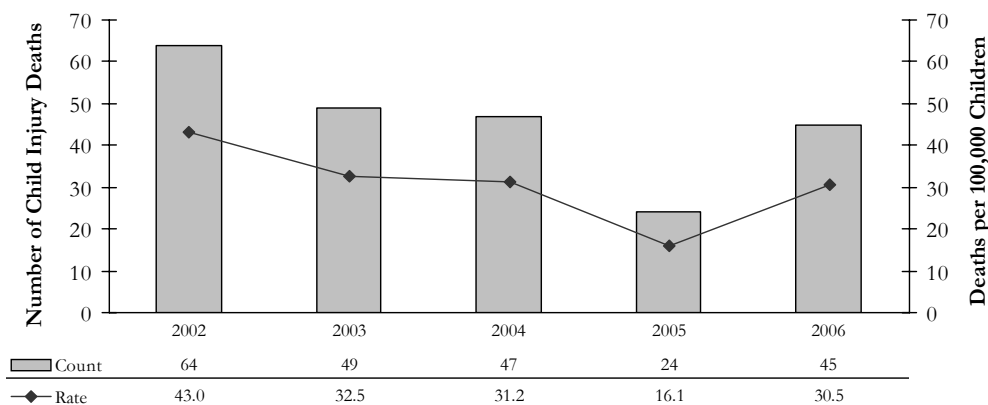
- In 2007, 28% of high school students surveyed in Baltimore City reported having been diagnosed with asthma—40% higher than the percentage among high school students surveyed in the U.S. as a whole.
- From 2005 to 2007, the percentage of high school students surveyed who reported having been diagnosed with asthma increased by 17% and 19% in Baltimore City and the U.S., respectively.

Childhood Injury

Importance: Primary cause of death in children nationwide.

National statistic: Injury mortality in 2005: 14.2 per 100,000 children age 1-17

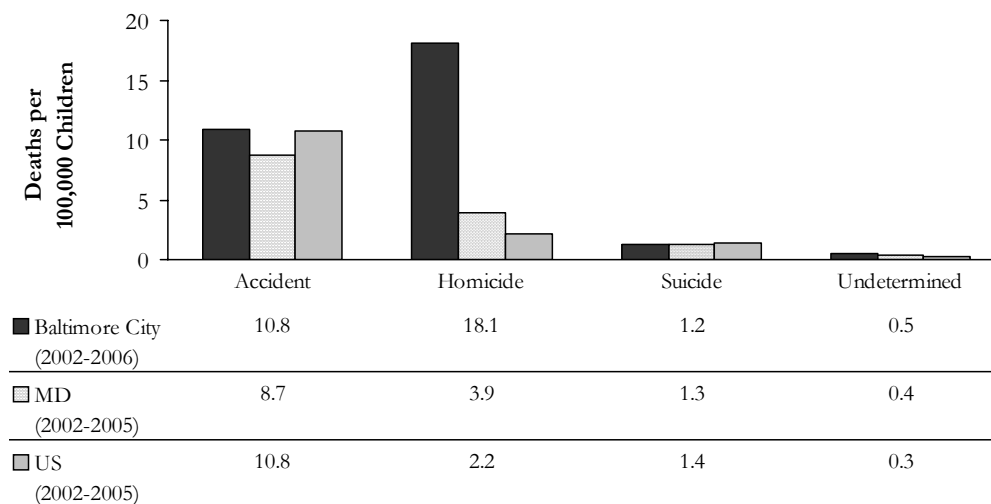
Injury Death Rates among Children (1-17 years), Baltimore City, 2002-2006



Source: Office of Epidemiology and Planning, Baltimore City Health Department. *Childhood Injury Deaths in Baltimore City, 2002-2006*. Baltimore City, Maryland: Baltimore City Health Department. February 2008.

- On average, 46 children age 1 to 17 years died from injuries in Baltimore City each year from 2002 to 2006.
- The child injury death rate in Baltimore City declined 29% from 2002 to 2006.

Comparison of Injury Deaths among Children (1-17 years) by Manner of Death, Baltimore City (2002-2006) vs. Maryland and the United States (2002-2005)



Source: Office of Epidemiology and Planning, Baltimore City Health Department. *Childhood Injury Deaths in Baltimore City, 2002-2006*. Baltimore City, Maryland: Baltimore City Health Department. February 2008.

- The majority of injury deaths among Baltimore City children were due to homicide. From 2002 to 2006, 59% of deaths among children aged 1 to 17 in Baltimore were due to homicide; while 35% were due to accidents, 4% to suicides, and 2% were of undetermined intent.
- From 2002-2006, children were twice as likely to die in Baltimore as in Maryland or the nation as a whole. The rate of injuries among children aged 1 to 17 in Baltimore during 2002-2006 was 30.7 per 100,000 children compared to 14.7 per 100,000 children in the U.S. for 2002-2005 (data not displayed). This difference is primarily due to homicide—the child homicide rate in Baltimore was over eight times higher than the national rate.