Accidental events: challenges for public policy, surveillance and prevention

Accidents have a direct and indirect impact on the health status of individuals and population groups. They involve a sundry combination of events that reduce years of productive life, cause injuries and have after-effects that are often irreversible and result in a high number of deaths that could have been prevented. In Brazil, since 2010 accidents have represented approximately 80% of hospitalizations due to external causes in the Unified Health System (SUS). Of this total, falls are a leading cause with about 45% of hospitalizations, followed by traffic accidents which account for 22%.

In addition to the social and individual costs, these events have demanded a broad range of resources of all types and at all levels of care and rehabilitation from the health sector; and investments in surveillance for the diagnosis of ever increasing demands both in quantitative terms and in terms of complexity.

This issue of *Ciência & Saúde Coletiva* features studies involving the main types of accident (transport and falls) and goes beyond the traditional actions of the health sector. The edition opens with the subject of road safety “under the auspices of the United Nations,” which reveals the global expectations in relation to the contributions that public policies in the health sector can make to the reduction of road traffic injuries.

A group of articles analyzes the data produced by the 2014 VIVA (Violence and Accident Surveillance) Survey. Even though it does not yet have full coverage of the care provided in Brazilian urgency and emergency services, this survey contributes significantly to knowledge of strategic information that is not recorded in the Hospital Information System (SIH) or in the Mortality Information System (SIM). Following the surveys of 2006, 2007, 2009 and 2011, the 2014 survey reaffirms the need for continuity and broadening of epidemiological surveillance for accidental events, as well as violence. The articles that examined the VIVA Survey thoroughly point to the challenges in relation to the most vulnerable victims of transport injuries, namely motorcyclists, cyclists and pedestrians. They also examine the profiles and characteristics of patients and the injuries sustained and care dispensed to those involved in traffic accidents and falls. Two special groups were highlighted in these analyses, namely children and indigenous peoples.

Other articles of singular importance also offer analyses of traffic accidents by addressing the risk factors for the occurrence of these events and the use of safety equipment. Special attention was given to motorcyclists who are currently a highly vulnerable category in terms of injuries and deaths while circulating in traffic.

The thematic articles in this issue by no means exhaust the potential for discussion and analysis of these events, but point to some of the challenges to be overcome in the Brazilian, Latin American and worldwide context. The challenges ahead are varied, ranging from professional qualifications to ensure the required care, post-trauma care (including epidemiological diagnosis of the after-effects of accidents and subsequent physical and psychic rehabilitation), as well as guaranteeing the equity of the care provided.

Lastly, fifteen years after the creation of the National Accident and Violence Morbidity and Mortality Reduction Policy by the Ministry of Health, it is important to establish if it is in line with the current guidelines of the two United Nations Conferences on road safety. The text of the policy contains guidelines on the transversality of the topic in all programs and projects in the sector and on the intersectoriality of healthcare for the victims. It also deals with improving the quality of the information produced, awareness-raising for the strategic monitoring of events and the follow-up and evaluation of the actions undertaken.

Adalgisa Peixoto Ribeiro, Edinilsa Ramos de Souza, Camila Alves Bahia

*Guest Editors*