

2021

2018 Statewide Child Death Report

Nevada Institute for Children's Research and Policy

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STATE OF
NEVADA

DIVISION OF
CHILD AND
FAMILY
SERVICES

2018 STATEWIDE CHILD DEATH REPORT

Submitted by:

The Executive Committee to Review
the Death of Children

Special thanks go to the following who contributed to complete the 2018 Statewide Child Death Report:

2018 Executive Committee to Review Death of Children

2021 Executive Committee to Review Death of Children

Division of Child and Family Services (DCFS)

This report was prepared by the Nevada Institute for Children's Research and Policy (NICRP)

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Executive Summary

The purpose of this report is to provide comprehensive information regarding the circumstances by which children die in Nevada in order to prevent future child deaths and improve the health and safety of children in the state.

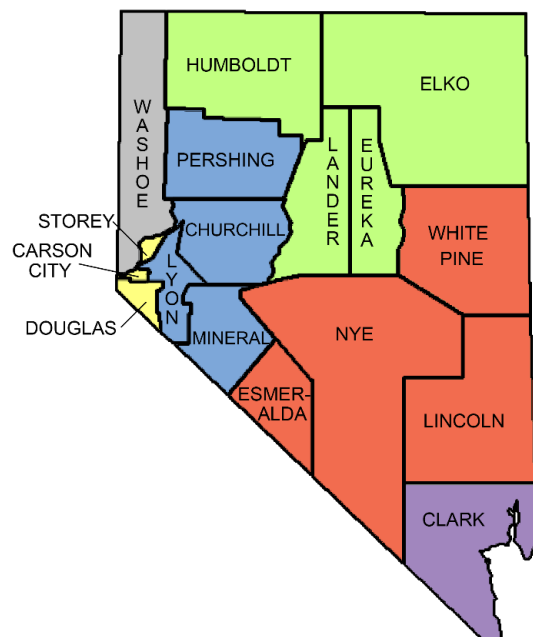
Why is child death prevention important?

Most child deaths, with the exception of natural and undetermined deaths, are preventable. A child's death is a tragic loss to the family and the community and can also be an indicator regarding the health of the community. Understanding why a child dies can help prevent the deaths of other children and improve health outcomes and overall child safety.

Different age groups of children and adolescents are at risk for different types of death. Infants and young children are at greater risk of accidental asphyxia deaths, which often result from unsafe sleeping environments and parents sharing a bed with their children. Sadly, they are also at greater risk of homicide by abuse and neglect. Adolescents are at greater risk of motor vehicle accidents, suicide, and drug overdoses. All age groups are at risk of drowning, especially children between ages one and four.

Where does Nevada's child death data come from?

The 2018 child deaths were reviewed by Nevada's regional child death review (CDR) teams, which are organized and operational pursuant to Nevada Revised Statutes (NRS) chapter 432B, sections 403 through 4095. There are currently six regional CDR teams in the state actively engaged in child death reviews. The map below depicts the geographic regions that each team covers.



The two urban teams, Clark and Washoe, review child deaths in the major population centers of the state, in the areas of Las Vegas and Reno, respectively. The four rural teams review child deaths in all other counties, which comprise Nevada's rural region.

The Executive Committee to Review the Death of Children (Executive Committee) is the statewide group that provides coordination, oversight, and training to the regional CDR teams. The Executive Committee reviews reports and recommendations from the regional teams and advocates for improvements to laws, policies, protocols, and practices related to the prevention of child deaths. Additionally, the Executive Committee compiles and distributes this statewide annual report. Finally, the Executive Committee makes decisions about funding initiatives to prevent child deaths based on the analyses of the annual data.

- Washoe Team
- Carson Team
- Elko Team
- Clark Team
- Fallon Team
- Pahrump Team

How do the regional CDR teams and the Executive Committee work to prevent child deaths?

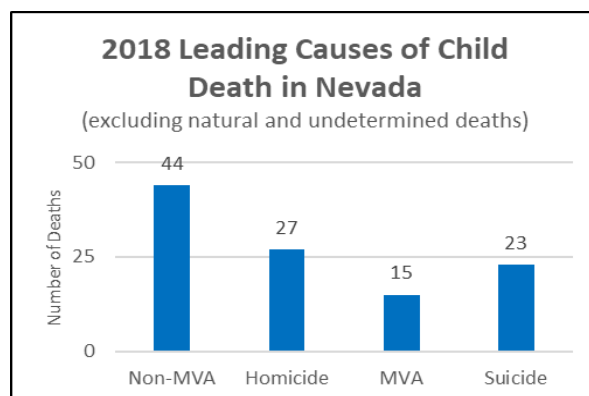
The regional CDR teams submit recommendations to the Executive Committee to improve laws, policies, and practices that may help prevent child death. The Executive Committee primarily works with state, county, and local agencies to make internal or systemic changes that focus on increased safety for children.

The Executive Committee funds annual public awareness campaigns for the prevention of child death in cooperation with community-based organizations, focused on the leading preventable causes of death. Highlights of prevention efforts that occurred in 2018 are included in the body of the report and past prevention efforts can be found in Appendix A.

What are the leading causes of child death in Nevada?

Excluding natural and undetermined deaths, in 2018, the four leading causes of child death were:

1. Non-motor vehicle accidents such as asphyxia (suffocation) and drowning
2. Homicide
3. Suicide
4. Motor vehicle accidents



How does child death in Nevada compare with the United States as a whole?

	Nevada	United States
Number of child deaths in 2018	272	35,454 ¹
Number of child deaths in 2017	359	36,648 ²
Change in number of child deaths from 2017 to 2018	Decrease of 87 (24.2%)	Decrease of 1194 (3.3%)
Infant mortality rate per 1,000 live births in 2018 ³	6.1	5.7
Age group experiencing largest number of child deaths in 2018	Under 1 year	Under 1 year ⁴
Leading cause of child death in 2018	Natural	Natural

¹ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

² National Center for Injury Prevention and Control (2018). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2017* [custom data query]. Retrieved April 22, 2020 from <http://www.cdc.gov/injury/wisqars/index.html>

³ Centers for Disease Control (2020). *Infant Mortality 2018*. Retrieved May 3, 2021 from <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/infantmortality.htm>

⁴ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Data Overview and General Analysis

Data Sources

All Nevada data in this report are derived from the regional CDR teams, which collect and enter data into an electronic case reporting system maintained by the National Center for Fatality Review and Prevention (CFRP). Based on the multidisciplinary reviews conducted for child deaths that occurred in calendar year 2018, there were a total of 272 child deaths in the state. These fatalities include children and adolescents from birth through 17 years of age. National comparison and supplementary research data are primarily obtained from federal sources including the Centers for Disease Control and Prevention (CDC).

Data Confidentiality

Portions of the collective information and data contained in this report were compiled from child records that are confidential and contain information that is protected from disclosure to the public, pursuant to Nevada Revised Statutes (NRS) and federal laws and regulations.

Data Limitations

- Some child deaths are not reviewed by the regional CDR teams. While the teams review all coroner-referred deaths, there may be some cases where the death certificate is issued by a private attending physician (non-coroner-referred) and is not referred to a team for review. Additionally, some deaths of out-of-state residents may not be processed through a Nevada coroner or medical examiner.
- Although a national data instrument is used for the collection of data, there may be inconsistencies at the regional CDR team level in terms of how these data are collected and entered.
- The data entered into the database are based on the documentation provided to the teams and information obtained during the review process. Unfortunately, for some cases, this information is very limited which leads to several variables in the data system being recorded as “unknown” or “missing”.
- There may be data errors due to problems with a child’s name. The most common issue occurs with infants who are not given a name at the time of their death and are assigned a designation such as “baby boy” or “baby girl.” When a death certificate is issued, in most cases, a name is given, which creates discrepancies in the data. These cases are examined, and attempts are made to reconcile these differences, but not all discrepancies can be corrected.
- There may be data errors due to coding for the cause of death. For coroner and medical examiner data, groupings are made based on International Classification of Diseases (ICD)-10 codes and information grouping details. The ICD-10 classification system is developed and published by the World Health Organization (WHO) and used to code and classify mortality data from death certificates.⁵ Typically, the cause of death is entered as reported

⁵ National Center for Health Statistics. (2020). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Retrieved April 22, 2020 from <https://www.cdc.gov/nchs/icd/icd10cm.htm#FY%202020%20release%20of%20ICD-10-CM>

on the death certificate. However, if during the review process, additional information is obtained, the team has the ability to reclassify the cause of death. In these instances, the cause of death decided by the team would be recorded in the database.

- Similarly, although the coroner or medical examiner may conclude that the manner of death is undetermined in some cases, if during the review process, additional information is obtained, the team has the ability to reclassify the manner of death. In these instances, the manner of death decided by the team would be recorded in the database.

Data Instrument Changes in 2018

Version 5.0 of the CDR Case Reporting System was released on April 23, 2018, which resulted in significant changes to future data collection as well as data from prior years. This version changed and/or removed many data elements previously used to make determinations about targeted causes of death including maternal drug use and abuse- and neglect-related deaths. Additionally, case details around several other causes of death were changed. Although these changes were made in 2018, all data from prior years were retroactively “cross walked” into the changed or new data elements. Overall, this has increased the accuracy of 2018 data in that certain types of cases or case details are more likely to be identified. However, this means that certain targeted causes of death might appear to have increased during 2018 when compared with prior years, but the increases might be a result of changes to the data instrument and resulting analysis, rather than a significant increase in actual deaths.

Review Requirements

The purpose, organization, and functions of the regional CDR teams are mandated by Nevada Revised Statutes (NRS) Chapter 432B, sections 403 through 4095. State-mandated child death reviews include the following:

- Reviews requested by adults related to the child within one year of the date of death.
- Children who were in the custody of a child welfare agency or whose family received services from such an agency.
- Children who died from alleged abuse or neglect.
- Children whose siblings, household members, or day care providers were subject to an abuse or neglect investigation within the previous 12 months.
- Children who were adopted through a child welfare agency.
- Children who died from Sudden Infant Death Syndrome (SIDS).

Deaths Reviewed vs. Deaths not Reviewed

Each of the six regional CDR teams reviews all coroner-referred child deaths within their region that meet the above criteria. In Clark County, the team meets monthly due to their high caseload. In Washoe County, the team meets every other month. In the rural areas, most of the regional CDR teams meet quarterly to review child death cases referred by coroners’ offices, or as requested, in their respective regions. However, the rural regional teams might meet less frequently if no child fatalities are reported in a given quarter.

Overall Findings

Demographics

In the sections that follow, the overall demographics of child deaths in Nevada in 2018 are reviewed along with comparisons to the overall demographics of child deaths in Nevada in 2017. The overall demographics reviewed include age, gender, race and ethnicity, county of residence, and manner of death.

Age

As seen in Table 1 below, the majority (57.0%) of child deaths in 2018 occurred among children under 1 year of age. This finding is consistent with national data from 2018 in which the largest percentage (60.5%) of child deaths occurred among those from birth to one year of age.⁶

The percentage of child deaths that occurred in Nevada in 2018 among other age ranges was considerably lower than those that occurred among those under one year of age with those in the 15 – 17 years age range accounting for the next largest percentage of child deaths at 15.1 percent. See Table 1.

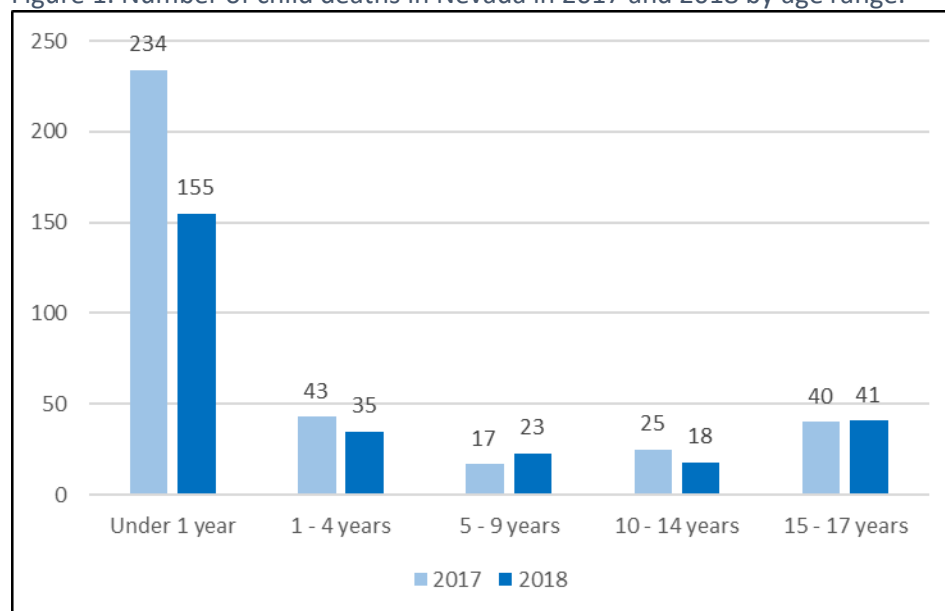
Table 1. Number and percent of child deaths in Nevada in 2018 by age range of decedent.

	Number	Percent
Under 1 year	155	57.0%
1 – 4 years	35	12.9%
5 – 9 years	23	8.5%
10 – 14 years	18	6.6%
15 – 17 years	41	15.1%
Total	272	100%

As seen in Figure 1 below, in Nevada in 2018 as compared to 2017, there were fewer child deaths among those under one year of age, 1 – 4 years of age, and 10 – 14 years of age.

⁶ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Figure 1. Number of child deaths in Nevada in 2017 and 2018 by age range.



Gender

The data used for this report come from the National Fatality Review Case Reporting System, which is the case reporting system used by the regional CDR teams. The response options in the system to report on a child’s “sex” include, “Male,” “Female,” and “Unknown.” Based on the available data and to remain consistent with previous reports, the terms gender, male, female, and unknown will be used in the current report.

As seen in Table 2, a larger percentage of child deaths in Nevada in 2018 occurred among males (64.0%) as compared to females (35.7%). This finding is consistent with national data, which indicate that a larger percentage of child deaths occurred among males (58.2%) as compared to females (41.8%) in 2018.⁷ The one case in which the gender of the decedent was unknown was a fetal death.

Table 2. Number and percent of child deaths in Nevada in 2018 by gender of decedent.

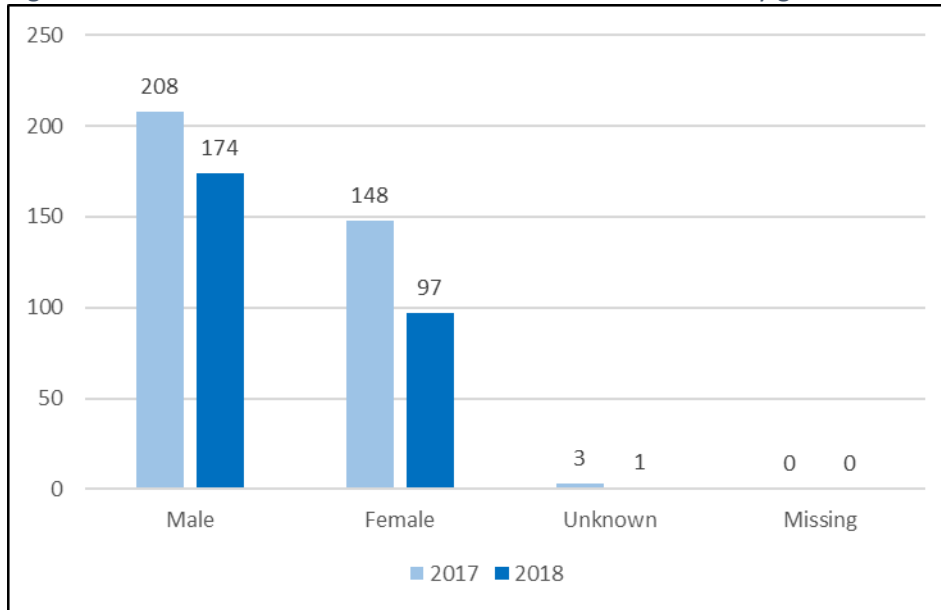
	Number	Percent
Male	174	64.0%
Female	97	35.7%
Unknown	1	0.4%
Missing	0	0.0%
Total	272	100%

As seen in Figure 2, the decrease in the number of child deaths in Nevada in 2018 from 2017 was largely driven by the decrease in the number of deaths that occurred among females. Specifically, there were 51 fewer female deaths in 2018 as compared to 2017 and 34 fewer male deaths in 2018 as compared to

⁷ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

2017. In 2018, there was one death in which the gender of the child was unknown as compared to three child deaths in 2017 in which the gender of the child was unknown.

Figure 2. Number of child deaths in Nevada in 2017 and 2018 by gender of decedent.



Race and Ethnicity

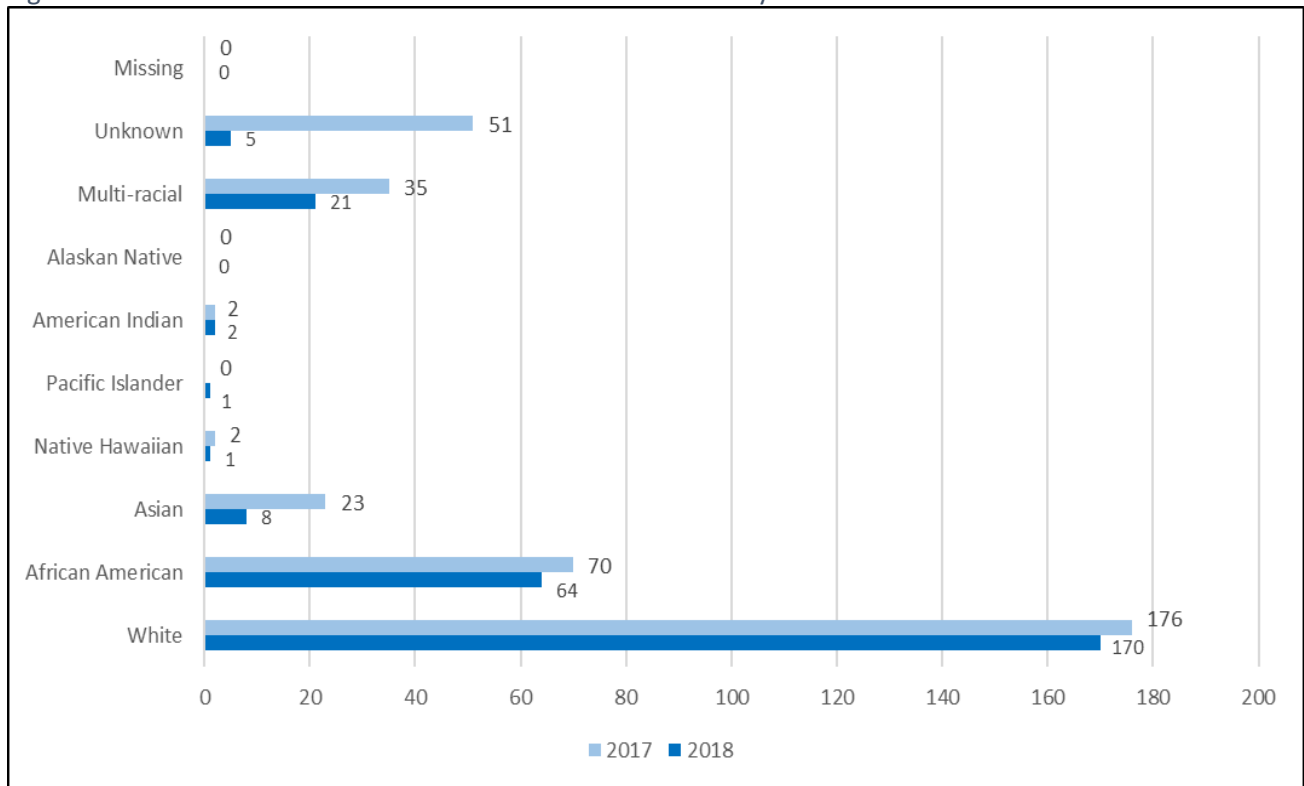
As seen in Table 3 below, the majority (62.5%) of child deaths in Nevada in 2018 occurred among white children. The next largest percentage of child deaths occurred among African American children at 23.5 percent.

Table 3. Number and percent of child deaths in Nevada in 2018 by race of decedent.

	Number	Percent
White	170	62.5%
African American	64	23.5%
Asian	8	2.9%
Native Hawaiian	1	0.4%
Pacific Islander	1	0.4%
American Indian	2	0.7%
Alaskan Native	0	0.0%
Multi-racial	21	7.7%
Unknown	5	1.8%
Missing	0	0.0%
Total	272	100%

The number of deaths in Nevada among Pacific Islander children increased from 0 in 2017 to 1 in 2018 and the number of deaths among American Indian children remained unchanged in 2018 as compared to 2017 (n = 2). However, there was a decrease in the number of child deaths in 2018 as compared to 2017 among all of the other race categories. See Figure 3 below.

Figure 3. Number of child deaths in Nevada in 2017 and 2018 by race of decedent.



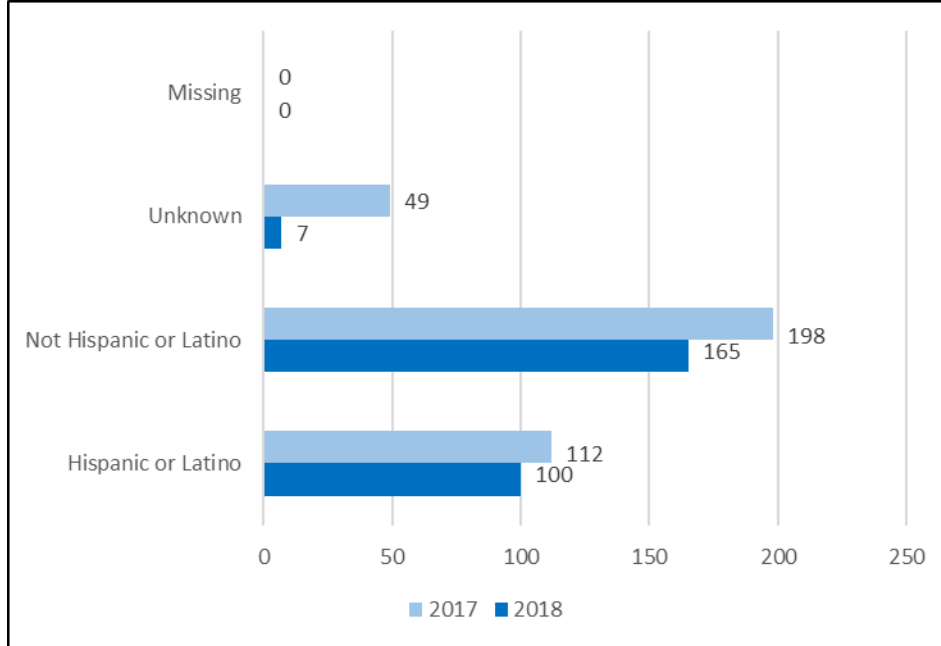
As seen in Table 4 below, the majority (60.7%) of child deaths in Nevada in 2018 occurred among children that were not Hispanic or Latino.

Table 4. Number and percent of child deaths in Nevada in 2018 by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	100	36.8%
Not Hispanic or Latino	165	60.7%
Unknown	7	2.6%
Missing	0	0.0%
Total	272	100%

In Nevada in 2018 as compared to 2017, there was a larger decrease in the number of child deaths in which the Hispanic or Latino ethnicity of the decedent was not known (-42) as compared to the number of child deaths in which the decedent was identified as not Hispanic or Latino (-33) or Hispanic or Latino (-12). See Figure 4.

Figure 4. Number of child deaths in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



The number and percent of the Nevada population under the age of 18 in 2018 by race is shown in Table 5.⁸

Table 5. Number and percent of Nevada population under the age of 18 in 2018 by race.

	Number	Percent
White*	241,177	35.0%
African American*	71,053	10.3%
Asian*	38,155	5.5%
American Indian and Alaskan Native*	5,647	0.8%
Native Hawaiian and Other Pacific Islander*	4,463	0.6%
Two or more race groups*	45,064	6.5%
Hispanic or Latino	282,683	41.1%
Total	688,242	100%
*Non-Hispanic		

The state data include Hispanic or Latino as a race category, which makes comparisons to the National Fatality Review Case Reporting System data challenging. However, Table 6 shows the number and percent of child deaths in Nevada in 2018 using the state race categories. Child deaths occurring in the race categories of unknown and the Hispanic or Latino ethnicity category of unknown are not included in Table 6, which eliminates 8 child deaths for a total of 264 child deaths.

⁸ The Annie E. Casey Foundation Kids Count Data Center. Child populations by race in Nevada (2021). Retrieved May 4, 2021 from <https://datacenter.kidscount.org/data/tables/103-child-population-by-race?loc=30&loct=2#detailed/2/30/false/37,871,868,867,133/68,69,67,12,70,66,71,72/423,424>

Table 5 and Table 6 show that although African American children made up 10.3 percent of the population under the age of 18 in Nevada in 2018, they accounted for 22.0 percent of child deaths. In contrast, white children made up 35.0 percent of the population and accounted for 29.2 percent of child deaths.

Table 6. Number and percent of child deaths in Nevada in 2018 by state population race categories.

	Number	Percent
White*	77	29.2%
African American*	58	22.0%
Asian*	8	3.0%
American Indian and Alaskan Native*	2	0.8%
Native Hawaiian and Other Pacific Islander*	2	0.8%
Two or more race groups*	17	6.4%
Hispanic or Latino	100	37.9%
Total	264	100%
*Not Hispanic or Latino ethnicity Note: Child deaths occurring in the race categories of unknown and the Hispanic or Latino ethnicity category of unknown are not included in this table (n = 8).		

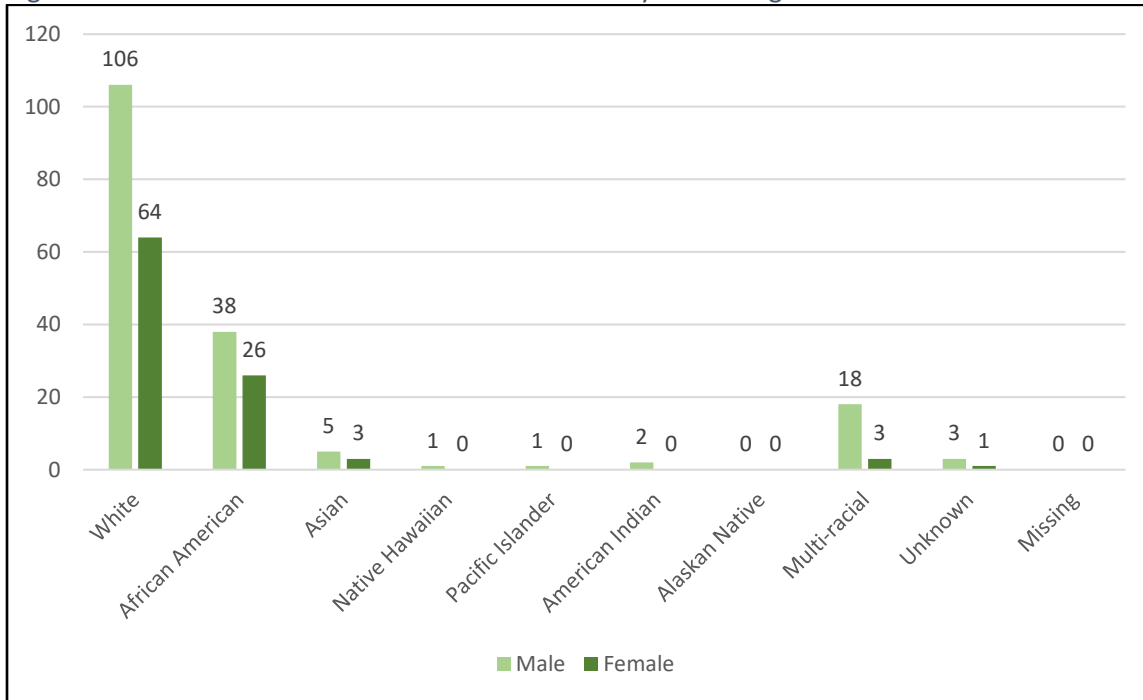
As seen in Table 7, the largest percentage of child deaths in Nevada in 2018 occurred among white males (38.9%) followed by white females (23.5%). African American males (14.0%) and African American females (9.6%) made up the next largest percentages of child deaths in Nevada in 2018.

Table 7. Number and percent of child deaths in Nevada in 2018 by race and gender of decedent.

	Male	Female	Unknown	Total
White	106 (38.9%)	64 (23.5%)	0 (0.0%)	170 (62.5%)
African American	38 (14.0%)	26 (9.6%)	0 (0.0%)	64 (23.5%)
Asian	5 (1.8%)	3 (1.1%)	0 (0.0%)	8 (3.0%)
Native Hawaiian	1 (0.4%)	0 (0.0%)	0 (0.0%)	1 (0.4%)
Pacific Islander	1 (0.4%)	0 (0.0%)	0 (0.0%)	1 (0.4%)
American Indian	2 (0.7%)	0 (0.0%)	0 (0.0%)	2 (0.7%)
Alaskan Native	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Multi-racial	18 (6.6%)	3 (1.1%)	0 (0.0%)	21 (7.7%)
Unknown	3 (1.1%)	1 (0.4%)	1 (0.4%)	5 (1.8%)
Missing	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Total	174 (64.0%)	97 (35.7%)	1 (0.4%)	272 (100%)

As seen in Figure 5, within each race in which there were child deaths in Nevada in 2018, there were more male than female deaths.

Figure 5. Number of child deaths in Nevada in 2018 by race and gender of decedent.

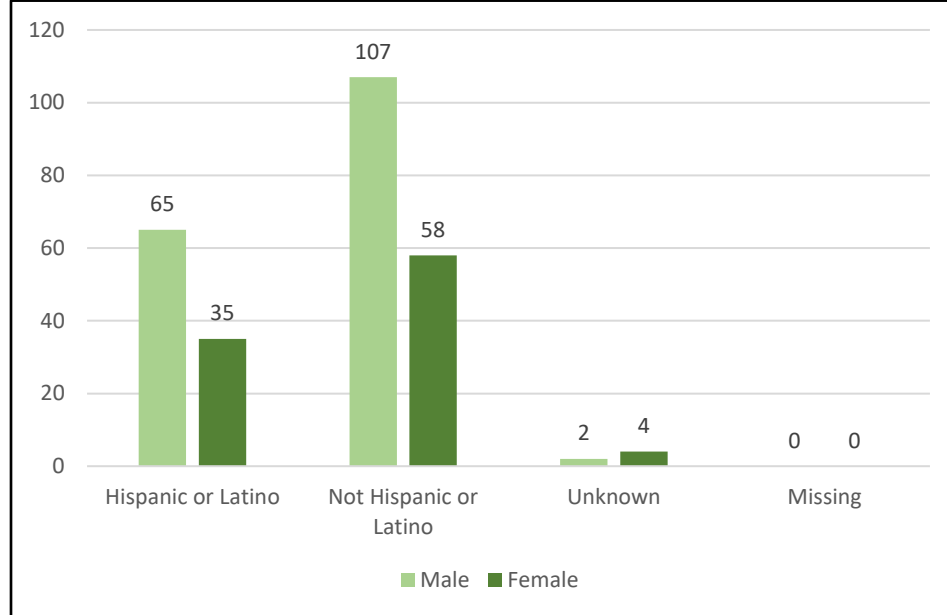


As seen in Table 8 and Figure 6, when examining Hispanic or Latino ethnicity and gender, the largest percentage of child deaths in Nevada in 2018 occurred among males who were not Hispanic or Latino (39.3%) followed by males who were Hispanic or Latino (23.9%).

Table 8. Number and percent of child deaths in Nevada in 2018 by Hispanic or Latino ethnicity and gender of decedent.

	Male	Female	Unknown	Total
Hispanic or Latino	65 (23.9%)	35 (12.9%)	0 (0.0%)	100 (36.8%)
Not Hispanic or Latino	107 (39.3%)	58 (21.3%)	0 (0.0%)	165 (60.7%)
Unknown	2 (0.7%)	4 (1.5%)	1 (0.4%)	7 (2.6%)
Missing	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Total	174 (64.0%)	97 (35.7%)	1 (0.4%)	272 (100%)

Figure 6. Number of child deaths in Nevada in 2018 by Hispanic or Latino ethnicity and gender of decedent.



County of Residence

The number and percent of 2018 child deaths in Nevada by county of residence can be seen in Table 9. Out of state deaths are included in Table 9 because, although the residence of these children was out of state, the children died while in Nevada and these cases were reviewed by a regional CDR team. The largest percentage of child deaths in Nevada in 2018 occurred among residents in the two most populous counties in the state: Clark County (83.8%) and Washoe County (11.4%). When compared to the 2018 population estimates in which the children of Clark County made up 74.8 percent of the state child population and the children of Washoe County made up 14.7 percent of the state child population, the number of child deaths in these counties were somewhat proportional to the county populations.⁹

Table 9. Number and percent of child deaths in Nevada in 2018 by decedent’s county of residence.

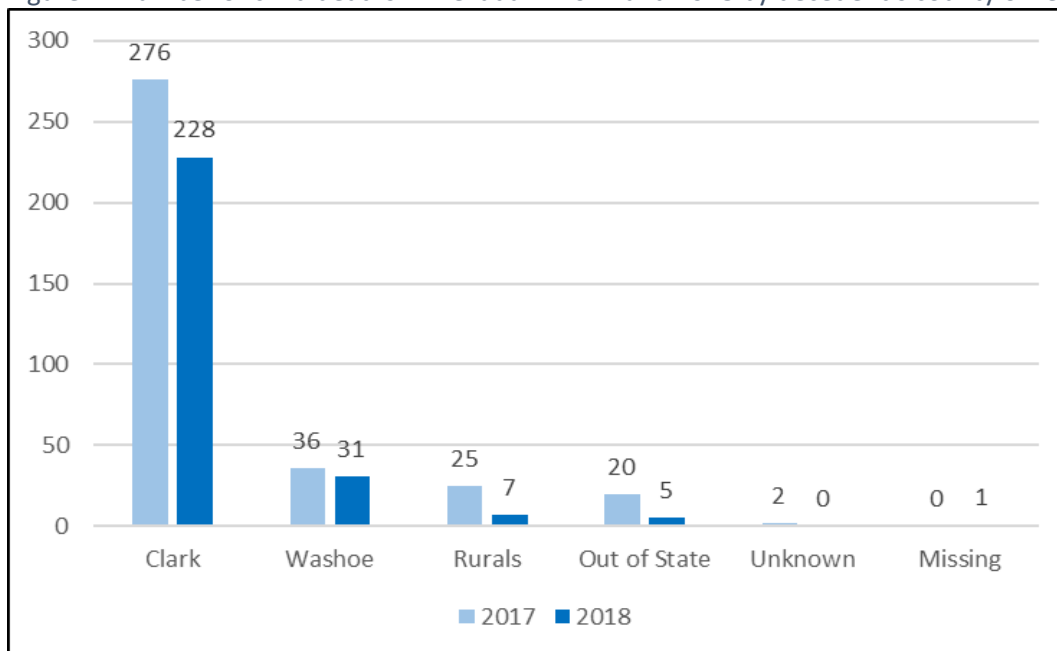
	Number	Percent
Carson City	0	0.0%
Clark	228	83.8%
Churchill	4	1.5%
Douglas	0	0.0%
Elko	0	0.0%
Esmeralda	0	0.0%
Eureka	0	0.0%
Humboldt	0	0.0%
Lander	0	0.0%
Lincoln	0	0.0%
Lyon	2	0.7%

⁹ U.S. Census Bureau (2021). 2014-2018 American Community Survey 5-Year Estimates. <http://data.census.gov>

Mineral	0	0.0%
Nye	1	0.4%
Pershing	0	0.0%
Storey	0	0.0%
Washoe	31	11.4%
White Pine	0	0.0%
Out of state	5	1.8%
Unknown	0	0.0%
Missing	1	0.4%
Total	272	100%

As seen in Figure 7, from 2017 to 2018, there was a decrease in the number of deaths of children for each county of residence, in which the county of residence was known.

Figure 7. Number of child deaths in Nevada in 2017 and 2018 by decedent’s county of residence.



Note: “Rurals” includes the counties of Churchill, Lyon, and Nye.

Manner of Death

A coroner or medical examiner lists one of five manners of death on the death certificate as follows:

1. **Natural:** Deaths that result from natural disease mechanisms and include prematurity, intra-uterine fetal demise, and Sudden Infant Death Syndrome (SIDS) cases.
2. **Accident:** Deaths not caused by an intent to harm.
3. **Homicide:** The killing of one human by another.
4. **Suicide:** Taking of one’s own life voluntarily and intentionally.
5. **Undetermined:** Deaths where sufficient evidence or information cannot be deduced during the initial investigation, usually about intent, to assign a manner of death.

As seen in Table 10, the largest percentage of child deaths by manner in Nevada in 2018 were natural

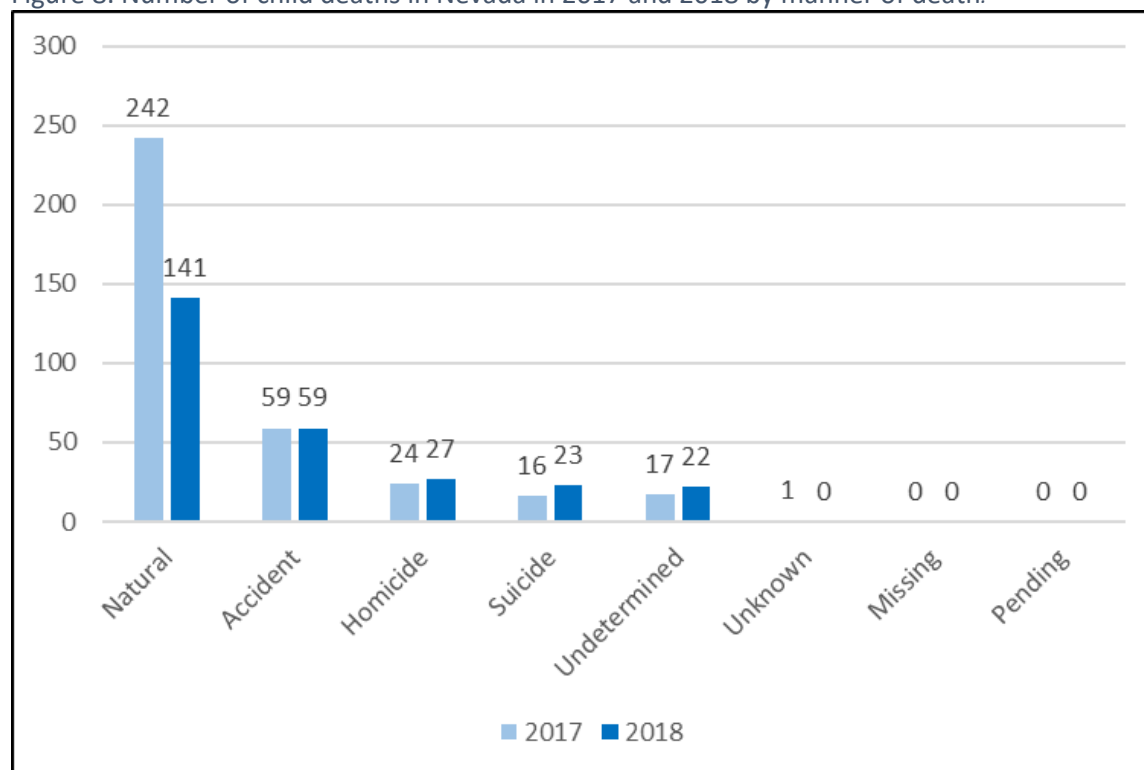
(51.8%), followed by accident (21.7%), homicide (10.0%), suicide (8.5%), and undetermined (8.1%).

Table 10. Number and percent of child deaths in Nevada in 2018 by manner of death.

	Number	Percent
Natural	141	51.8%
Accident	59	21.7%
Homicide	27	10.0%
Suicide	23	8.5%
Undetermined	22	8.1%
Unknown	0	0.0%
Missing	0	0.0%
Pending	0	0.0%
Total	272	100%

As seen in Figure 8, there were fewer natural child deaths in Nevada in 2018 as compared to 2017. However, there were more homicide, suicide, and undetermined child deaths in Nevada in 2018 as compared to 2017.

Figure 8. Number of child deaths in Nevada in 2017 and 2018 by manner of death.



When examining child deaths by manner and age range of the decedent, the largest percentage of child deaths in Nevada in 2018 were natural deaths of children under one year of age (38.2%), followed by accident deaths of children under one year of age (10.3%), and undetermined deaths of children under one year of age (5.9%). See Table 11.

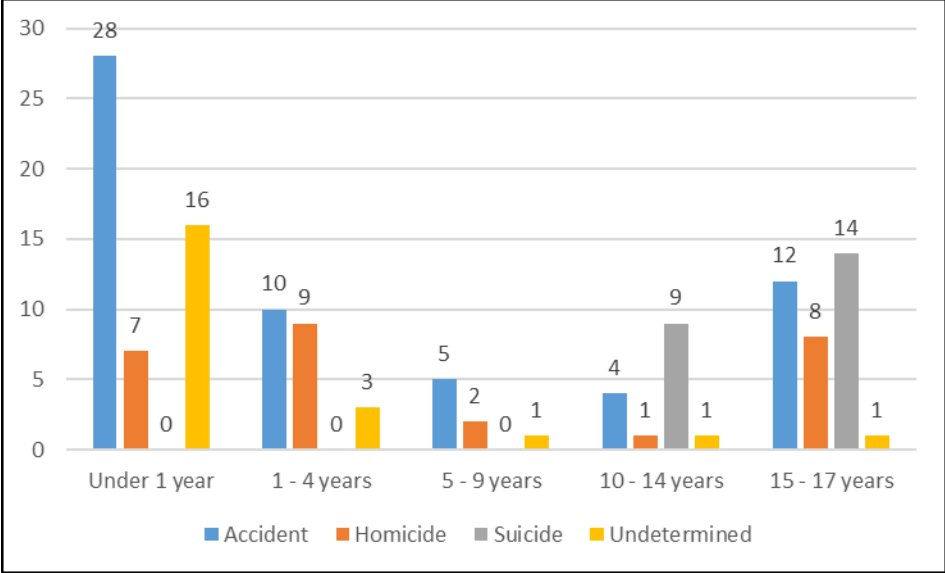
Table 11. Number and percent of child deaths in Nevada in 2018 by manner and age range of decedent.

	Age Range	Total
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	Under 1 year	1 – 4 years	5 – 9 years	10 – 14 years	15 – 17 years	
Natural	104 (38.2%)	13 (4.8%)	15 (5.5%)	3 (1.1%)	6 (2.2%)	141 (51.8%)
Accident	28 (10.3%)	10 (3.7%)	5 (1.8%)	4 (1.5%)	12 (4.4%)	59 (21.7%)
Homicide	7 (2.6%)	9 (3.3%)	2 (0.7%)	1 (0.4%)	8 (2.9%)	27 (10.0%)
Suicide	0 (0.0%)	0 (0.0%)	0 (0.0%)	9 (3.3%)	14 (5.1%)	23 (8.5%)
Undetermined	16 (5.9%)	3 (1.1%)	1 (0.4%)	1 (0.4%)	1 (0.4%)	22 (8.1%)
Unknown	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Missing	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Pending	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Total	155 (57.0%)	35 (12.9%)	23 (8.5%)	18 (6.7%)	41 (15.1%)	272 (100%)

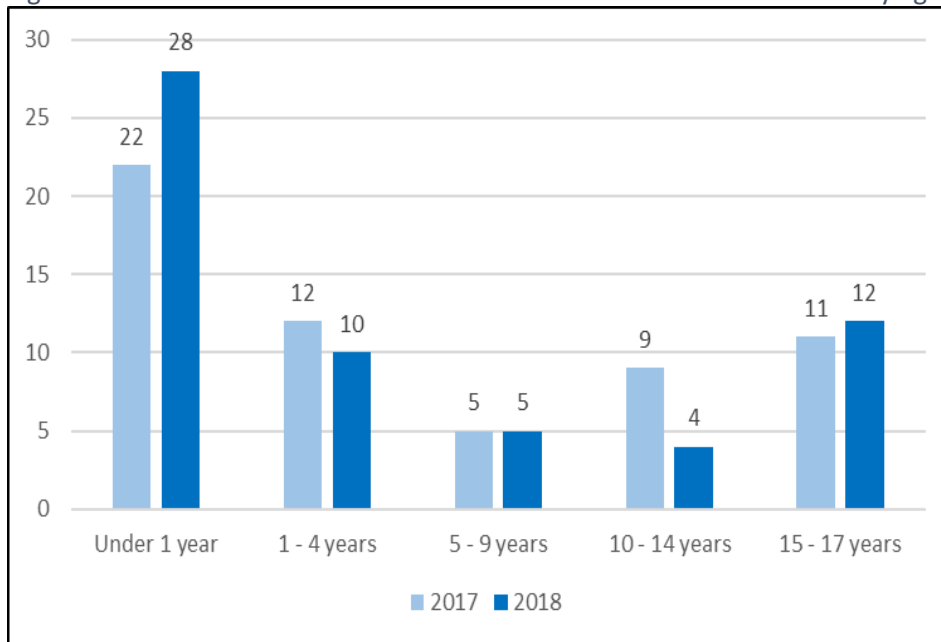
As seen in Figure 9, when excluding natural, unknown, missing, and pending manners of death, the most common manner of death in Nevada in 2018 for decedents under one year of age, those 1 – 4 years of age, and those 5 – 9 years of age was accident. Among those 10 – 14 years of age and those 15 – 17 years of age, the most common manner of death was suicide.

Figure 9. Number of child deaths in Nevada in 2018 by manner (excluding natural, unknown, missing, and pending) and age range of decedent.



As seen in Figure 10, in Nevada in 2017 and 2018, the largest number of accident child deaths occurred among children under one year of age. In Nevada, in 2018 as compared to 2017, there were more accident deaths among those under one year of age and those 15 – 17 years of age. In contrast, there were fewer accident child deaths in 2018 as compared to 2017, among those 1 – 4 years of age and those 10 – 14 years of age.

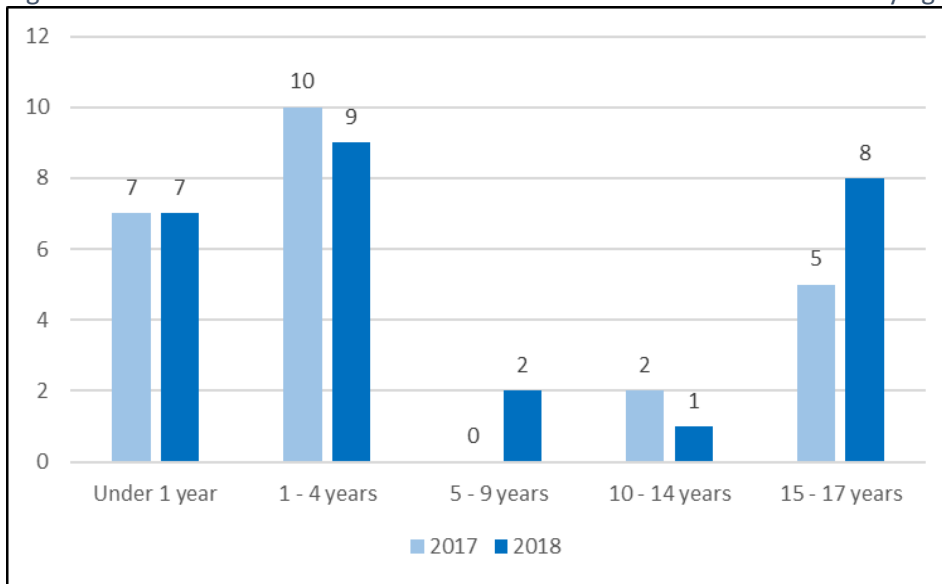
Figure 10. Number of accident child deaths in Nevada in 2017 and 2018 by age range of decedent.



Nationally, in 2018, the largest number of homicide child deaths occurred among those 15 – 17 years of age.¹⁰ However, as seen in Figure 11, in Nevada in 2018, the largest number of homicide child deaths occurred among children 1 – 4 years of age and the second largest number of homicide child deaths occurred among children 15 – 17 years of age. The number of homicide child deaths among children 5 – 9 years of age and those 15 – 17 years of age increased in 2018 as compared to 2017.

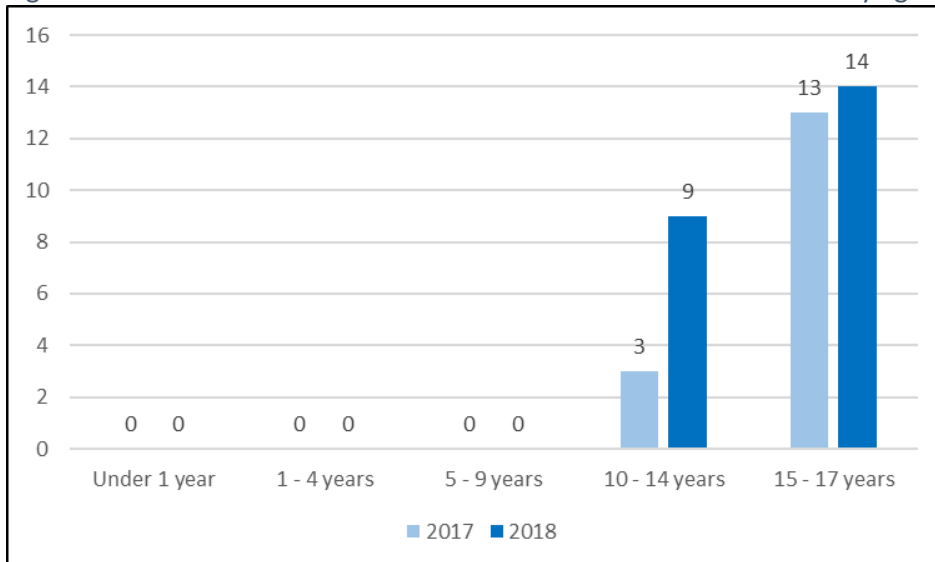
¹⁰ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Figure 11. Number of homicide child deaths in Nevada in 2017 and 2018 by age range of decedent.



Nationally, in 2018, suicide child deaths occurred among those 5 – 9 years of age, 10 – 14 years of age, and 15 – 17 years of age with the number of deaths increasing across the age ranges.¹¹ In Nevada in 2018, suicide child deaths only occurred among children 10 – 14 years of age and 15 – 17 years of age, which is similar to previous years. As seen in Figure 12, there were more suicide child deaths among children in both of these age categories in Nevada in 2018 as compared to 2017.

Figure 12. Number of suicide child deaths in Nevada in 2017 and 2018 by age range of decedent.



¹¹ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Leading Manners and Causes of Death

As cited previously in this report, the leading manners of child death in Nevada in 2018 included natural (51.8%), accident (21.7%), homicide (10.0%), suicide (8.5%), and undetermined (8.1%). In this section, a brief overview will be provided of each of the following manners and causes of child deaths: natural, non-motor vehicle accidents, motor vehicle accidents, homicide, and suicide.

Natural Deaths

In spite of advancements in medical practice and technology, newborn infants are at risk of a variety of natural diseases. Some of these risks result from genetic disorders, while others relate to environmental factors and the health and wellbeing of mothers during pregnancy. Nationally, congenital anomalies and infant prematurity (pre-term birth) were leading causes of natural death among infants in 2018.¹² Below are risk factors associated with infant prematurity and congenital anomalies.¹³

Risk factors for infant prematurity:

- Prior pre-term delivery or family history of pre-term birth
- Smoking and other harmful environmental exposures to substances
- Pregnancy with multiple births
- Interval of less than 6 months between pregnancies
- Conceiving through in vitro fertilization
- Inadequate prenatal care
- Medical conditions of the mother
- Maternal age (teens and women over 35)
- Under or overweight mother before pregnancy
- Low income
- Substance, alcohol, and tobacco use
- Stressors and lack of social support
- Domestic violence

Risk factors for medical/genetic conditions of infant:

- Smoking, drinking alcohol, or taking certain illicit drugs during pregnancy
- Having certain medical conditions, such as being obese or having uncontrolled diabetes before and during pregnancy
- Taking certain medications, such as isotretinoin (a drug used to treat severe acne)
- Family history of birth defects
- Being an older mother, typically over the age of 34 years
- Lack of prenatal care

¹² National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>.

¹³ Mayo Clinic (2021). *Premature Birth*. Retrieved May 4, 2021 from <https://www.mayoclinic.org/diseases-conditions/premature-birth/symptoms-causes/syc-20376730>; Centers for Disease Control and Prevention. (2020). *Preterm Birth*. Retrieved May 4, 2021 from <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pretermbirth.htm>; Centers for Disease Control and Prevention (2020). *Birth Defects*. Retrieved May 5, 2021 from <https://www.cdc.gov/ncbddd/birthdefects/facts.html#causes>

Natural deaths were the leading manner of child deaths in Nevada in 2018, accounting for 51.8 percent of all child deaths and occurring primarily in children under one year of age. This finding is consistent with the 2018 national data in which the majority of child deaths were natural deaths occurring among those under one year of age.¹⁴ As seen in Table 12 below, the most common primary cause of death among natural child deaths in Nevada in 2018 was “other medical condition” (44.7%), followed by “other perinatal condition” (24.1%), prematurity (9.2%), and congenital anomaly (5.0%). “Other medical condition” and “other perinatal condition” are response options in the data collection tool and include natural deaths in which the primary cause of death was due to a medical condition other than those listed in Table 12.

Table 12. Number and percent of natural child deaths in Nevada in 2018 by primary cause of death.

	Number	Percent
Asthma/respiratory	2	1.4%
Cancer	5	3.5%
Cardiovascular	4	2.8%
Congenital anomaly	7	5.0%
HIV/AIDS	0	0.0%
Influenza	2	1.4%
Low birth weight	0	0.0%
Malnutrition/dehydration	0	0.0%
Neurological/seizure disorder	1	0.7%
Pneumonia	4	2.8%
Prematurity	13	9.2%
SIDS	0	0.0%
Other infection	5	3.5%
Other perinatal condition	34	24.1%
Other medical condition	63	44.7%
Undetermined medical cause	1	0.7%
Diabetes	0	0.0%
Unknown	0	0.0%
Total	141	100%

All natural deaths are reviewed by the regional CDR teams and certain natural causes are focused on, as follows:

- Sudden Infant Death Syndrome (SIDS): Review of these deaths are mandated by NRS 432B.405.
- Natural deaths for children with a current or prior child protective services (CPS) history: Review of these deaths are mandated by NRS 432B.405.
- Natural causes that might be associated with abuse and/or neglect: Although a coroner or medical examiner might determine that a child death resulted from identifiable natural causes, investigation findings might suggest signs of abuse and/or neglect such as over-medication or medical neglect.
- Toxicology reports suggesting maternal drug use and drug exposure for infants: Although a coroner or medical examiner might determine that a child death resulted from identifiable

¹⁴ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

natural causes, toxicology tests conducted at birth might suggest that drug exposure contributed to the fatality.

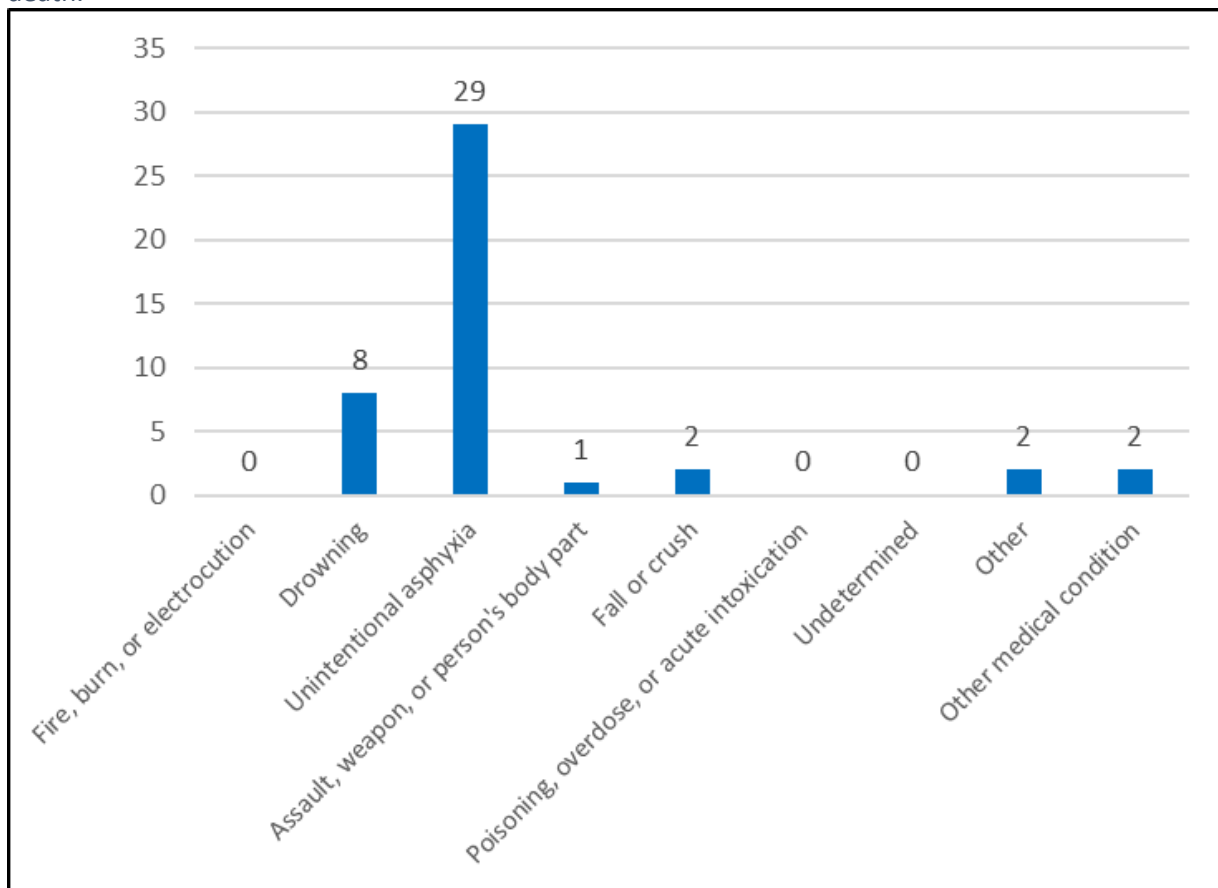
More information regarding these case reviews are included in the Detailed Reviews section of this report on page 38.

Non-motor vehicle accidents

Non-motor vehicle accidents were the primary cause of accident child deaths in Nevada in 2018, accounting for 74.6 percent of all accidents. This is consistent with the 2018 national data, which indicate that motor vehicle accidents were the primary cause of accident child deaths in 2018.¹⁵

As shown in Figure 13, the most common primary causes of non-motor vehicle accident child deaths in Nevada in 2018 were unintentional asphyxia followed by drowning.

Figure 13. Number of non-motor vehicle accident child deaths in Nevada in 2018 by primary cause of death.



¹⁵ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

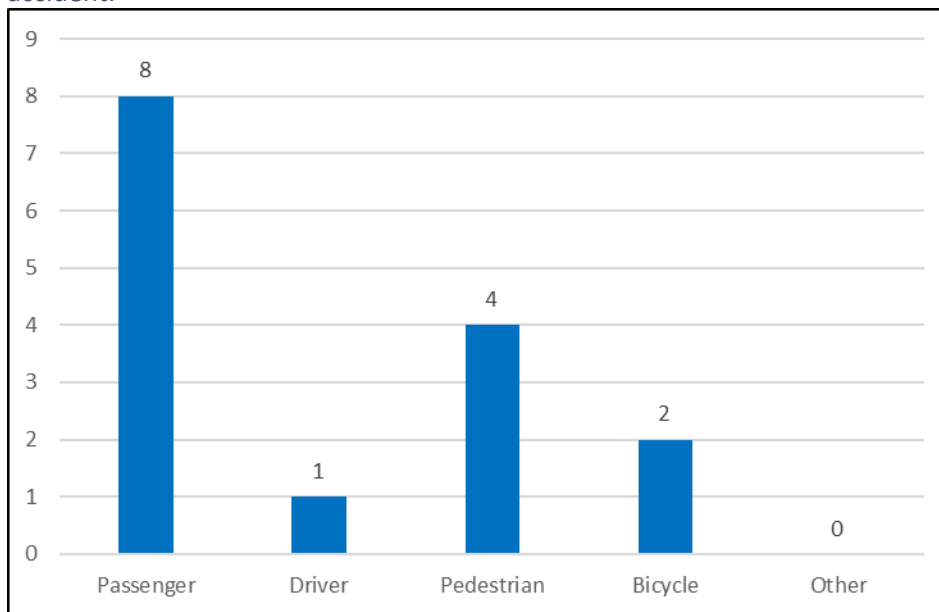
Safe Sleep Related Public Awareness Efforts Supported by the Executive Committee

Unintentional asphyxia deaths are usually due to unsafe sleeping arrangements such as co-sleeping. In an effort to promote safe sleep and prevent accidents involving unintentional asphyxia in the state, the Executive Committee has supported numerous public awareness efforts over the years. In 2018, the Executive Committee funded the expansion of Safe Sleep Seminars offered by Baby’s Bounty. As part of this funding, families completing the seminars received a portable crib. This funding also supported the development and implementation of Baby Care Basics Seminars through which caregivers were taught basic infant care, characteristics of a newborn, infant nutrition, signs and symptoms of illness, crying, bathing, and other topics. Details regarding public awareness efforts supported by the Executive Committee in previous years can be found in Appendix A.

Motor vehicle accidents

Motor vehicle accident child deaths accounted for 25.4 percent of accident child deaths in Nevada in 2018. As shown in Figure 14, in most of these motor vehicle accident deaths, the decedent was a passenger in the motor vehicle or a pedestrian.

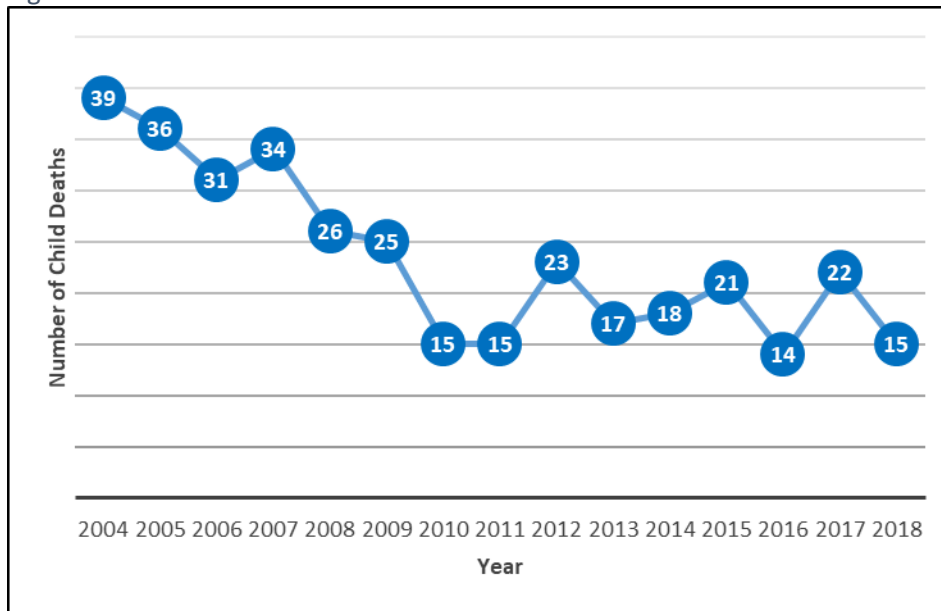
Figure 14. Number of motor vehicle accident child deaths in Nevada in 2018 by child position during the accident.



As seen in Figure 15, there was a decline in the number of annual motor vehicle accident child deaths in Nevada from 2004 through 2010/2011. In 2012, there was a slight increase in the number of motor vehicle accident child deaths to 23. However, since then, Nevada has not seen the number of annual motor vehicle accident child deaths rise above this number. Nationally, there was a similar decline in the number of motor vehicle accident deaths overall from 2005 through 2011. Despite a slight trend upward through 2016, nationally, the overall number of motor vehicle accident deaths decreased in 2017 and again in 2018.¹⁶

¹⁶ United States Department of Transportation. *National Highway Traffic Safety Administration*. Retrieved May 3, 2021 from <https://www-fars.nhtsa.dot.gov/Main/index.aspx>.

Figure 15. Number of motor vehicle accident child deaths in Nevada from 2004 to 2018.



Motor Vehicle Accident Related Public Awareness Efforts Supported by the Executive Committee

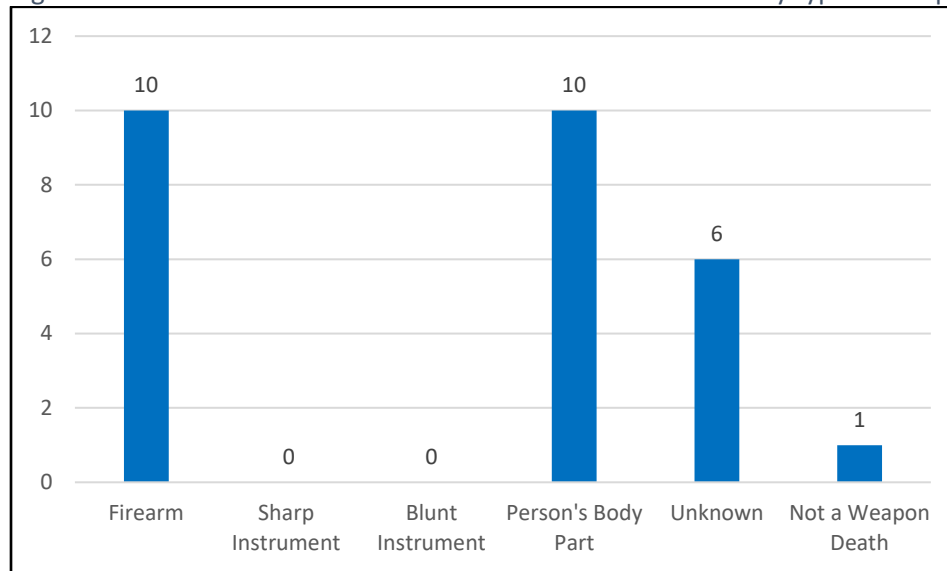
Traffic safety campaigns, including child seat safety, are managed and implemented by the Nevada Department of Public Safety (DPS) through the Office of Traffic Safety (OTS) (<http://ots.nv.gov/>).

In general, the Executive Committee avoids duplication of effort when other state or county agencies have well-established campaigns in place for safety and child death prevention. The Executive Committee did not engage in any public awareness or prevention efforts of its own related to motor vehicle accidents in 2018, however, details regarding previous efforts can be found in Appendix A.

Homicide

Homicide child deaths accounted for 10.0 percent of all child deaths in Nevada in 2018. As shown in Figure 16, among these homicide child deaths, person’s body part and firearm were the two most common types of weapons used in these deaths. The one homicide child death categorized as “Not a Weapon Death” was due to starvation.

Figure 16. Number of homicide child deaths in Nevada in 2018 by type of weapon used.



Abuse, Neglect, and Firearm Related Public Awareness Efforts Supported by the Executive Committee

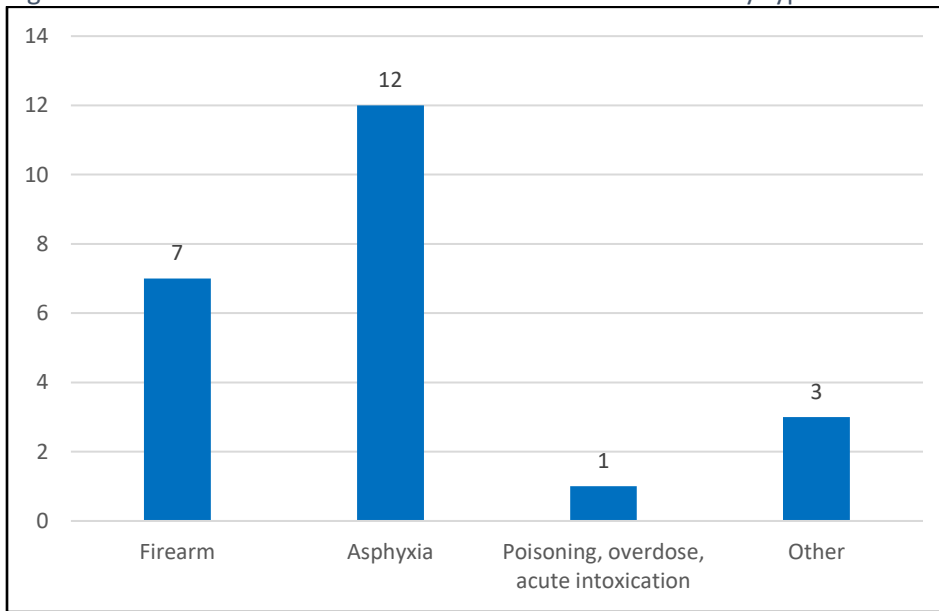
Primary prevention efforts for deaths caused by abuse and neglect are undertaken by the Nevada Children’s Trust Fund (CTF), which engages in annual public awareness and prevention campaigns (http://dhhs.nv.gov/Programs/Grants/Funding/CTF/Childrens_Trust_Fund/).

In general, the Executive Committee avoids duplication of effort when other state or county agencies have well-established campaigns in place for safety and child death prevention. However, in 2018, the Executive Committee provided funds to support the Annual Nevada Child Abuse Prevention and Safety Conference. This annual conference, sponsored by Prevent Child Abuse Nevada (PCANV) and Child Abuse and Neglect Prevention Taskforce (CAN Prevent), seeks to increase awareness regarding child abuse prevention, child safety activities, and related resources available in Nevada. Details regarding public awareness efforts supported by the Executive Committee in previous years can be found in Appendix A.

Suicide

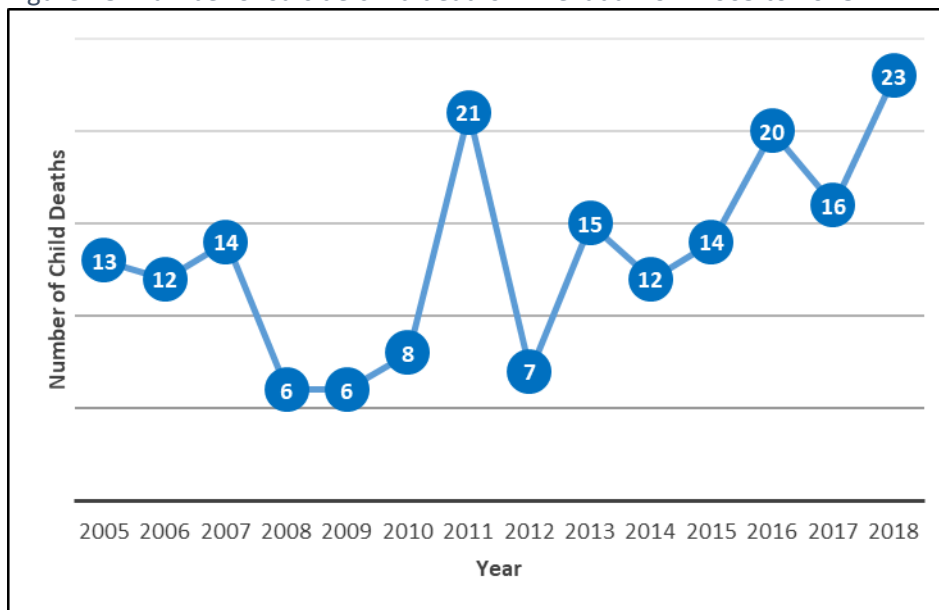
As noted previously in this report, suicide child deaths accounted for 8.5 percent of all child deaths in Nevada in 2018. As shown in Figure 17, most of the suicide child deaths were the result of asphyxia.

Figure 17. Number of suicide child deaths in Nevada in 2018 by type.



As seen in Figure 18, Nevada experienced a peak in the annual number of suicide child deaths in 2011. This peak was followed by a sharp decline the following year; however, the annual number of suicide child deaths has been trending upward since that time and has reached a new peak in 2018.

Figure 18. Number of suicide child deaths in Nevada from 2005 to 2018.



Suicide Prevention Related Public Awareness Efforts Supported by the Executive Committee

In 2018, the Executive Committee provided funding to three public awareness and education campaigns focused on suicide prevention. These campaigns included the following:

- **Text4Life:** The Executive Committee first began funding this effort, operated by the Crisis Call Center, in SFY 2015. This texting program is targeted to individuals, especially youth, who use texting as a primary means of communication and who might contact the center regarding problems such as suicide, drug abuse, or other issues via text when they otherwise would not call. The goal of the program is to provide education and support regarding abuse, addiction, physical and mental health, and suicide prevention.
- **SafeTALK:** The Executive Committee provided funding to the Nevada Coalition for Suicide Prevention (NCSP) to support the provision of Suicide Alertness for Everyone (safeTALK) training for law enforcement agencies and firearm industry members. This program continues the NCSP’s efforts to focus on the reduction of access to lethal means, specifically firearms.
- **NyE Communities Coalition:** The Executive Committee provided funding to the NyE Communities Coalition to conduct suicide prevention assessments in Nye County schools. The Nye County region experienced an increase in deaths by suicide among teens since 2013 and this program targeted local high school students.

Details regarding previous suicide prevention efforts supported by the Executive Committee can be found in Appendix A.

Detailed Reviews

Undetermined Deaths

Although a coroner or medical examiner might conclude that the manner of death for a case is undetermined, in some cases the reviews completed by the regional CDR teams result in the classification of a cause of death based on the additional case details obtained by the team and/or the consensus of the multidisciplinary partners. This difference of opinion regarding cause of death is expected given the multidisciplinary approach to death reviews implemented by the regional CDR teams. However, in 2018, there were no cases in which the regional CDR teams reclassified the cause of death.

There were 22 undetermined child deaths in Nevada in 2018, which accounted for 8.1 percent of all child deaths in the state. As seen in Table 13, for all but one of these cases, it was undetermined if the primary cause of death was due to an injury or medical cause.

Table 13. Number and percent of undetermined child deaths in Nevada in 2018 by primary cause of death.

	Number	Percent
Unknown injury	1	4.5%
Undetermined if injury or medical cause	21	95.5%
Total	22	100%

As seen in Table 14, exposure to hazards caused or contributed to the death in 45.5 percent of the 22 undetermined child deaths in Nevada in 2018.

Table 14. Number and percent of undetermined child deaths in Nevada in 2018 in which child abuse, neglect, poor supervision, or exposure to hazards caused or contributed to the death.

	Number	Percent
Child abuse	1	4.5%
Child neglect	3	13.6%
Poor supervision	2	9.1%
Exposure to hazards	10	45.5%
No abuse or neglect	5	22.7%
Unknown	1	4.5%
Total	22	100%

Accidents Involving Asphyxia

There were 29 accident child deaths involving asphyxia in Nevada in 2018. As seen in Table 15, the majority of these deaths occurred among residents of Clark County (86.2%). See Appendix B for details regarding all counties.

Table 15. Number and percent of accident child deaths involving asphyxia in Nevada in 2018 by decedent’s county of residence.

	Number	Percent
Clark County	25	86.2%
Washoe County	3	10.3%
Rural Counties	1	3.4%
Total	29	100%

As seen in Table 16, 93.1 percent of the accident child deaths involving asphyxia in Nevada in 2018 were of those under one year of age. This is consistent with 2018 national data, which indicate that this age group experienced the largest number of accident child deaths involving asphyxia.¹⁷

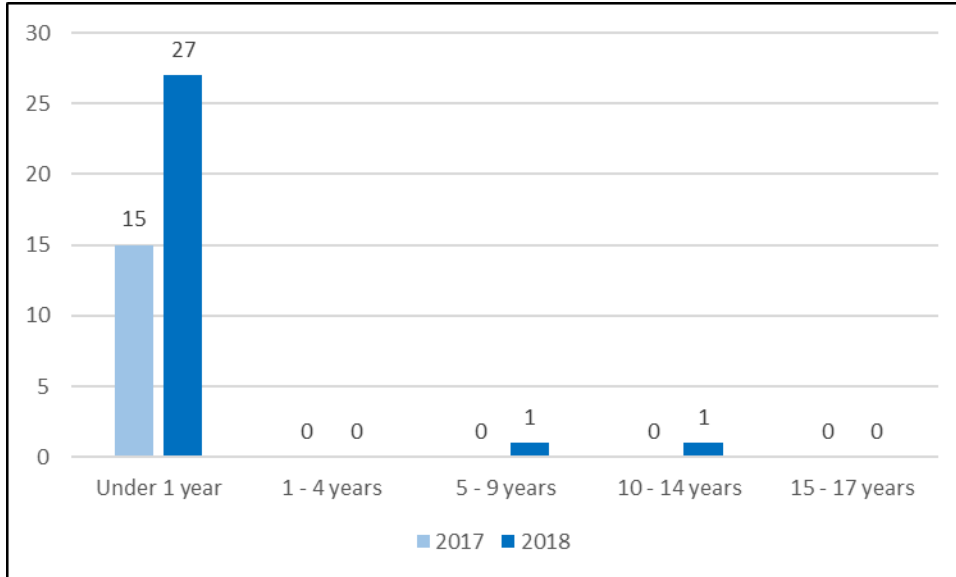
Table 16. Number and percent of accident child deaths involving asphyxia in Nevada in 2018 by age range of decedent.

	Number	Percent
Under 1 year	27	93.1%
1 – 4 years	0	0.0%
5 – 9 years	1	3.4%
10 – 14 years	1	3.4%
15 – 17 years	0	0.0%
Total	29	100%

¹⁷ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

As seen in Figure 19, there were more accident child deaths involving asphyxia in children under one year of age, 5 – 9 years of age, and 10 – 14 years of age in 2018 as compared to 2017.

Figure 19. Number of accident child deaths involving asphyxia in Nevada in 2017 and 2018 by age range of decedent.



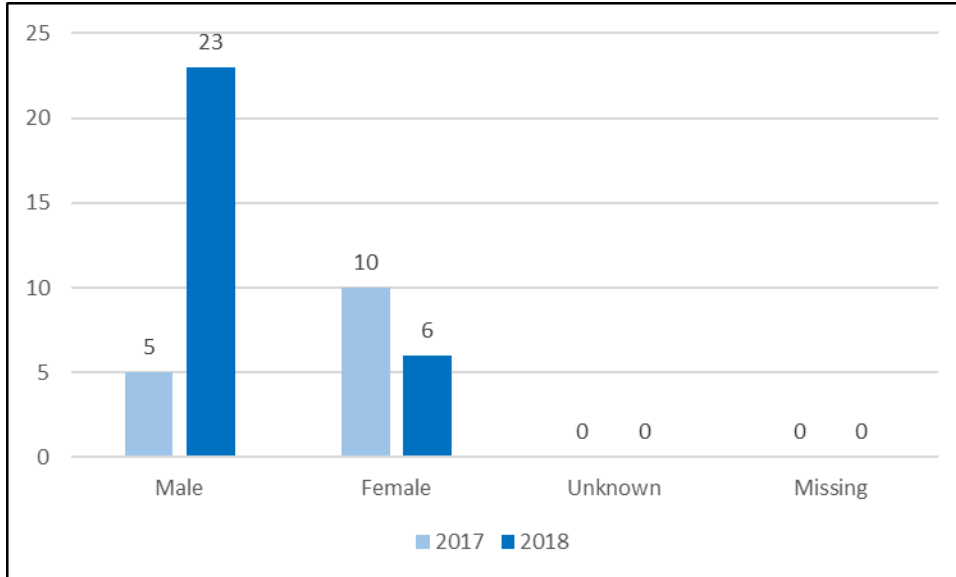
As seen in Table 17, the majority of accident child deaths involving asphyxia in Nevada in 2018 occurred among males (79.3%).

Table 17. Number and percent of accident child deaths involving asphyxia in Nevada in 2018 by gender of decedent.

	Number	Percent
Male	23	79.3%
Female	6	20.7%
Unknown	0	0.0%
Missing	0	0.0%
Total	29	100%

As seen in Figure 20, there were more accident child deaths involving asphyxia among males in Nevada in 2018 than there were among males and females combined in 2017.

Figure 20. Number of accident child deaths involving asphyxia in Nevada in 2017 and 2018 by gender of decedent.



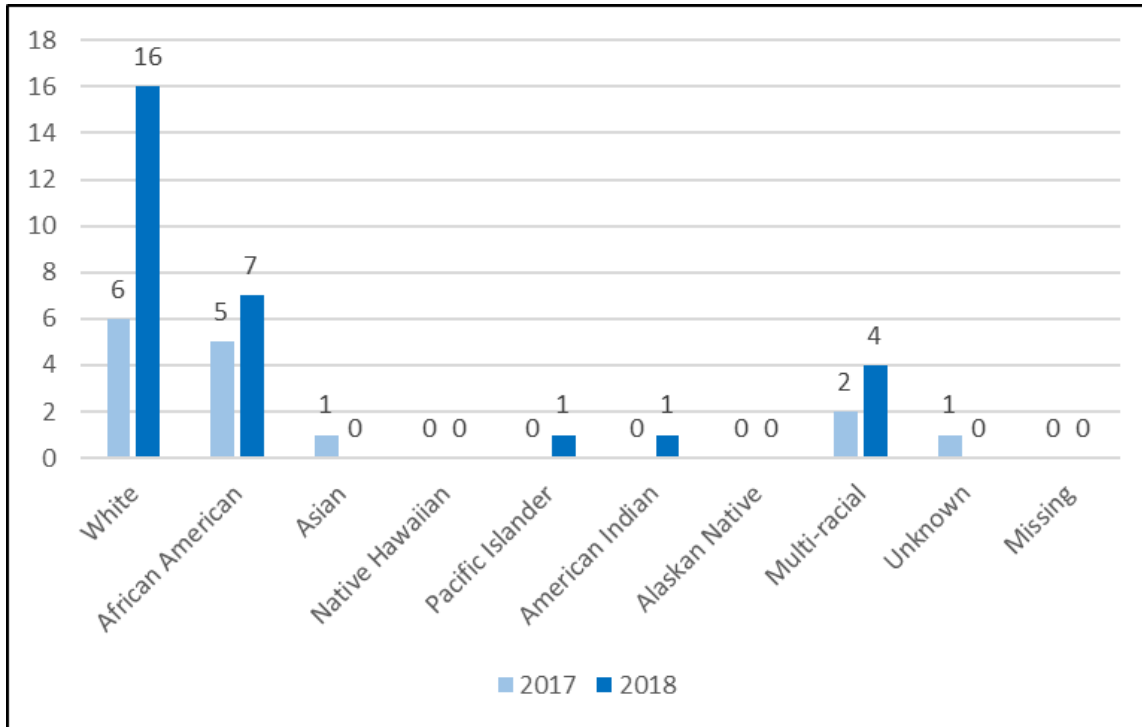
Most of the accident child deaths involving asphyxia in Nevada in 2018 occurred among white children (55.2%) and African American children (24.1%). See Table 18.

Table 18. Number and percent of accident child deaths involving asphyxia in Nevada in 2018 by race of decedent.

	Number	Percent
White	16	55.2%
African American	7	24.1%
Asian	0	0.0%
Native Hawaiian	0	0.0%
Pacific Islander	1	3.4%
American Indian	1	3.4%
Alaskan Native	0	0.0%
Multi-racial	4	13.8%
Unknown	0	0.0%
Missing	0	0.0%
Total	29	100%

As seen in Figure 21, there were fewer accident child deaths involving asphyxia among Asians and those of unknown race in 2018 as compared to 2017.

Figure 21. Number of accident child deaths involving asphyxia in Nevada in 2017 and 2018 by race of decedent.



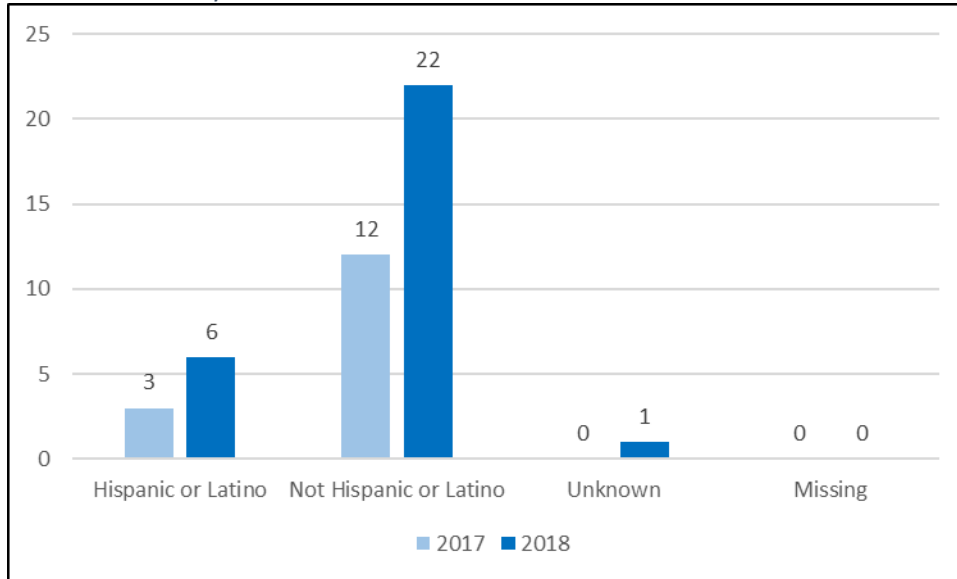
The majority of accident child deaths involving asphyxia in Nevada in 2018 occurred among those that were not Hispanic or Latino (75.9%). See Table 19.

Table 19. Number and percent of accident child deaths involving asphyxia in Nevada in 2018 by Hispanic or Latino ethnicity of the decedent.

	Number	Percent
Hispanic or Latino	6	20.7%
Not Hispanic or Latino	22	75.9%
Unknown	1	3.4%
Missing	0	0.0%
Total	29	100%

As seen in Figure 22, in Nevada in both 2017 and 2018, more accident child deaths involving asphyxia occurred among those that were not Hispanic or Latino as compared to those that were Hispanic or Latino.

Figure 22. Number of accident child deaths involving asphyxia in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



Of the 29 accident child deaths involving asphyxia that occurred in Nevada in 2018, 27 were caused by an unsafe sleeping environment. Some of the circumstances of these deaths, including the objects found in the sleeping area and how the child was placed to sleep, are identified in Table 20.

Table 20. Circumstances of accident child deaths involving asphyxia in Nevada in 2018.

		Number of Cases
Objects/people found in sleeping area	Adult(s)	15
	Child(ren)	4
	Adult(s) and Child(ren)	4
	Animal(s)	0
	Comforter, quilt, or other	19
	Thin blanket/flat sheet	12
	Pillow	17
	Cushion	4
	Boppy or U-shaped pillow	2
	Sleep positioner	1
	Bumper pads	1
	Clothing	6
	Crib railing/side	3
	Wall	3
	Toys	3
	Other	5
Child placed to sleep	With a pacifier	2
	On stomach	2
	On side	6
	In adult bed	15
	On couch	3
	On recliner	0
	On floor	0
	In car seat	1
	On futon	0
	Note: More than one circumstance can apply to a case	

Accidents Involving Drowning

There were eight accident child deaths involving drowning in Nevada in 2018. As seen in Table 21, all of these deaths were of residents of Clark County.

Table 21. Number and percent of accident child deaths involving drowning in Nevada in 2018 by decedent's county of residence.

	Number	Percent
Clark County	8	100%
Washoe County	0	0.0%
Rural Counties	0	0.0%
Total	8	100%

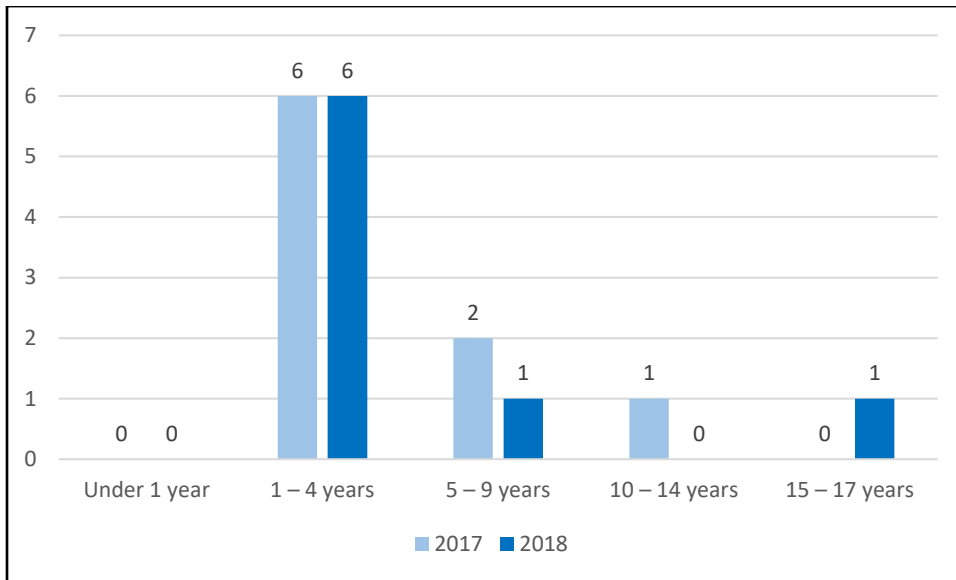
As seen in Table 22, the majority of accident child deaths involving drowning in Nevada in 2018 occurred among children between one and four years of age (75.0%). Within this age range, there were twice as many male deaths as female deaths. Overall, there were more accident child deaths involving drowning among males (75.0%) as compared to females (25.0%).

Table 22. Number and percent of accident child deaths involving drowning in Nevada in 2018 by gender and age range of decedent.

	Male	Female	Unknown	Missing	Total
Under 1 year	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
1 – 4 years	4 (50.0%)	2 (25.0%)	0 (0.0%)	0 (0.0%)	6 (75.0%)
5 – 9 years	1 (12.5%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (12.5%)
10 – 14 years	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
15 – 17 years	1 (12.5%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (12.5%)
Total	6 (75.0%)	2 (25.0%)	0 (0.0%)	0 (0.0%)	8 (100%)

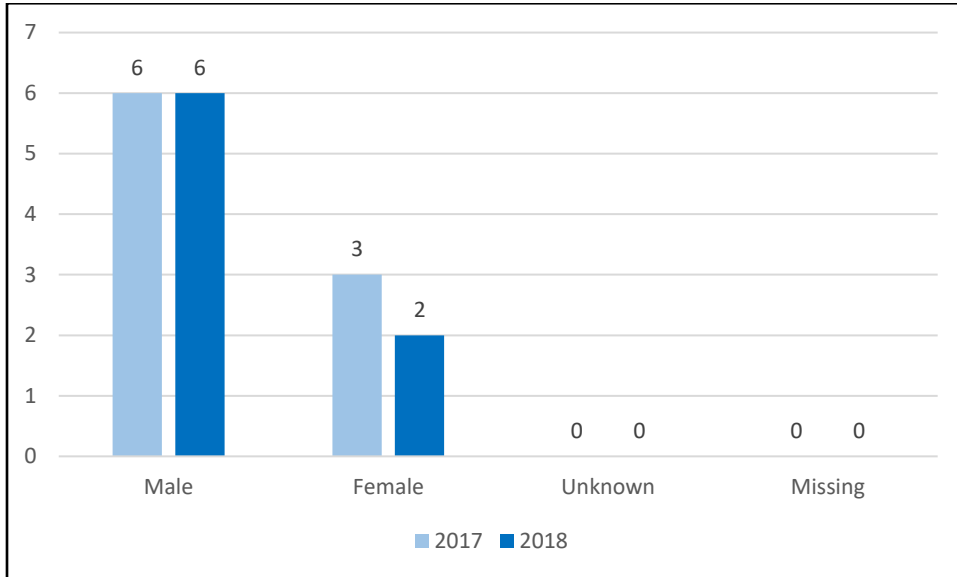
As seen in Figure 23, in Nevada in 2018 as compared to 2017, the number of accident child deaths involving drowning decreased among children 5 – 9 years of age and 10 – 14 years of age. However, there was an increase in the number of accident child deaths involving drowning among children 15 – 17 years of age. The number of accident child deaths involving drowning among children 1 – 4 years of age has remained unchanged since 2016.

Figure 23. Number of accident child deaths involving drowning in Nevada in 2017 and 2018 by age range of decedent.



As seen in Figure 24, in Nevada in 2018, there was one fewer accident child death involving drowning among females than in 2017.

Figure 24. Number of accident child deaths in Nevada involving drowning in 2017 and 2018 by gender of decedent.



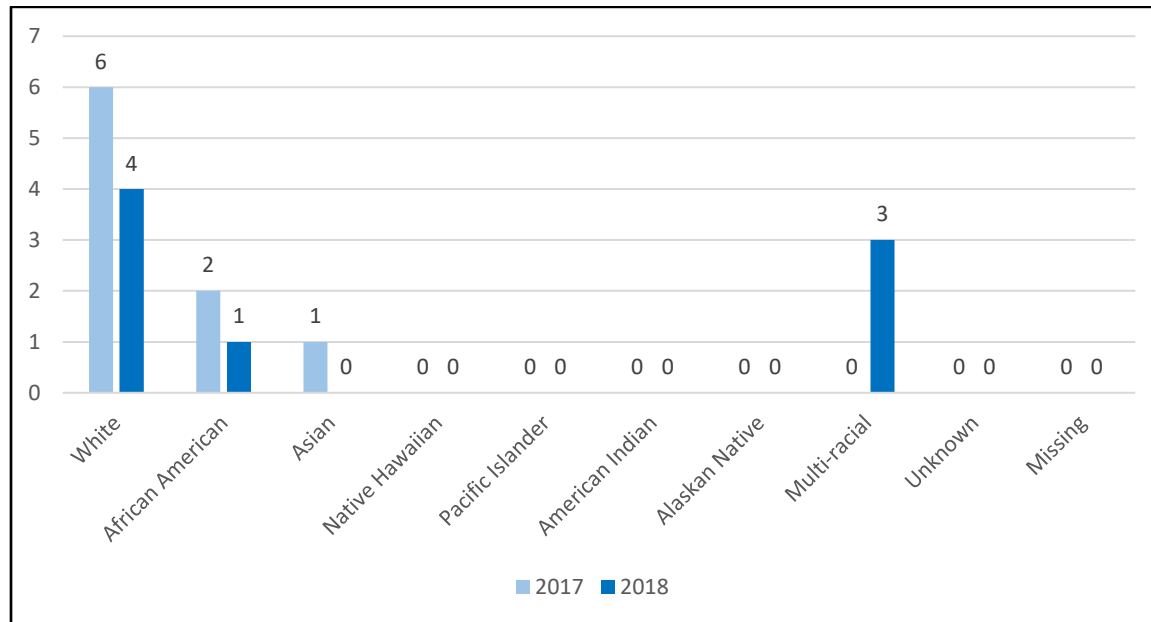
In 2018, the largest percentage of accident child deaths involving drowning in Nevada occurred among white children (50.0%), followed by multi-racial children (37.5%), and African American children (12.5%). See Table 23.

Table 23. Number and percent of accident child deaths involving drowning in Nevada in 2018 by race of decedent.

	Number	Percent
White	4	50.0%
African American	1	12.5%
Asian	0	0.0%
Native Hawaiian	0	0.0%
Pacific Islander	0	0.0%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	3	37.5%
Unknown	0	0.0%
Missing	0	0.0%
Total	8	100%

As seen in Figure 25, there were more accident child deaths involving drowning among multi-racial children in Nevada in 2018 as compared to 2017 but fewer deaths among white, African American, and Asian children.

Figure 25. Number of accident child deaths involving drowning in Nevada in 2017 and 2018 by race of decedent.



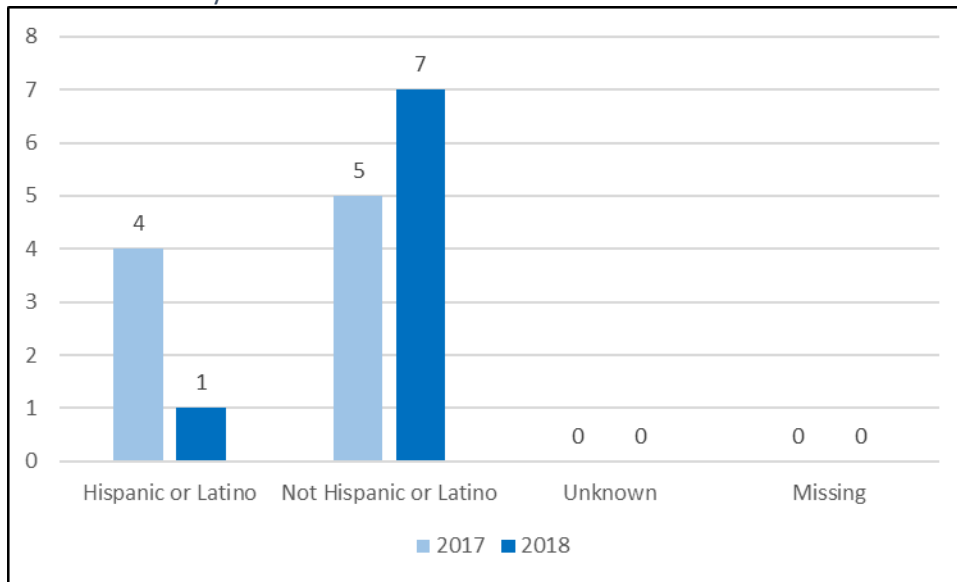
In Nevada in 2018, the majority of the accident child deaths involving drowning were among those who were not Hispanic or Latino (87.5%). See Table 24.

Table 24. Number and percent of accident child deaths involving drowning in Nevada in 2018 by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	1	12.5%
Not Hispanic or Latino	7	87.5%
Unknown	0	0.0%
Missing	0	0.0%
Total	8	100%

As seen in Figure 26, in Nevada in 2018 as compared to 2017, there were more accident child deaths involving drowning among those who were not Hispanic or Latino and fewer deaths among those who were Hispanic or Latino.

Figure 26. Number of accident child deaths involving drowning in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



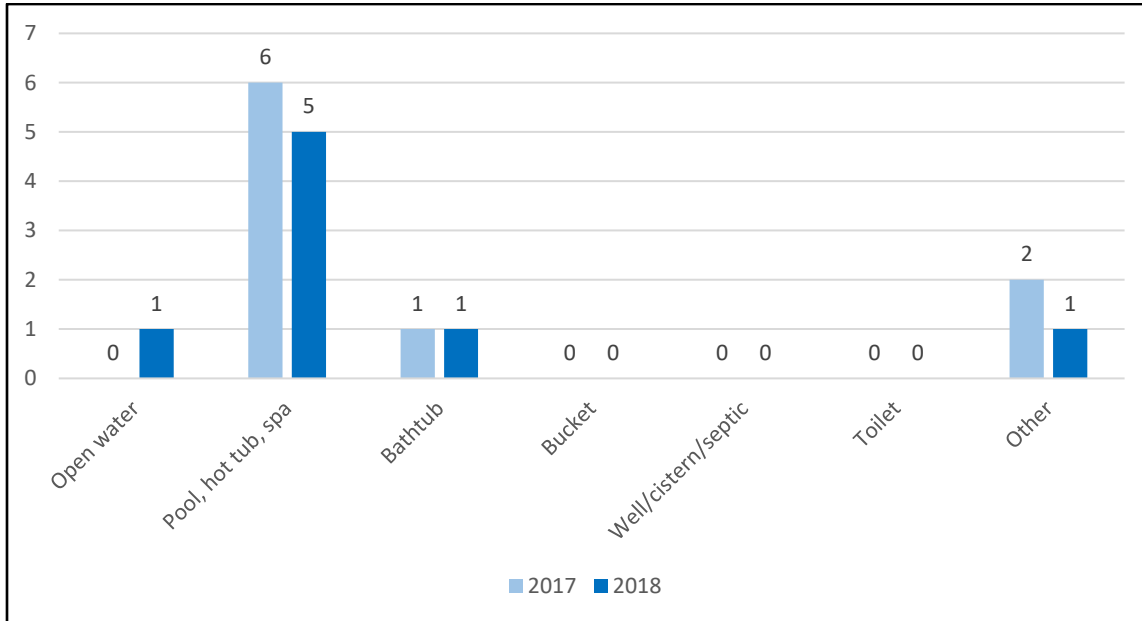
As seen in Table 25, the majority of accident child deaths involving drowning in Nevada in 2018 occurred in pools, hot tubs, and spas (62.5%).

Table 25. Number and percent of accident child deaths involving drowning in Nevada in 2018 by drowning location.

	Number	Percent
Open water	1	12.5%
Pool, hot tub, spa	5	62.5%
Bathtub	1	12.5%
Bucket	0	0.0%
Well/cistern/septic	0	0.0%
Toilet	0	0.0%
Other	1	12.5%
Total	8	100%

As seen in Figure 27, accident child deaths involving drowning in Nevada in 2018 occurred in similar locations as those that occurred in 2017.

Figure 27. Number of accident child deaths involving drowning in Nevada in 2017 and 2018 by drowning location.



In half (50.0%) of the accident child deaths involving drowning in Nevada in 2018, the child was not able to swim. Refer to Table 26 regarding the swimming ability of the children that died in accidents involving drowning in Nevada in 2018.

Table 26. Swimming ability of children that died in Nevada in 2018 in accidents involving drowning.

	Number	Percent
Child was able to swim	2	25.0%
Child was not able to swim	4	50.0%
Child's swimming ability was unknown	1	12.5%
Missing	1	12.5%
Total	8	100%

Details regarding the safety factors, safety breaches, and rescue efforts related to the accident child deaths involving drowning in Nevada in 2018 are identified in Table 27.

Table 27. Number of accident child deaths involving drowning in Nevada in 2018 with the listed contributing factors.

		Number of cases
Safety Factors	Child had a personal flotation device	0
	No barriers to swimming area	4
	Fence around swimming area	1
	Gate to swimming area	0
	Door to swimming area	0
	Alarm for swimming area	0
	Cover for swimming pool, hot tub, or spa	0
Safety Breaches	No barrier breached	5
	Gate left open	0
	Gate unlocked	0
	Gate latch failure	0
	Gap in gate	0
	Child climbed fence to access swimming area	1
	Gap in fence	0
	Damaged fence	0
	Fence too short	0
	Door left open	0
	Door unlocked	0
	Door broken	0
	Door screen torn	0
	Door closer failure	0
	Window left open	0
	Alarm not working	0
	Alarm not answered	0
Cover left off	0	
Cover not locked	0	
Rescue Efforts	Rescue attempt made	7
	Rescue attempt made by parent	1
	Rescue attempt made by other child	2
	Rescue attempt made by lifeguard	0
	Rescue attempt made by bystander	1
	Rescue attempt made by other	4
Appropriate rescue equipment present	0	
Note: More than one factor can apply to a case		

Accidents Involving Drug Overdose

In Nevada in 2018, there were no accident child deaths involving drug overdose. In comparison, there were three accident child deaths involving drug overdose in 2017.

Motor Vehicle Accidents

There were 15 motor vehicle accident child deaths in Nevada in 2018. As seen in Table 28, the majority of these deaths occurred among children that resided in Clark County (73.3%). See Appendix B for details regarding all counties.

Table 28. Number and percent of motor vehicle accident child deaths in Nevada in 2018 by decedent's county of residence.

	Number	Percent
Clark County	11	73.3%
Washoe County	2	13.3%
Rural Counties	2	13.3%
Total	15	100%

Nationally, in 2018, with the exception of those 10 – 14 years of age, the percent of motor vehicle accident child deaths incrementally increased across each age range. The percent of motor vehicle accident child deaths among those 10 – 14 years of age was less than the percent of motor vehicle accident child deaths among those 5 – 9 years of age and those 15 – 17 years of age.¹⁸ As seen in Table 29, a similar trend occurred in Nevada in 2018.

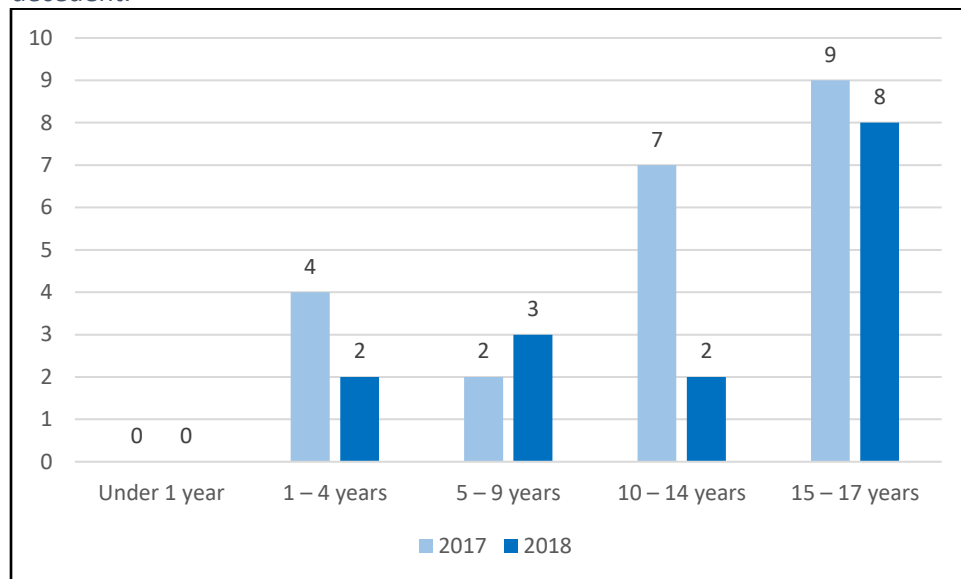
Table 29. Number and percent of motor vehicle accident child deaths in Nevada in 2018 by age range of decedent.

	Number	Percent
Under 1 year	0	0.0%
1 – 4 years	2	13.3%
5 – 9 years	3	20.0%
10 – 14 years	2	13.3%
15 – 17 years	8	53.3%
Total	15	100%

As seen in Figure 28, there was a decrease in the number of motor vehicle accident child deaths in Nevada in 2018 as compared to 2017 among those 1 – 4 years of age, 10 – 14 years of age, and 15 – 17 years of age. In contrast, there was an increase in the number of motor vehicle accident child deaths in Nevada in 2018 as compared to 2017 among those 5 – 9 years of age.

¹⁸ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 3, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Figure 28. Number of motor vehicle accident child deaths in Nevada in 2017 and 2018 by age range of decedent.



In 2018, two-thirds of motor vehicle accident child deaths in Nevada occurred among males (66.7%). See Table 30. Nationally, there were also more motor vehicle accident child deaths that occurred among males as compared to females in 2018 with 57.5 percent of deaths occurring among males and 42.5 percent occurring among females.¹⁹

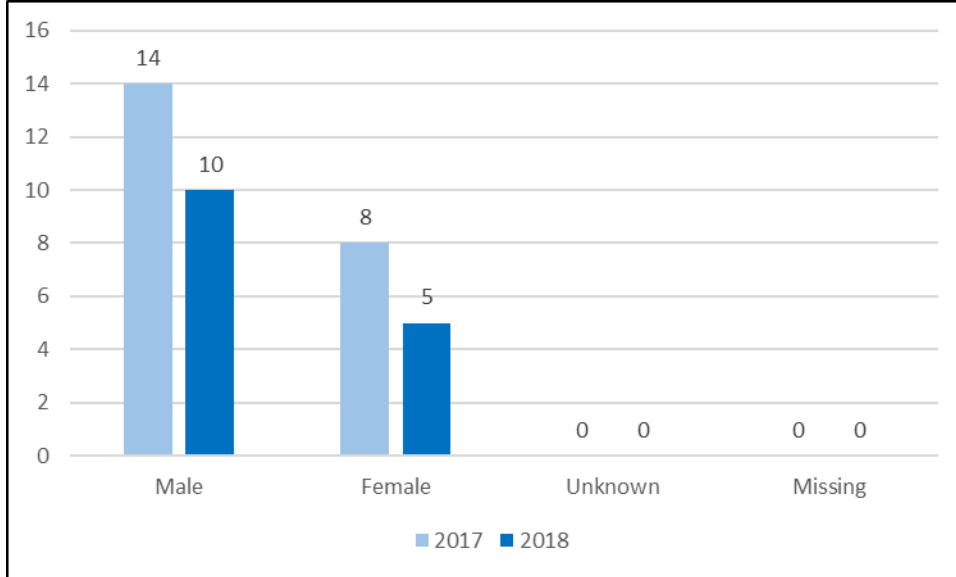
Table 30. Number and percent of motor vehicle accident child deaths in Nevada in 2018 by gender of decedent.

	Number	Percent
Male	10	66.7%
Female	5	33.3%
Unknown	0	0.0%
Missing	0	0.0%
Total	15	100%

As seen in Figure 29, in Nevada in 2017 and 2018, there were more motor vehicle accident child deaths that occurred among males as compared to females. However, there were fewer motor vehicle accident child deaths overall in 2018 as compared to 2017.

¹⁹ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 4, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Figure 29. Number of motor vehicle accident child deaths in Nevada in 2017 and 2018 by gender of decedent.



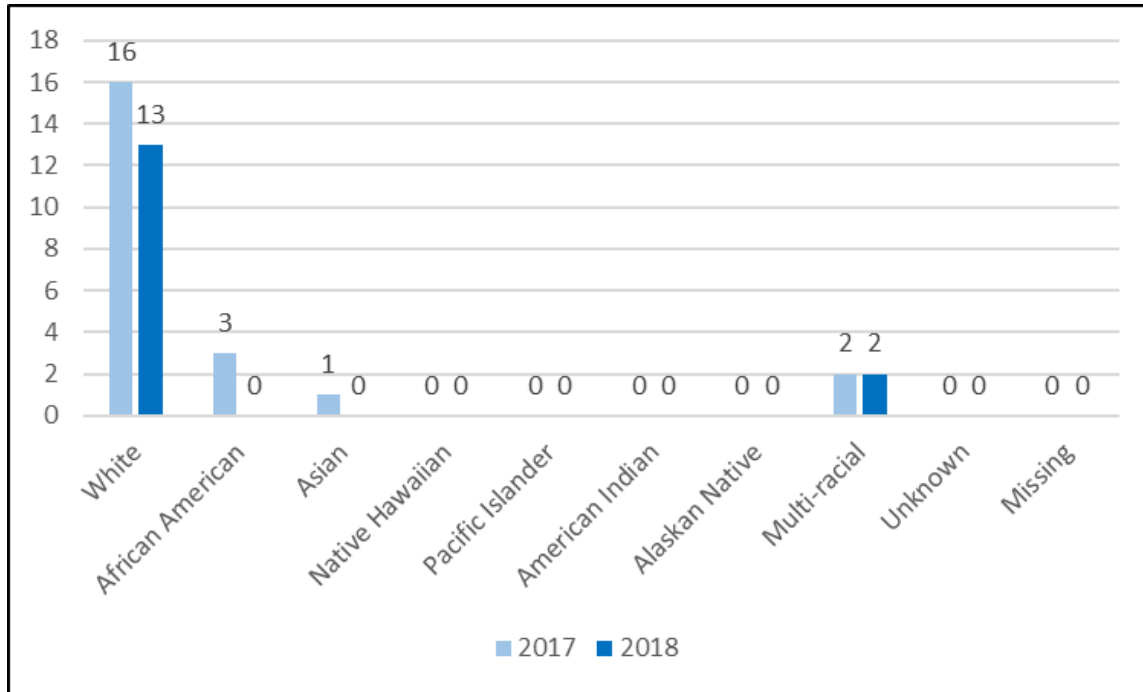
All of the motor vehicle accident child deaths in Nevada in 2017 occurred among white children (86.7%) and multi-racial children (13.3%). See Table 31.

Table 31. Number and percent of motor vehicle accident child deaths in Nevada in 2018 by race of decedent.

	Number	Percent
White	13	86.7%
African American	0	0.0%
Asian	0	0.0%
Native Hawaiian	0	0.0%
Pacific Islander	0	0.0%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	2	13.3%
Unknown	0	0.0%
Missing	0	0.0%
Total	15	100%

As seen in Figure 30, there were fewer motor vehicle accident child deaths that occurred among white, African American, and Asian children in Nevada in 2018 as compared to 2017. The number of motor vehicle accident child deaths among multi-racial children in Nevada remained unchanged from 2017 to 2018.

Figure 30. Number of motor vehicle accident child deaths in Nevada in 2017 and 2018 by race of decedent.



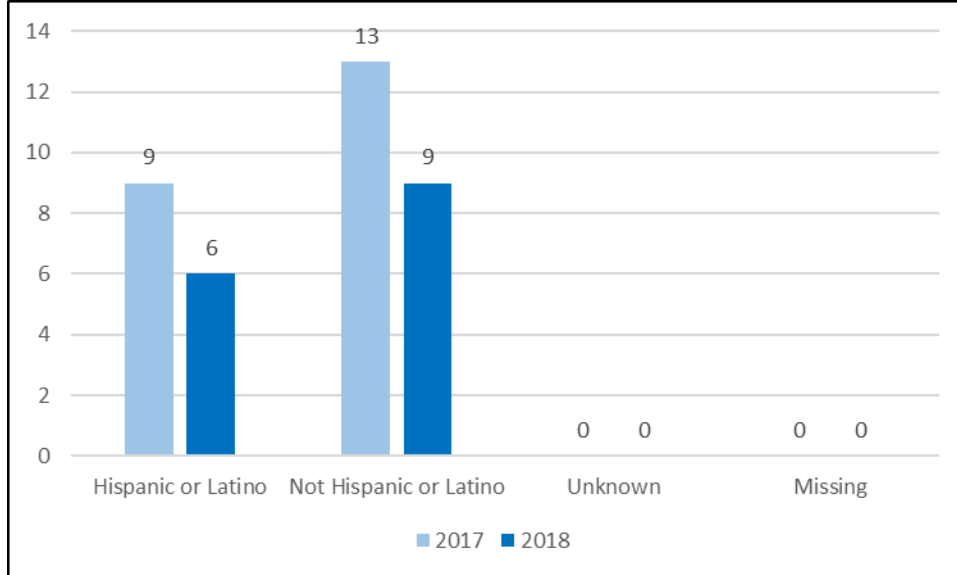
As seen in Table 32, the majority of motor vehicle accident child deaths in Nevada in 2018 occurred among those that were not Hispanic or Latino (60.0%).

Table 32. Number and percent of motor vehicle accident child deaths in Nevada in 2018 by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	6	40.0%
Not Hispanic or Latino	9	60.0%
Unknown	0	0.0%
Missing	0	0.0%
Total	15	100%

As seen in Figure 31, there were fewer motor vehicle accident child deaths that occurred among those who were not Hispanic or Latino and those that were Hispanic or Latino in Nevada in 2018 as compared to 2017.

Figure 31. Number of motor vehicle child deaths in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



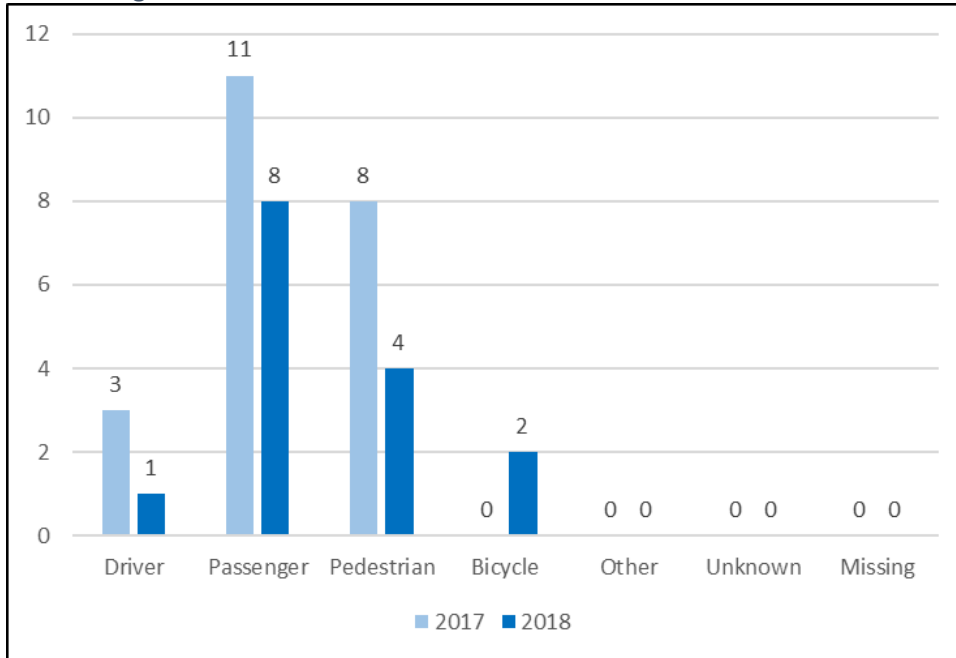
More than half of the motor vehicle accident child deaths in Nevada in 2018 occurred among those who were a passenger in the motor vehicle (53.3%). The next largest percentage of deaths occurred among those who were pedestrians (26.7%), followed by those who were on a bicycle (13.3%), and those who were drivers of the motor vehicle (6.7%). See Table 33.

Table 33. Number and percent of motor vehicle accident child deaths in Nevada in 2018 by position of child during the accident.

	Number	Percent
Driver	1	6.7%
Passenger	8	53.3%
Pedestrian	4	26.7%
Bicycle	2	13.3%
Other	0	0.0%
Unknown	0	0.0%
Missing	0	0.0%
Total	15	100%

As seen in Figure 32, there were fewer motor vehicle accident child deaths in Nevada among drivers, passengers, and pedestrians in 2018 as compared to 2017. However, there were more motor vehicle accident child deaths among children on bicycles.

Figure 32. Number of motor vehicle accident child deaths in Nevada in 2017 and 2018 by position of the child during the accident.



All of the motor vehicle accident child deaths that occurred among passengers in Nevada in 2018 were of those that were five years of age or older. The two bicycle passenger deaths that occurred in Nevada in 2018 were among those 5 – 9 years of age. See Table 34.

Table 34. Number of motor vehicle accident child deaths in Nevada in 2018 by position of the child during the accident and age range of the decedent.

	Driver	Passenger	Pedestrian	Bicycle	Unknown	Missing	Total
Less than 1 year	0	0	0	0	0	0	0
1 – 4 years	0	0	2	0	0	0	2
5 – 9 years	0	1	0	2	0	0	3
10 – 14 years	0	1	1	0	0	0	2
15 – 17 years	1	6	1	0	0	0	8
Total	1	8	4	2	0	0	15

Details regarding the causes of the motor vehicle accident child deaths in Nevada in 2018 can be seen in Table 35.

Table 35. Causes of motor vehicle accident child deaths in Nevada in 2018.

	Number of cases
Speeding over limit	6
Unsafe speed for conditions	1
Recklessness	2
Ran stop sign/red light	3
Driver distraction	1
Inexperienced driver	1
Mechanical failure	1
Poor tires	1
Poor weather	1
Poor visibility	1
Drug or alcohol use	3
Fatigue/sleeping	0
Medical event	1
Back over	0
Rollover	1
Poor sightline	1
Car changing lanes	0
Road hazard	0
Animal in road	0
Cell phone use while driving	0
Racing	0
Other driver error	1
Other cause	4
Unknown	1
Note: More than one cause may apply to a case	

Among the motor vehicle accident child deaths that occurred in Nevada in 2018, the child was responsible in one case, the child's driver was responsible in six cases, and the other driver was responsible in six cases. Table 36 identifies some of the factors contributing to the motor vehicle accident child deaths based on who was responsible.

Table 36. Number of cases in which the following were contributing factors in motor vehicle accident child deaths in Nevada in 2018 by person responsible for the accident.

	Child Responsible	Child's Driver Responsible	Other Driver Responsible
Alcohol or drug impairment	0	3	0
No license	0	2	1
Learners permit	0	0	0
Graduated license	0	0	0
Full license, not graduated	1	2	4
Full license, restricted	0	0	0
Suspended license	0	0	0
Safety certificate (if recreational vehicle)	0	0	0
In violation of graduated license rules	0	0	0
Note: More than one contributing factor may apply to a case			

Homicides

There were 27 homicide child deaths in Nevada in 2018. As seen in Table 37, in 85.2 percent of the homicide child deaths in Nevada in 2018, the decedent resided in Clark County. See Appendix B for details regarding all counties.

Table 37. Number and percent of homicide child deaths in Nevada in 2018 by decedent's county of residence.

	Number	Percent
Clark County	23	85.2%
Washoe County	1	3.7%
Rural Counties	1	3.7%
Out of state	2*	7.4%
Unknown	0	0.0%
Missing	0	0.0%
Total	27	100%
*Reviewed by the Clark County CDR Team		

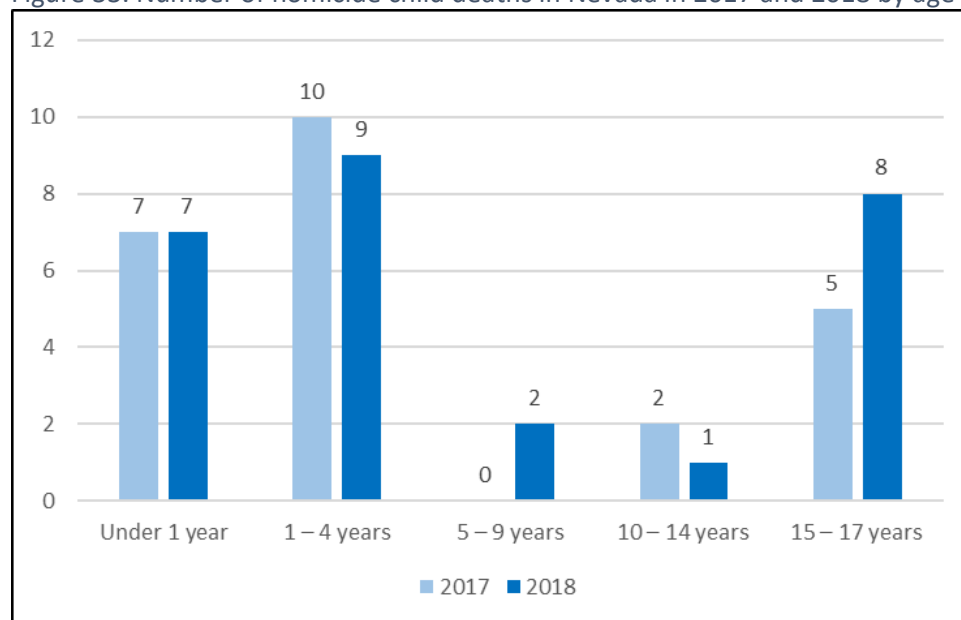
The largest percentage of homicide child deaths in Nevada in 2018 occurred among those 1 – 4 years of age (33.3%), followed by those 15 – 17 years of age (29.6%), and those under one year of age (25.9%). See Table 38.

Table 38. Number and percent of homicide child deaths in Nevada in 2018 by age range of decedent.

	Number	Percent
Under 1 year	7	25.9%
1 – 4 years	9	33.3%
5 – 9 years	2	7.4%
10 – 14 years	1	3.7%
15 – 17 years	8	29.6%
Total	27	100%

As seen in Figure 33, more homicide child deaths occurred in Nevada in 2018 among those 5 – 9 years of age and 15 – 17 years of age as compared to 2017. In contrast, there were fewer homicide child deaths that occurred among those 1 – 4 years of age and those 10 – 14 years of age in 2018 as compared to 2017.

Figure 33. Number of homicide child deaths in Nevada in 2017 and 2018 by age range of decedent.



Two-thirds of the homicide child deaths in Nevada in 2018 occurred among males. See Table 39. This finding is consistent with the national data in which 68.6 percent of homicide child deaths occurred among males.²⁰

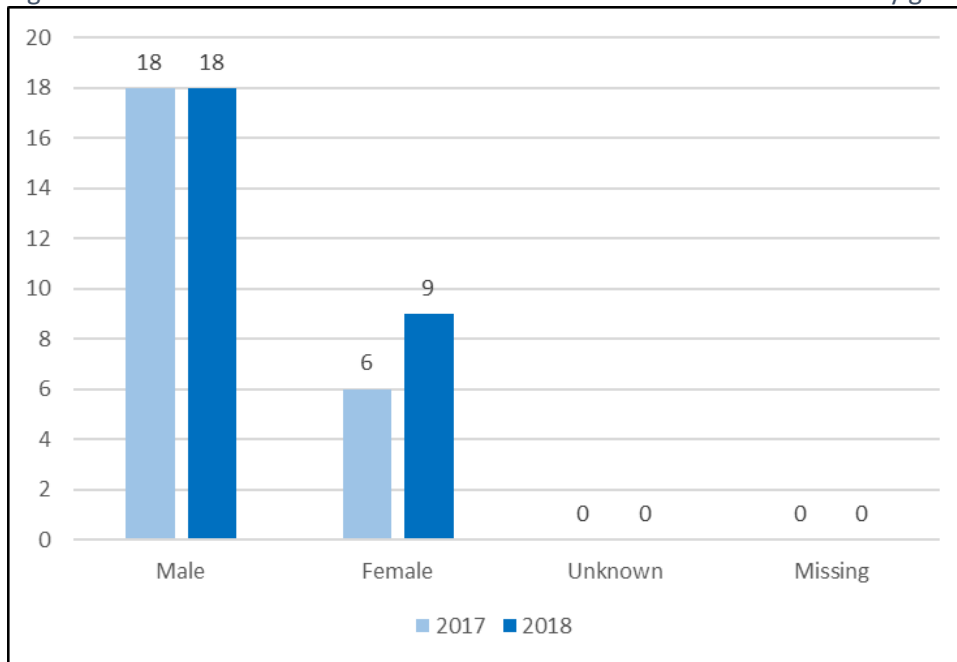
Table 39. Number and percent of homicide child deaths in Nevada in 2018 by gender of decedent.

	Number	Percent
Male	18	66.7%
Female	9	33.3%
Unknown	0	0.0%
Missing	0	0.0%
Total	27	100%

As seen in Figure 34, the increase in homicide child deaths in 2018 as compared to 2017 was driven by the increase in the number of homicide child deaths among females. The number of homicide child deaths in Nevada among males remained unchanged from 2017 to 2018.

²⁰ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 4, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Figure 34. Number of homicide child deaths in Nevada in 2017 and 2018 by gender of decedent.



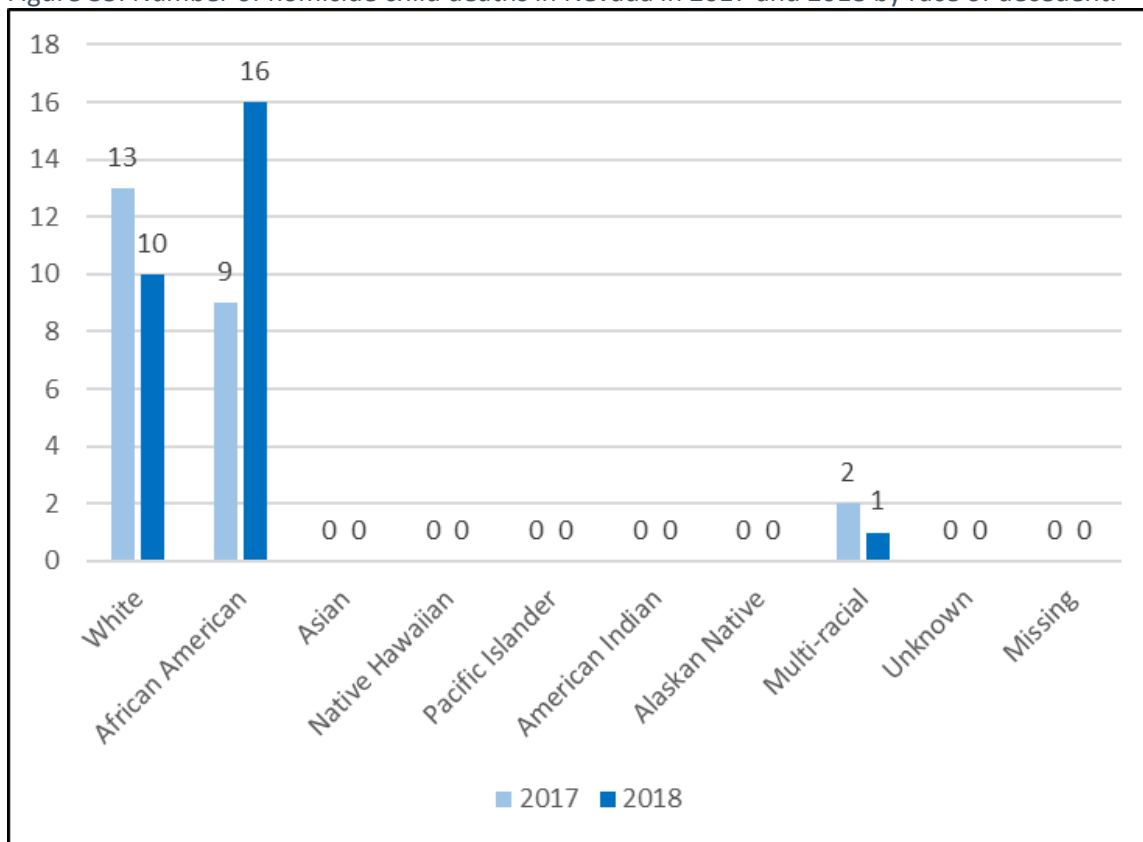
As seen in Table 40, more than half of the homicide child deaths in Nevada in 2018 occurred among African American children (59.3%). The next largest percentage of homicide child deaths occurred among white children (37.0%), followed by multi-racial children (3.7%).

Table 40. Number and percent of homicide child deaths in Nevada in 2018 by race of decedent.

	Number	Percent
White	10	37.0%
African American	16	59.3%
Asian	0	0.0%
Native Hawaiian	0	0.0%
Pacific Islander	0	0.0%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	1	3.7%
Unknown	0	0.0%
Missing	0	0.0%
Total	27	100%

There were more homicide child deaths among African American children in Nevada in 2018 as compared to 2017. In contrast, there were fewer homicide child deaths among white and multi-racial children in Nevada in 2018 as compared to 2017. See Figure 35.

Figure 35. Number of homicide child deaths in Nevada in 2017 and 2018 by race of decedent.



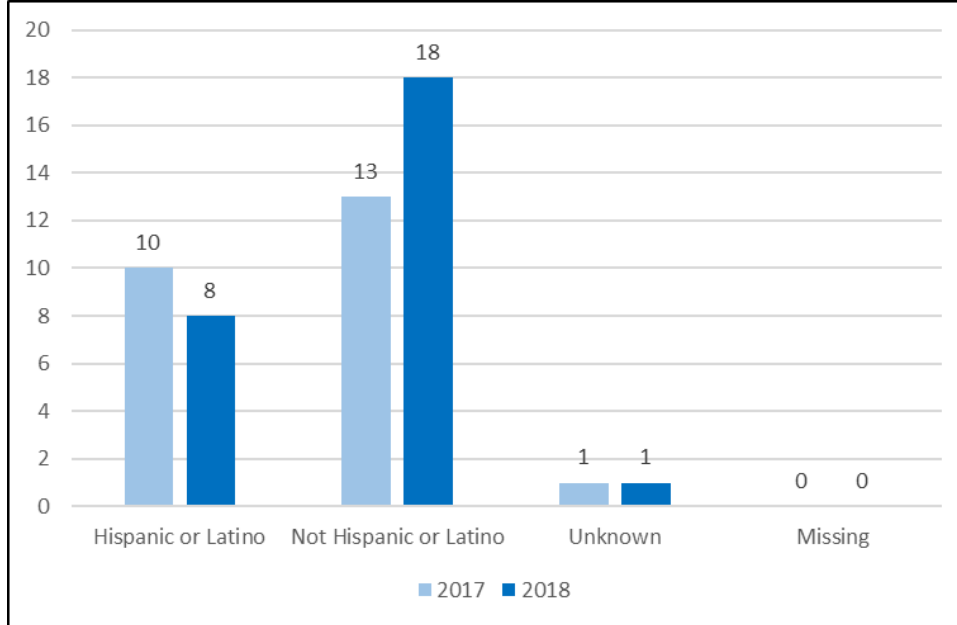
Two-thirds of the homicide child deaths in Nevada in 2018 were among those that were identified as not Hispanic or Latino (66.7%). See Table 41.

Table 41. Number and percent of homicide child deaths in Nevada in 2018 by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	8	29.6%
Not Hispanic or Latino	18	66.7%
Unknown	1	3.7%
Missing	0	0.0%
Total	27	100%

As seen in Figure 36, in Nevada, the number of homicide child deaths among those that were Hispanic or Latino decreased in 2018 as compared to 2017. However, the number of homicide child deaths among those that were not Hispanic or Latino increased in Nevada in 2018 as compared to 2017.

Figure 36. Number of homicide child deaths in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



As seen in Table 42, the largest percentage of homicide child deaths in Nevada in 2018 were the result of a firearm (37.0%) or a person’s body part (37.0%).

Table 42. Number and percent of homicide child deaths in Nevada in 2018 by type of weapon.

	Number	Percent
Firearm	10	37.0%
Sharp instrument	0	0.0%
Blunt instrument	0	0.0%
Person’s body part	10	37.0%
Other	1	3.7%
Unknown	6	22.2%
Total	27	100%

As seen in Table 43, in 10 of the homicide child deaths in Nevada in 2018, a biological parent handled the fatal weapon.

Table 43. Person handling the fatal weapon in homicide child deaths in Nevada in 2018.

	Number of Cases
Decedent (self)	0
Biological parent	10
Adoptive parent	0
Step-parent	0
Foster parent	0
Mother’s partner	5
Father’s partner	0
Sibling	0

Other relative	2
Friend	0
Acquaintance	0
Child's boyfriend/girlfriend	1
Institutional staff	0
Neighbor	0
Rival gang member	5
Stranger	2
Other	2
Unknown	1
Missing	1
Note: More than one person could have handled the weapon	

Table 44 identifies how the fatal weapon was being used at the time of homicide child deaths in which the fatal weapon was a firearm in Nevada in 2018.

Table 44. How the fatal weapon was being used at the time of homicide child deaths by firearm in Nevada in 2018.

	Number of Cases
Self-injury	2
Commission of a crime	21
Drug dealing/trading	2
Drive-by shooting	2
Random violence	2
Child was a bystander	1
Argument	1
Jealousy	0
Intimate partner violence	0
Hate crime	0
Target shooting	0
Playing with the weapon	0
Weapon mistaken for a toy	0
Showing the gun to others	0
Russian Roulette	1
Gang-related activity	5
Self-defense	0
Cleaning the weapon	0
Other	8
Unknown	2
Note: More than one use can apply to a case	

Homicide Deaths in which Abuse or Neglect Caused or Contributed

Of the 27 homicide child deaths in Nevada in 2018, there were 19 in which abuse or neglect caused or contributed to the death. As seen in Table 45, in 78.9 percent of these homicide child deaths, the decedent resided in Clark County. See Appendix B for details regarding all counties.

Table 45. Number and percent of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 by decedent’s county of residence.

	Number	Percent
Clark County	15	78.9%
Washoe County	1	5.3%
Rural Counties	1	5.3%
Out of state	2*	10.5%
Unknown	0	0.0%
Missing	0	0.0%
Total	19	100%
*Reviewed by the Clark County CDR Team		

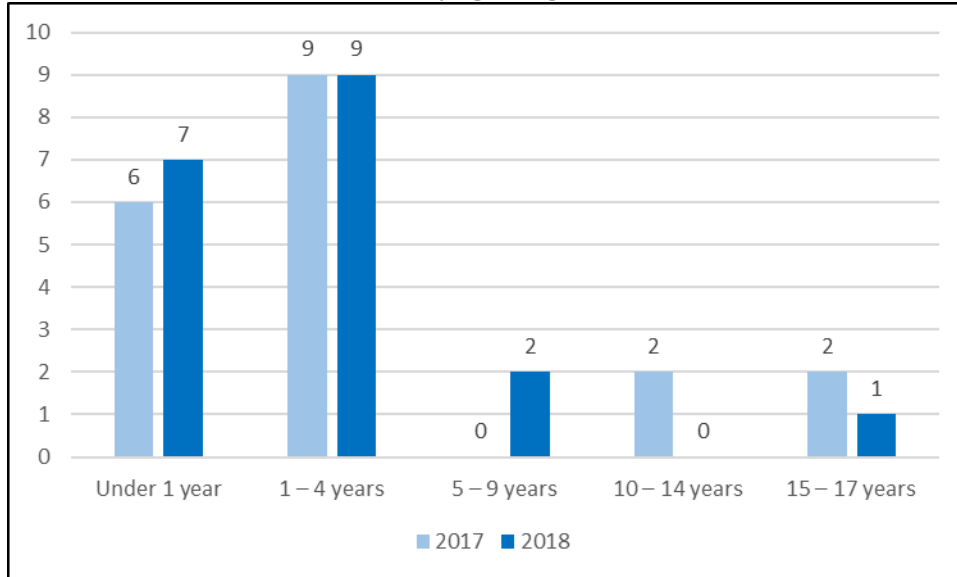
The largest percentage of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 occurred among those 1 – 4 years old (47.4%). The next largest percentage occurred among those under one year of age (36.8%). See Table 46.

Table 46. Number and percent of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 by age range of decedent.

	Number	Percent
Under 1 year	7	36.8%
1 – 4 years	9	47.4%
5 – 9 years	2	10.5%
10 – 14 years	0	0.0%
15 – 17 years	1	5.3%
Total	19	100%

As seen in Figure 37, there were more homicide child deaths in which abuse or neglect caused or contributed to the death among those under one year of age and 5 – 9 years of age in Nevada in 2018 as compared to 2017.

Figure 37. Number of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2017 and 2018 by age range of decedent.



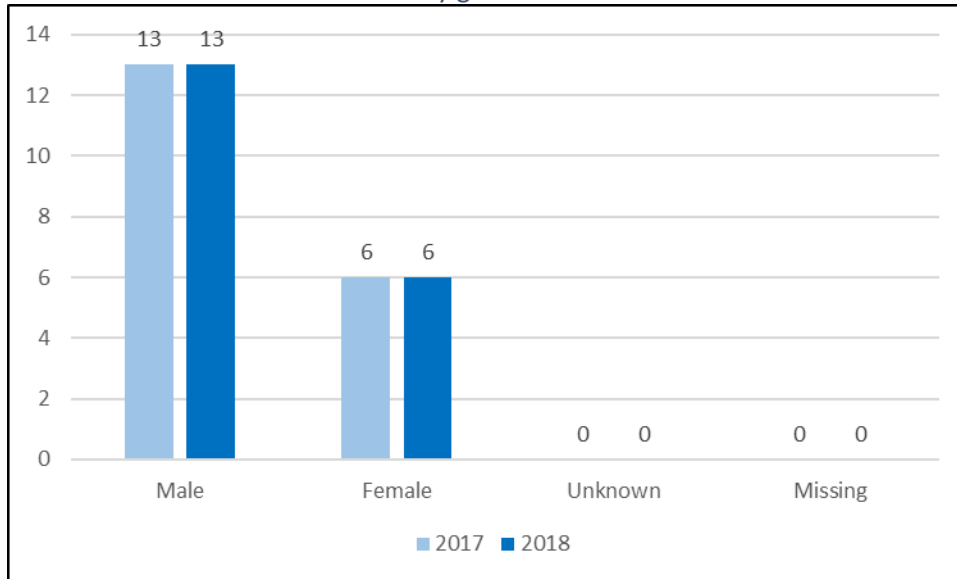
In Nevada in 2018, the majority of homicide child deaths in which abuse or neglect caused or contributed to the death occurred among males (68.4%). See Table 47.

Table 47. Number and percent of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 by gender of decedent.

	Number	Percent
Male	13	68.4%
Female	6	31.6%
Unknown	0	0.0%
Missing	0	0.0%
Total	19	100%

As seen in Figure 38, the number of male and female homicide child deaths in which abuse or neglect caused or contributed to the death remained unchanged in Nevada in 2018 as compared to 2017.

Figure 38. Number of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2017 and 2018 by gender of decedent.



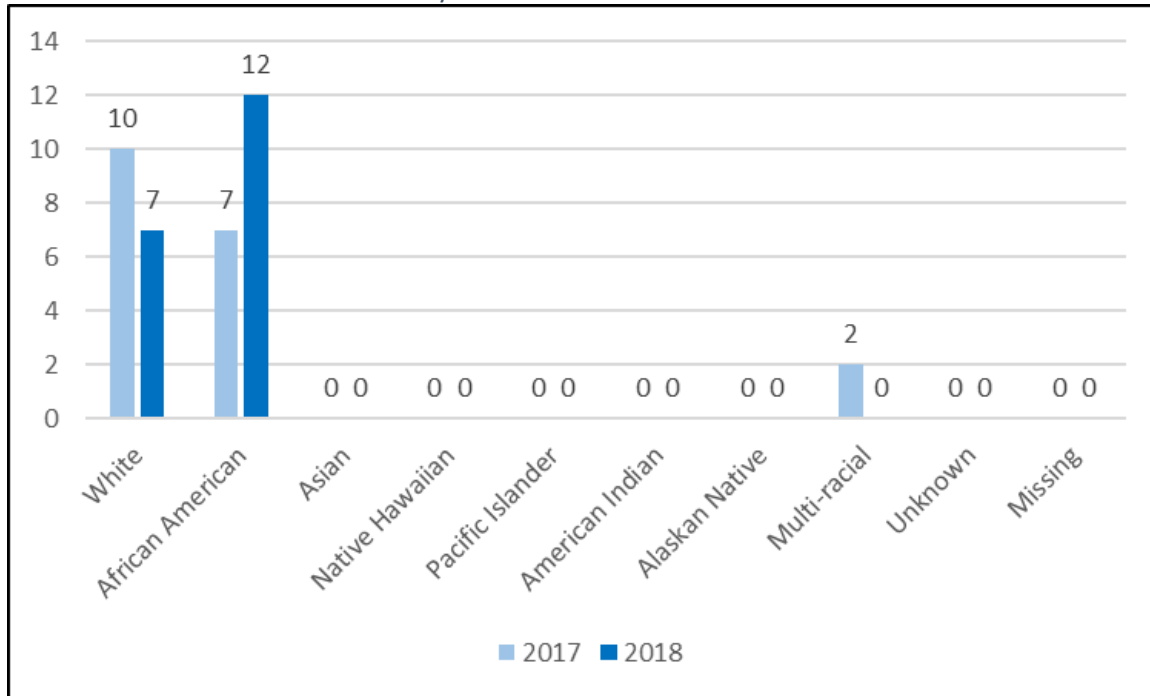
As seen in Table 48, in Nevada in 2018, all of the homicide child deaths in which abuse or neglect caused or contributed to the death occurred among African American (63.2%) and white children (36.8%).

Table 48. Number and percent of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 by race of decedent.

	Number	Percent
White	7	36.8%
African American	12	63.2%
Asian	0	0.0%
Native Hawaiian	0	0.0%
Pacific Islander	0	0.0%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	0	0.0%
Unknown	0	0.0%
Missing	0	0.0%
Total	19	100%

There were more homicide child deaths in which abuse or neglect caused or contributed to the death among African American children in Nevada in 2018 as compared to 2017. However, there were fewer child deaths among white children and multi-racial children in 2018 as compared to 2017. See Figure 39.

Figure 39. Number of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2017 and 2018 by race of decedent.



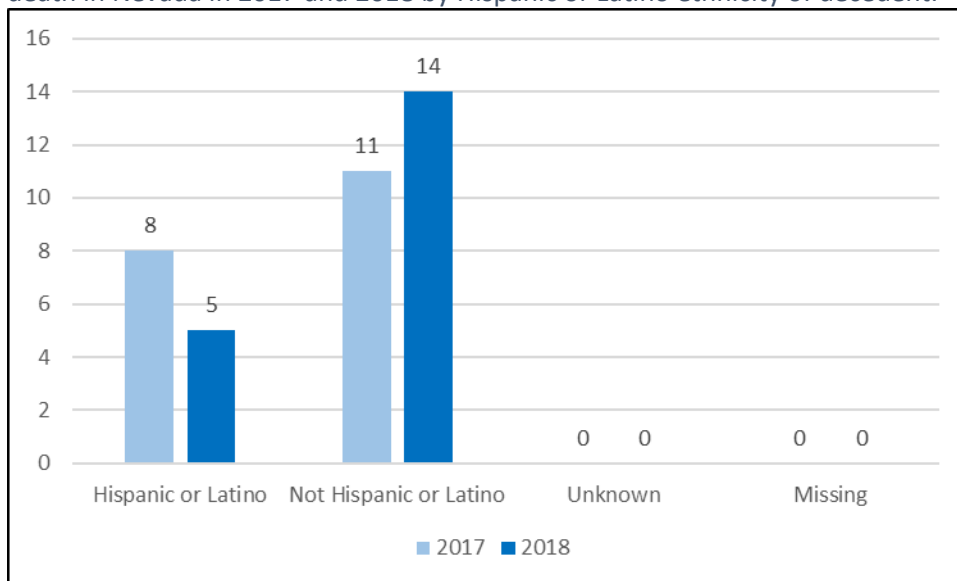
As seen in Table 49, almost three-fourths (73.7%) of the homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 were among those identified as not Hispanic or Latino.

Table 49. Number and percent of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	5	26.3%
Not Hispanic or Latino	14	73.7%
Unknown	0	0.0%
Missing	0	0.0%
Total	19	100%

As seen in Figure 40, in Nevada in 2018 as compared to 2017, the number of homicide child deaths in which abuse or neglect caused or contributed to the death increased among those that were not Hispanic or Latino and decreased among those that were Hispanic or Latino.

Figure 40. Number of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



The types of abuse and neglect indicated in the homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 are shown in Table 50. Abusive head trauma was indicated in ten deaths, other abuse was indicated in nine deaths, and beating/kicking was indicated in five deaths. “Other abuse” is a response option in the data collection tool and includes types of abuse not listed in Table 50. In Nevada in 2018, these types of abuse specifically included assault, blunt force trauma, prolonged abuse and neglect, severe malnutrition, and smothering.

Table 50. Types of abuse and neglect in cases of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018.

		Number of Cases
Type of Abuse	Abusive head trauma	10
	Chronic Battered Child Syndrome	3
	Beating/kicking	5
	Scalding/burning	1
	Munchausen Syndrome by Proxy	0
	Sexual assault	0
	Other abuse	9
	Unknown abuse	1
Type of Neglect	Exposure to hazards	0
	Failure to provide necessities – Food	1
	Failure to provide necessities – Shelter	0
	Failure to provide necessities – Other	0
	Failure to seek/follow treatment	0
	Failure to provide supervision	0

Note: More than one type of abuse or neglect can occur in a case

Details regarding the reported events that triggered the physical abuse in cases of homicide child deaths in which abuse caused or contributed to the death in Nevada in 2018 can be seen in Table 51.

Table 51. Events reported as triggering physical abuse in cases of homicide child deaths in which abuse caused or contributed to the death in Nevada in 2018.

	Number of Cases
Crying	2
Toilet training mishap	0
Disobedience	1
Feeding problems	0
Domestic argument	0
None	0
Other	0
Unknown	16
Note: More than one event can be reported for a case	

The historical type of abuse or neglect experienced by the decedent in cases of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 can be seen in Table 52.

Table 52. History of abuse and neglect of the decedent in cases of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018.

	Number of Cases
History of physical maltreatment	3
History of neglect	2
History of sexual maltreatment	0
History of emotional maltreatment	0
Note: More than one type of abuse or neglect can occur for a case	

Table 53 details the CPS involvement in cases of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018.

Table 53. CPS involvement in cases of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018.

	Number of Cases
CPS record check conducted	19
Evidence of prior abuse	7
CPS action taken as a result of the death	15
Open CPS case with child at time of death	0
Child ever placed in foster care	1
Note: More than one type of involvement can apply to a case	

In ten of the homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018, there was child abuse in the form of abusive head trauma (52.6%). The impact of this abusive trauma is noted in Table 54.

Table 54. Abusive head trauma in cases of homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018.

	Number of Cases with a yes response
For abusive head trauma, were there retinal hemorrhages?	8
For abusive head trauma, was the child shaken?	6
If the child was shaken, was there impact?	0
Note: More than one condition can apply to a case	

Suicides

There were 23 suicide child deaths in Nevada in 2018. As seen in Table 55, of the suicide child deaths in Nevada in 2018, 82.6 percent of the decedents resided in Clark County. See Appendix B for details regarding all counties.

Table 55. Number and percent of suicide child deaths in Nevada in 2018 by decedent’s county of residence.

	Number	Percent
Clark County	19	82.6%
Washoe County	2	8.7%
Rural Counties	1	4.3%
Out of state	1	4.3%
Unknown	0	0.0%
Missing	0	0.0%
Total	23	100%

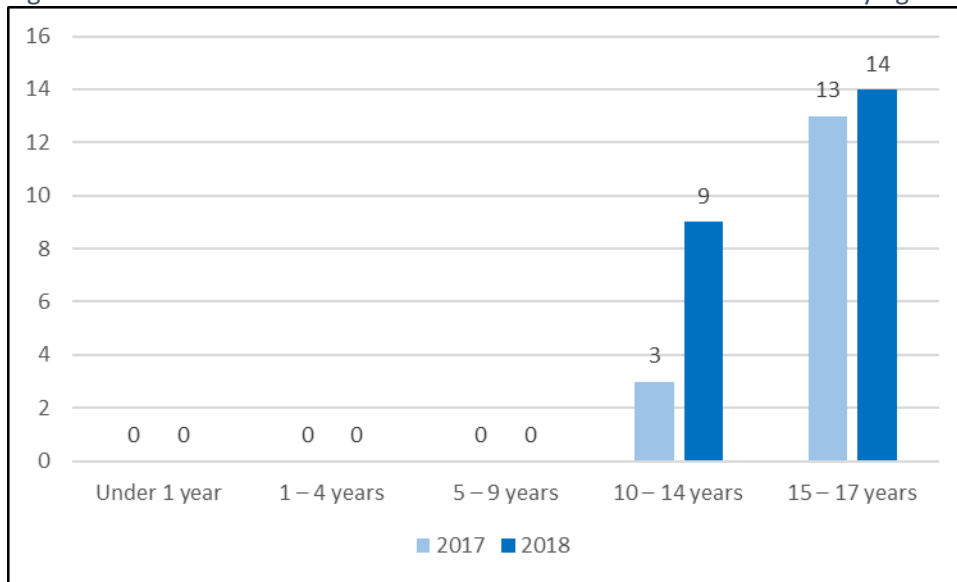
All of the suicide child deaths in Nevada in 2018 were among those 10 – 14 years of age (39.1%) and 15 – 17 years of age (60.9%). See Table 56.

Table 56. Number and percent of suicide child deaths in Nevada in 2018 by age range of decedent.

	Number	Percent
Under 1 year	0	0.0%
1 – 4 years	0	0.0%
5 – 9 years	0	0.0%
10 – 14 years	9	39.1%
15 – 17 years	14	60.9%
Total	23	100%

As seen in Figure 41, there were more suicide child deaths in Nevada among those 10 – 14 years of age and 15 – 17 years of age in 2018 as compared to 2017.

Figure 41. Number of suicide child deaths in Nevada in 2017 and 2018 by age range of decedent.



In Nevada in 2018, there were more suicide child deaths among males (65.2%) as compared to females (34.8%). See Table 57. Nationally, there were also more suicide child deaths among males (71.4%) as compared to females (28.6%) in 2018.²¹ It is important to note that although adolescent males are more likely to complete suicide, adolescent females are much more likely to attempt suicide.²²

Table 57. Number and percent of suicide child deaths in Nevada in 2018 by gender of decedent.

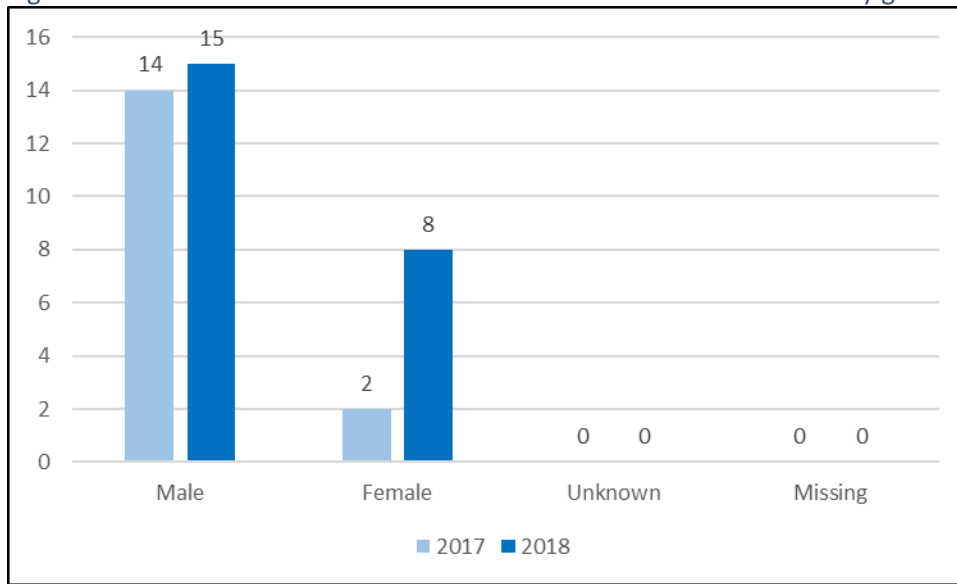
	Number	Percent
Male	15	65.2%
Female	8	34.8%
Unknown	0	0.0%
Missing	0	0.0%
Total	23	100%

As seen in Figure 42, in Nevada in 2018 as compared to 2017, there was a larger increase in the number of female suicide child deaths than in male suicide child deaths.

²¹ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 4, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

²² Miranda-Mendizabal, A., et al. (2019). Gender differences in suicidal behavior in adolescents and young adults: Systematic review and meta-analysis of longitudinal studies. *International Journal of Public Health* 64, 265–283. <https://doi.org/10.1007/s00038-018-1196-1>

Figure 42. Number of suicide child deaths in Nevada in 2017 and 2018 by gender of decedent.



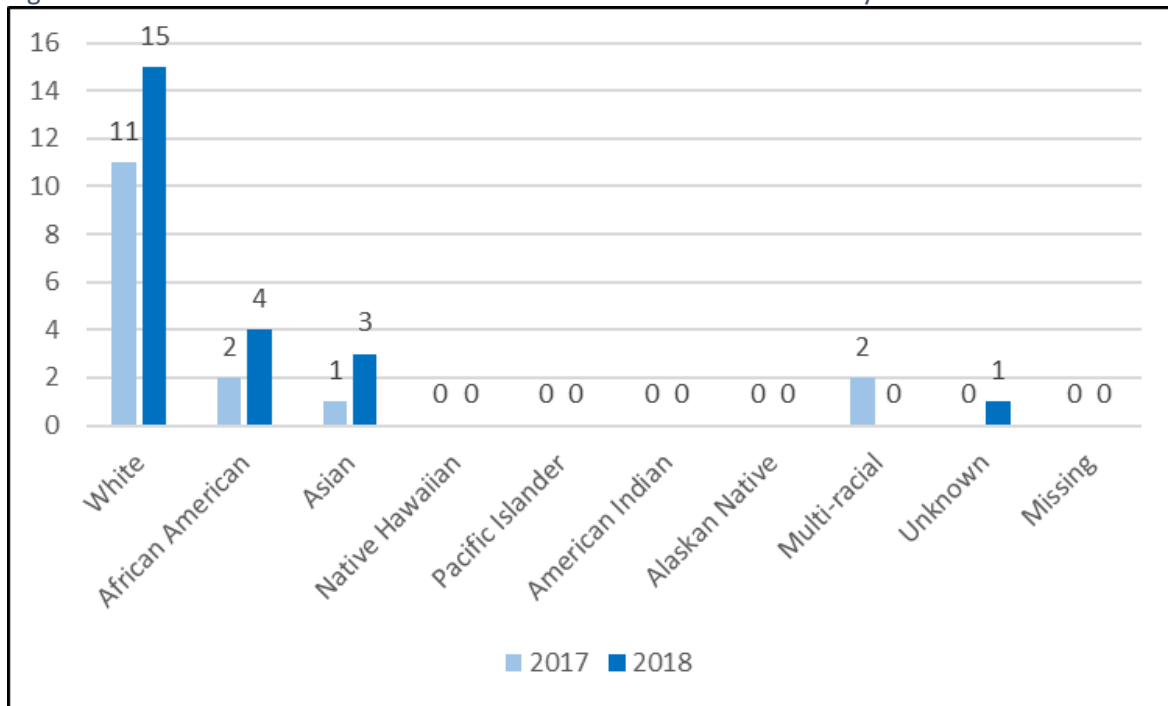
In Nevada in 2018, the majority of suicide child deaths occurred among white children (65.2%). The next largest percentage of suicide child deaths occurred among African American children (17.4%), followed by Asian children (13.0%). See Table 58.

Table 58. Number and percent of suicide child deaths in Nevada in 2018 by race of decedent.

	Number	Percent
White	15	65.2%
African American	4	17.4%
Asian	3	13.0%
Native Hawaiian	0	0.0%
Pacific Islander	0	0.0%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	0	0.0%
Unknown	1	4.3%
Missing	0	0.0%
Total	23	100%

As seen in Figure 43, there were more suicide child deaths among whites, African Americans, and Asians in Nevada in 2018 as compared to 2017.

Figure 43. Number of suicide child deaths in Nevada in 2017 and 2018 by race of decedent.



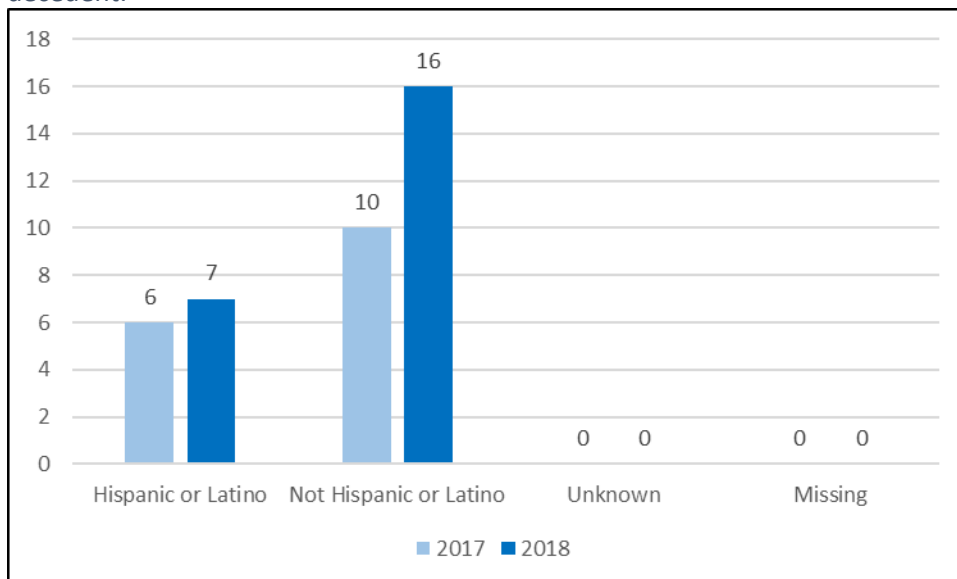
As seen in Table 59, the majority of suicide child deaths in Nevada in 2018 were among those not Hispanic or Latino (69.6%).

Table 59. Number and percent of suicide child deaths in Nevada in 2018 by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	7	30.4%
Not Hispanic or Latino	16	69.6%
Unknown	0	0.0%
Missing	0	0.0%
Total	23	100%

As seen in Figure 44, in Nevada in 2018 as compared to 2017 there were more suicide child deaths among those of Hispanic or Latino ethnicity and among those not of Hispanic or Latino ethnicity.

Figure 44. Number of suicide child deaths in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



As seen in Table 60, slightly more than half (52.2%) of suicide child deaths in Nevada in 2018 were the result of asphyxia. The next largest percentage of suicide child deaths were the result of a firearm (30.4%). All of the suicide child deaths in Nevada in 2018 that were the result of a firearm were among males. Nationally, male suicide child deaths in 2018 were primarily the result of either a firearm (46.8%) or asphyxia (46.3%).²³

Table 60. Number and percent of suicide child deaths in Nevada in 2018 by type.

	Number	Percent
Firearm	7	30.4%
Asphyxia	12	52.2%
Overdose	1	4.3%
Fall or crush	0	0.0%
Motor vehicle	0	0.0%
Other	3	13.0%
Total	23	100%

For suicide child deaths in Nevada in 2018, the history of the decedents with regard to mental health, maltreatment, crime, and school are provided in Table 61. The most commonly reported issue among the decedents was problems in school.

²³ National Center for Injury Prevention and Control (2019). *Web-based Injury Statistics Query and Reporting System: 20 Leading Causes of Death, United States, 2018* [custom data query]. Retrieved May 4, 2021 from <http://www.cdc.gov/injury/wisqars/index.html>

Table 61. History of decedent in suicide child deaths in Nevada in 2018.

		Number of Cases
Mental Health	History of mental health illness	8
	Received prior mental health services	8
	Was receiving mental health services	7
	On medications for mental illness	6
	History of use or substance abuse	6
Maltreatment	History of child maltreatment	7
	History of child maltreatment – Physical	3
	History of child maltreatment – Neglect	5
	History of child maltreatment – Sexual	0
	History of child maltreatment – Emotional/Psychological	0
	History of child maltreatment – Unknown	0
Crime	Delinquent or criminal history	4
	Spent time in juvenile detention	2
School	Problems in school	12
	Problems in school – Academic	5
	Problems in school – Truancy	1
	Problems in school – Suspensions	1
	Problems in school – Behavioral	5
	Problems in school – Expulsions	1
	Problems in school – Other	6
Note: More than one factor can apply in a case		

Details regarding the circumstances of the suicide child deaths in Nevada in 2018 can be seen in Table 62. The most common circumstance was that the child had communicated their suicidal thoughts or intentions.

Table 62. Circumstances of suicide child deaths in Nevada in 2018.

	Number of Cases
Communicated suicidal thoughts or intentions	12
Child talked about suicide	8
Prior attempts were made	4
Suicide was completely unexpected	10
Child had a history of running away	3
Child had a history of self-mutilation	9
Child had history of suicide of a peer, friend, or family member	3
Suicide was part of a murder/suicide	0
Suicide was part of a suicide pact	0
Suicide was part of a suicide cluster	0
Note: More than one circumstance can apply to a case	

For the suicide child deaths in Nevada in 2018, the types of life stressors that the decedents had recently experienced can be seen in Table 63. The most common type of life stressors experienced were school failure, family discord, bullying as victim, and pressure to succeed in school.

Table 63. Types of life stressors in the recent history of decedents in suicide child deaths in Nevada in 2018.

	Number of Cases
Family discord	6
Argument with parents/caregivers	5
Parents' divorce/separation	4
Parents' incarceration	2
Argument with boyfriend/girlfriend	2
Breakup with boyfriend/girlfriend	2
Social discord	3
Argument with friends	0
Rumor mongering	0
Bullying as victim	6
Bullying as perpetrator	2
Cyberbullying as victim	1
Cyberbullying as perpetrator	0
Peer violence as victim	2
Peer violence as perpetrator	3
School failure	8
New school	1
Pressure to succeed at school	6
Extracurricular school activities	2
Other serious school problems	3
Pregnancy	0
Previous abuse	1
Rape/sexual assault	2
Problems with the law	3
Drugs/alcohol	2
Sexual orientation/gender identity issues	4
Isolation	5
Job problems	0
Money problems	0
Involvement in computer or video gaming	0
Restrictions of technology	4
Social media	2
Involvement with the Internet	2
Note: More than one type can apply to a case	

Information regarding access to lethal means in suicide deaths in Nevada in 2018 can be seen in Table 64.

Table 64. Access to lethal means in suicide child deaths in Nevada in 2018.

	Number of Cases
Child used a handgun	5
Child used a shotgun	0
Child had access to unsecured firearms	3
Note: More than one can apply to a case	

Infant Deaths in which the Mother used Substances during Pregnancy

There were 23 deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy. The manner of these deaths included accident (43.5%), natural (39.1%), undetermined (13.0%), and homicide (4.3%). As seen in Table 65, among these child deaths, all of the decedents resided in Clark County.

Table 65. Number and percent of deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy by decedent’s county of residence.

	Number	Percent
Clark County	23	100%
Washoe County	0	0.0%
Rural Counties	0	0.0%
Out of state	0	0.0%
Unknown	0	0.0%
Missing	0	0.0%
Total	23	100%

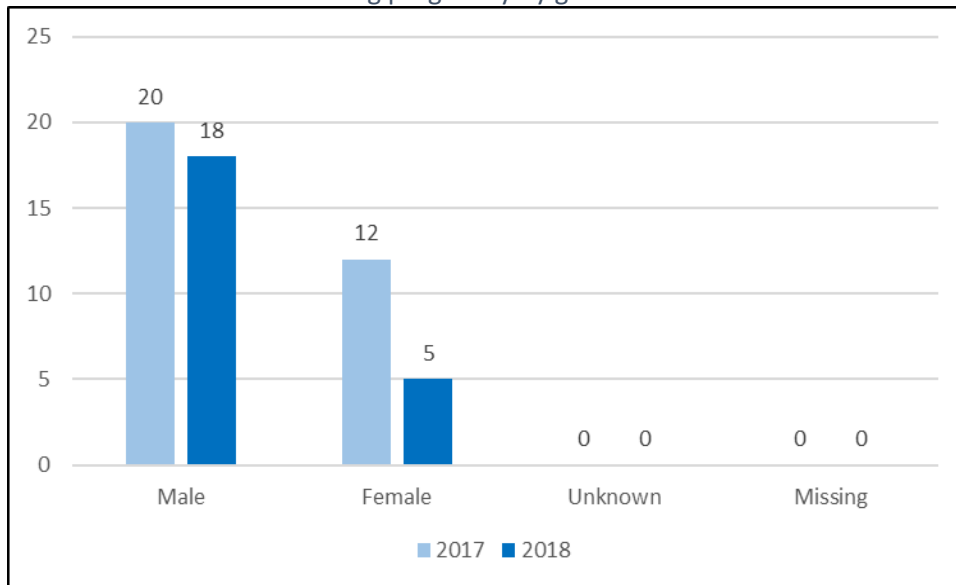
The majority of deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy were among males (78.3%). See Table 66.

Table 66. Number and percent of deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy by gender of decedent.

	Number	Percent
Male	18	78.3%
Female	5	21.7%
Unknown	0	0.0%
Missing	0	0.0%
Total	23	100%

As seen in Figure 45, there were fewer male and female child deaths among children under 1 year of age in which the mother used substances during pregnancy in Nevada in 2018 as compared to 2017.

Figure 45. Number of deaths of children under 1 year of age in Nevada in 2017 and 2018 in which the mother used substances during pregnancy by gender of decedent.



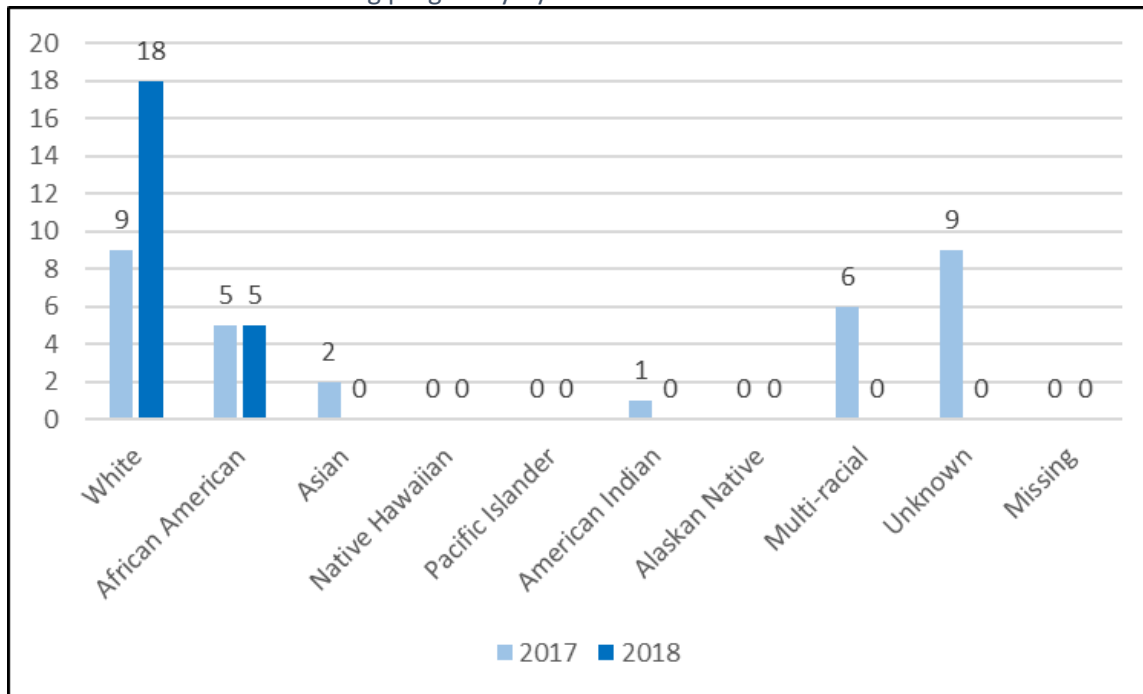
As seen in Table 67, among the deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy, 78.3 percent were white and 21.7 percent were African American.

Table 67. Number and percent of deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy by race of decedent.

	Number	Percent
White	18	78.3%
African American	5	21.7%
Asian	0	0.0%
Native Hawaiian	0	0.0%
Pacific Islander	0	0.0%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	0	0.0%
Unknown	0	0.0%
Missing	0	0.0%
Total	23	100%

As seen in Figure 46, in Nevada in 2018 as compared to 2017, there were fewer deaths of children under 1 year of age in which the mother used substances during pregnancy among children that were white, Asian, American Indian, multi-racial, and children of unknown race. The number of African American children under 1 year of age in which the mother used substances during pregnancy did not change from 2017 to 2018.

Figure 46. Number of deaths of children under 1 year of age in Nevada in 2017 and 2018 in which the mother used substances during pregnancy by race of decedent.



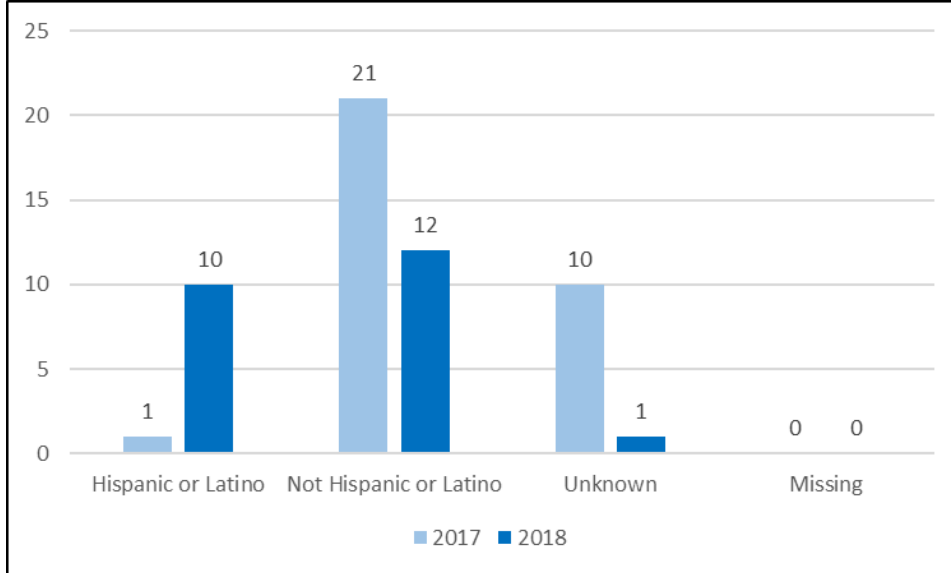
As seen in Table 68, among the deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy, 52.2 percent were not Hispanic or Latino, 43.5 percent were Hispanic or Latino, and the Hispanic or Latino ethnicity of 4.3 percent was unknown.

Table 68. Number and percent of deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	10	43.5%
Not Hispanic or Latino	12	52.2%
Unknown	1	4.3%
Missing	0	0.0%
Total	23	100%

As seen in Figure 47, in Nevada in 2018 as compared to 2017, there were fewer deaths of children under 1 year of age in which the mother used substances during pregnancy among children not of Hispanic or Latino ethnicity and among children of unknown Hispanic or Latino ethnicity.

Figure 47. Number of deaths of children under 1 year of age in Nevada in 2017 and 2018 in which the mother used substances during pregnancy by Hispanic or Latino ethnicity of decedent.



Risk factors associated with deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy can be seen in Table 69. The types of risk factors shown include those that occurred prior to pregnancy, during pregnancy, and indicate exposure to the child.

Table 69. Risk factors associated with deaths of children under 1 year of age in Nevada in 2018 in which the mother used substances during pregnancy.

		Number of Cases
Prior to Pregnancy	Mother had a history of substance use	15
	Substance use included alcohol	1
	Substance use included cocaine	0
	Substance use included marijuana	8
	Substance use included methamphetamines	5
	Substance use included opiates	1
	Substance use included prescription drugs	1
	Substance use included over-the-counter drugs	0
	Mother was a prior victim of child maltreatment	3
	Mother was a prior perpetrator of child maltreatment	10
	Mother's history included a prior child death	0
During Pregnancy	Mother smoked	6
	Mother used alcohol	2
	Mother used cocaine	1
	Mother used heroin	1
	Mother used marijuana	11
	Mother used methamphetamines	6
	Mother used opiates	1
Child Exposure	Toxicology screen completed on child	21
	Toxicology screen was negative	15
	Child tested positive for alcohol	0
	Child tested positive for cocaine	0
	Child tested positive for marijuana	1
	Child tested positive for methamphetamines	3
	Child tested positive for opiates	0
	Child tested positive for prescription drugs	0
	Child tested positive for other drugs	3
	Child test results unknown	1
Note: More than one risk factor can apply to a case.		

Non-Homicide Deaths in which Abuse or Neglect Caused or Contributed

In Nevada in 2018, there were 18 child deaths that were not homicides in which abuse or neglect caused or contributed to the death. As seen in Table 70, all of these child deaths occurred among residents of Clark County (94.4%) and Washoe County (5.6%).

Table 70. Number and percent of non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death by decedent’s county of residence.

	Number	Percent
Clark County	17	94.4%
Washoe County	1	5.6%
Rural Counties	0	0.0%
Out of state	0	0.0%
Unknown	0	0.0%
Missing	0	0.0%
Total	18	100%

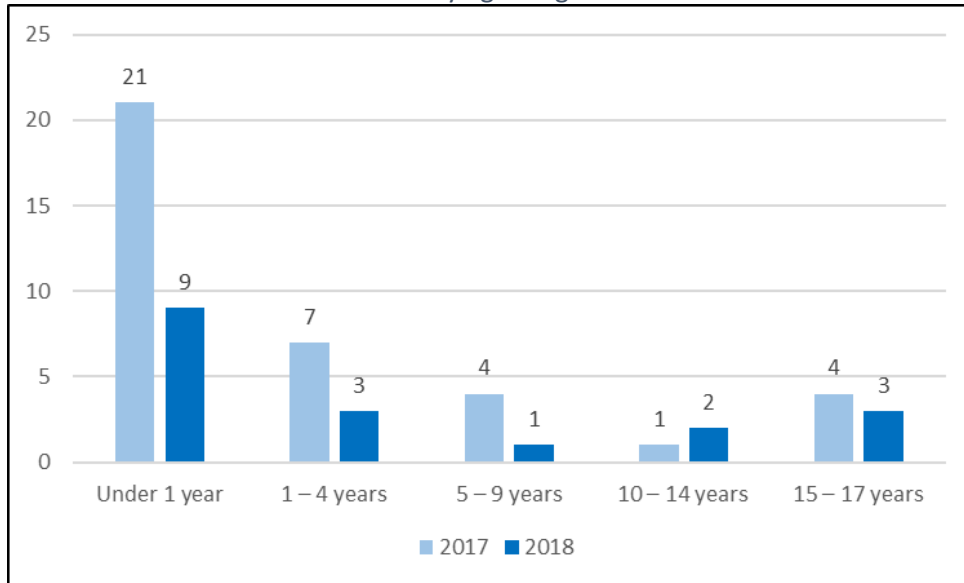
Half (50.0%) of the non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death occurred among those under one year of age. See Table 71.

Table 71. Number and percent of non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death by age range of decedent.

	Number	Percent
Under 1 year	9	50.0%
1 – 4 years	3	16.7%
5 – 9 years	1	5.6%
10 – 14 years	2	11.1%
15 – 17 years	3	16.7%
Total	18	100%

As seen in Figure 48, in Nevada in 2018 as compared to 2017, with the exception of those in the 10 – 14 years of age range, there was a decrease in the number of non-homicide child deaths in which abuse or neglect caused or contributed to the death among children of all age ranges.

Figure 48. Number of non-homicide child deaths in Nevada in 2017 and 2018 in which abuse or neglect caused or contributed to the death by age range of decedent.



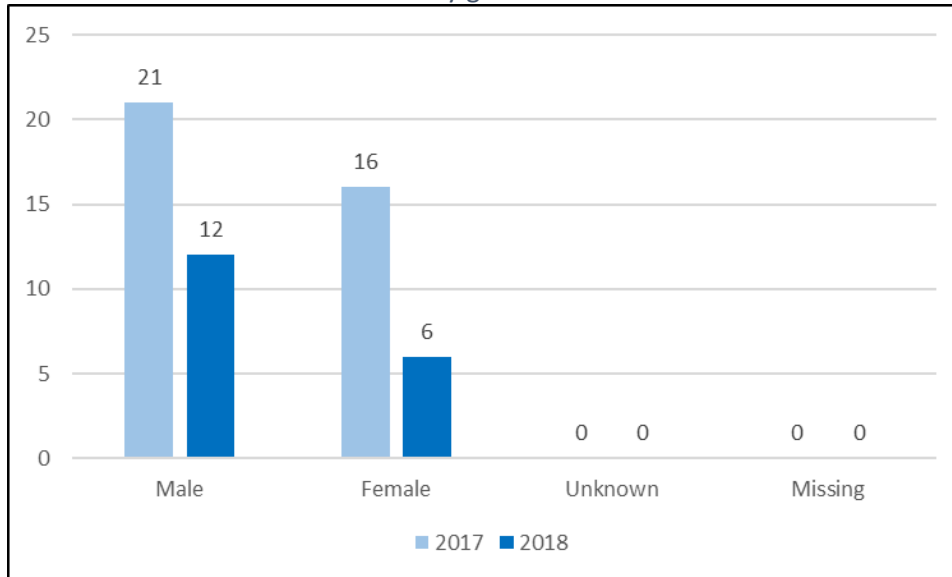
In Nevada in 2018, there was a larger percentage of non-homicide child deaths in which abuse or neglect caused or contributed to the death among males (66.7%) as compared to females (33.3%). See Table 72.

Table 72. Number and percent of non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death by gender of decedent.

	Number	Percent
Male	12	66.7%
Female	6	33.3%
Unknown	0	0.0%
Missing	0	0.0%
Total	18	100%

As seen in Figure 49, there were fewer male and female non-homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 as compared to 2017.

Figure 49. Number of non-homicide child deaths in Nevada in 2017 and 2018 in which abuse or neglect caused or contributed to the death by gender of decedent.



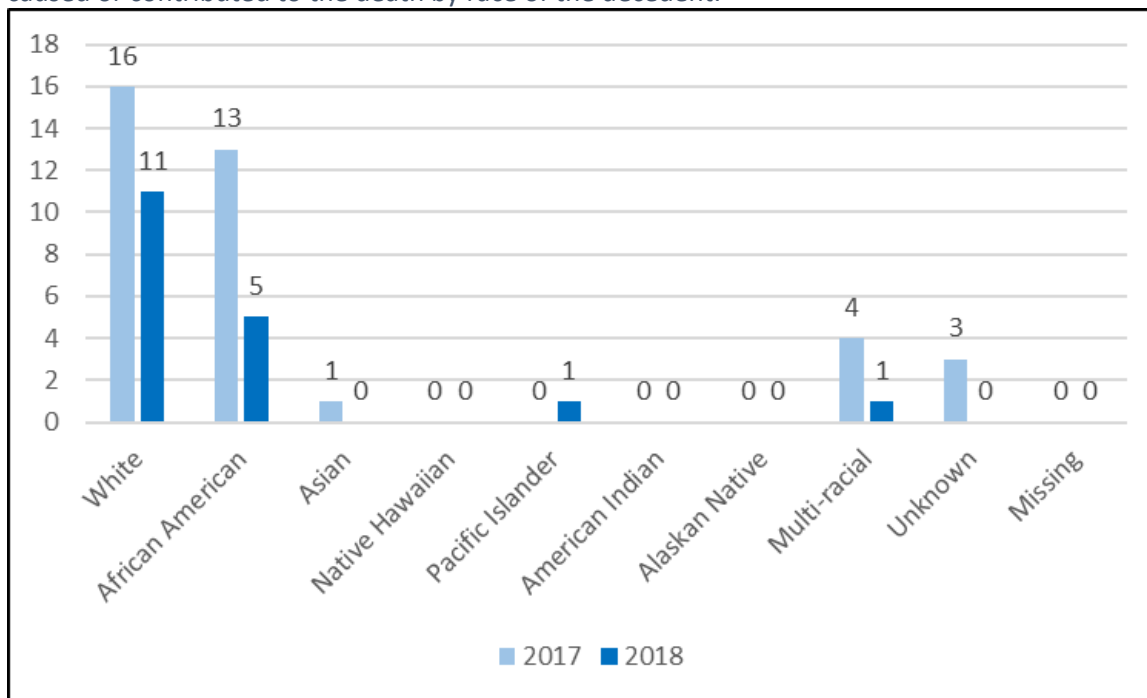
As seen in Table 73, 61.1 percent of the non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death occurred among white children and 27.8 percent occurred among African American children.

Table 73. Number and percent of non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death by race of decedent.

	Number	Percent
White	11	61.1%
African American	5	27.8%
Asian	0	0.0%
Native Hawaiian	0	0.0%
Pacific Islander	1	5.6%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	1	5.6%
Unknown	0	0.0%
Missing	0	0.0%
Total	18	100%

As seen in Figure 50, with the exception Pacific Islander children, there was a decrease among all races in the number of non-homicide child deaths in which abuse or neglect caused or contributed to the death in Nevada in 2018 as compared to 2017.

Figure 50. Number of non-homicide child deaths in Nevada in 2017 and 2018 in which abuse or neglect caused or contributed to the death by race of the decedent.



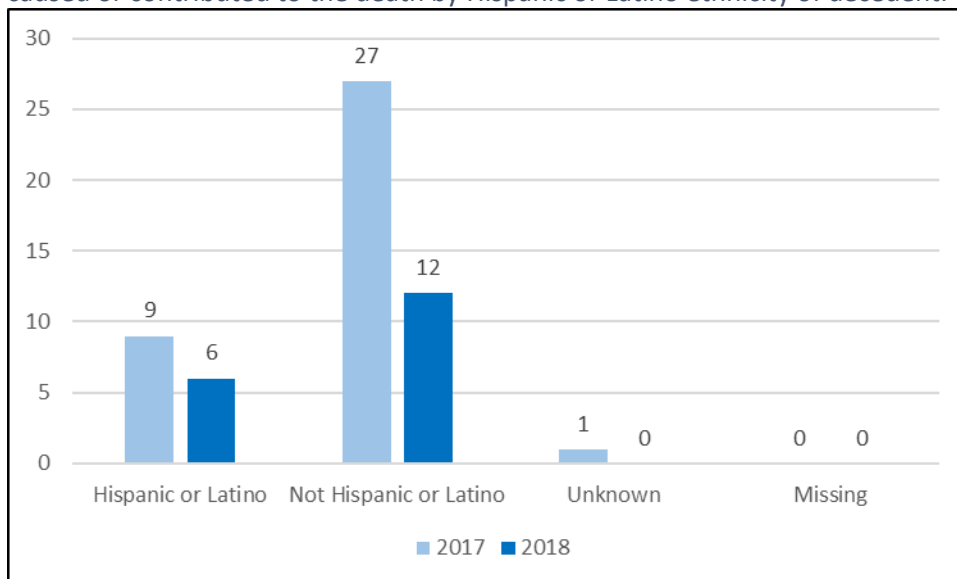
The majority of non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death occurred among those who were identified as not Hispanic or Latino (66.7%). See Table 74.

Table 74. Number and percent of non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	6	33.3%
Not Hispanic or Latino	12	66.7%
Unknown	0	0.0%
Missing	0	0.0%
Total	18	100%

As seen in Figure 51, there was a decrease in the number of non-homicide child deaths in which abuse or neglect caused or contributed to the death among those identified as Hispanic or Latino, those who were not Hispanic or Latino, and those of unknown Hispanic or Latino ethnicity in Nevada in 2018 as compared to 2017.

Figure 51. Number of non-homicide child deaths in Nevada in 2017 and 2018 in which abuse or neglect caused or contributed to the death by Hispanic or Latino ethnicity of decedent.



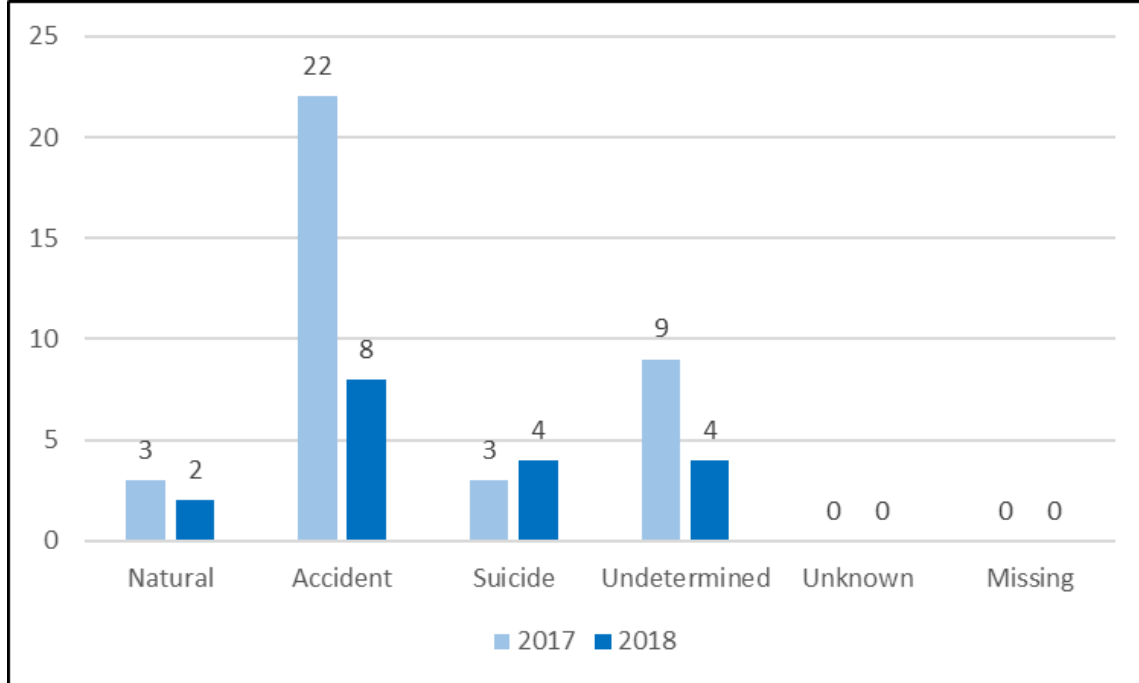
As seen in Table 75, among the non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death, 44.4 percent were accidents, 22.2 percent were suicides, 22.2 percent were of undetermined manner, and 11.1 percent were natural. For the accident and suicide child deaths, neglect caused or contributed to the deaths. In one of the natural deaths, neglect caused or contributed to the death and in the other natural death, abuse caused or contributed to the death. In three of the undetermined deaths, neglect caused or contributed to the deaths and abuse caused or contributed to the other death.

Table 75. Number and percent of non-homicide child deaths in Nevada in 2018 in which abuse or neglect caused or contributed to the death by manner of death.

	Number	Percent
Natural	2	11.1%
Accident	8	44.4%
Suicide	4	22.2%
Undetermined	4	22.2%
Unknown	0	0.0%
Missing	0	0.0%
Total	18	100%

As seen in Figure 52, with the exception of suicide, there was a decrease in the number of non-homicide child deaths in which abuse or neglect caused or contributed to the death among all manners of death in Nevada in 2018 as compared to 2017.

Figure 52. Number of non-homicide child deaths in Nevada in 2017 and 2018 in which abuse or neglect caused or contributed to the death by manner of death.



Sudden Infant Death Syndrome (SIDS)

SIDS deaths are required to be reviewed by regional CDR teams per NRS 432B.405. However, there were no child deaths in Nevada in 2018 that were categorized as being the result of SIDS.

Children Involved in the Child Protective Services (CPS) System

Of the 272 child deaths in Nevada in 2018, there were 32 in which the child had been involved with the Child Protective Services (CPS) System. In 31 of these deaths, there was a past history of child maltreatment of the decedent as identified through CPS and in one death there was no past history of child maltreatment of the decedent but there was an open CPS case. In the 31 deaths in which there was a past history of child maltreatment of the decedent, there was one in which there was an open CPS case.

As seen in Table 76, the majority of child deaths with CPS involvement in Nevada in 2018 was among decedents that resided in Clark County (93.8%). See Appendix B for details regarding all counties.

Table 76. Number and percent of child deaths with CPS involvement in Nevada in 2018 by decedent’s county of residence.

	Number	Percent
Clark County	30	93.8%
Washoe County	1	3.1%
Rural Counties	1	3.1%
Unknown	0	0.0%
Missing	0	0.0%
Total	32	100%

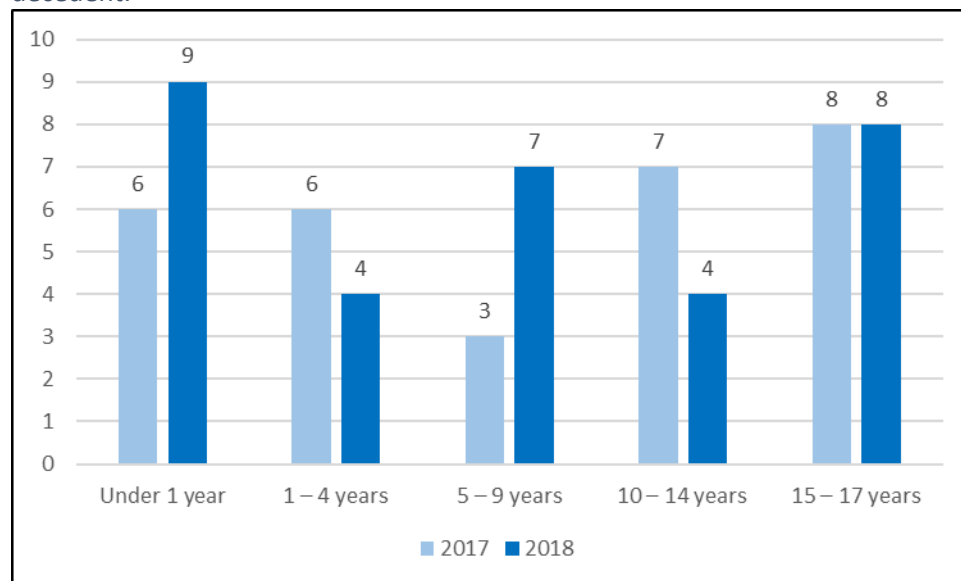
In Nevada in 2018, the largest percentage of child deaths with CPS involvement occurred among those under one year of age (28.1%). See Table 77.

Table 77. Number and percent of child deaths with CPS involvement in Nevada in 2018 by age range of decedent.

	Number	Percent
Under 1 year	9	28.1%
1 – 4 years	4	12.5%
5 – 9 years	7	21.9%
10 – 14 years	4	12.5%
15 – 17 years	8	25.0%
Total	32	100%

As seen in Figure 53, there were more child deaths with CPS involvement among those under one year of age and those 5 – 9 years of age in Nevada in 2018 as compared to 2017, but fewer deaths among those 1 – 4 years of age and those 10 – 14 years of age.

Figure 53. Number of child deaths with CPS involvement in Nevada in 2017 and 2018 by age range of decedent.



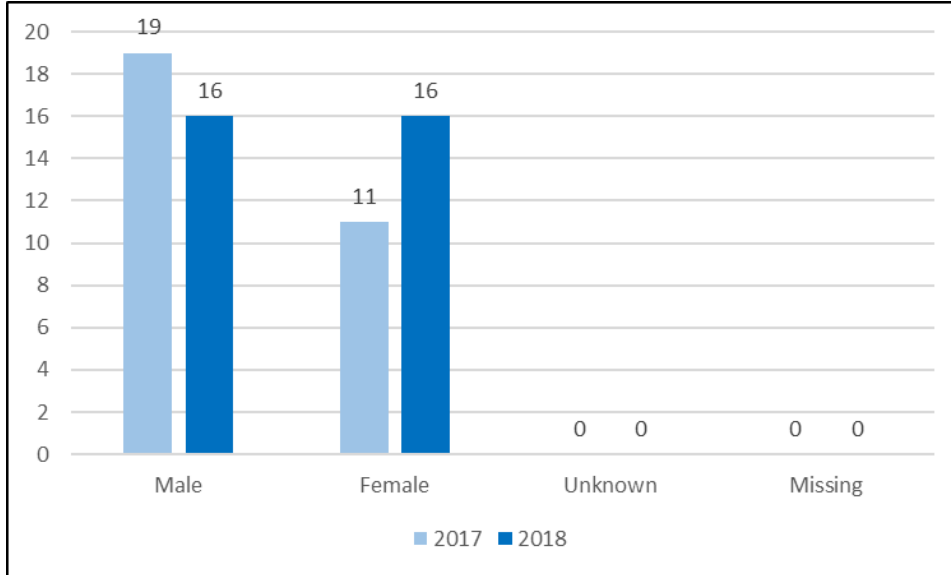
Half (50.0%) of the child deaths with CPS involvement in Nevada in 2018 were among males and half (50.0%) of the child deaths with CPS involvement were among females. See Table 78.

Table 78. Number and percent of child deaths with CPS involvement in Nevada in 2018 by gender of decedent.

	Number	Percent
Male	16	50.0%
Female	16	50.0%
Unknown	0	0.0%
Missing	0	0.0%
Total	32	100%

As seen in Figure 54, there were fewer male child deaths with CPS involvement in Nevada in 2018 as compared to 2017, but more female child deaths with CPS involvement.

Figure 54. Number of child deaths with CPS involvement in Nevada in 2017 and 2018 by gender of decedent.



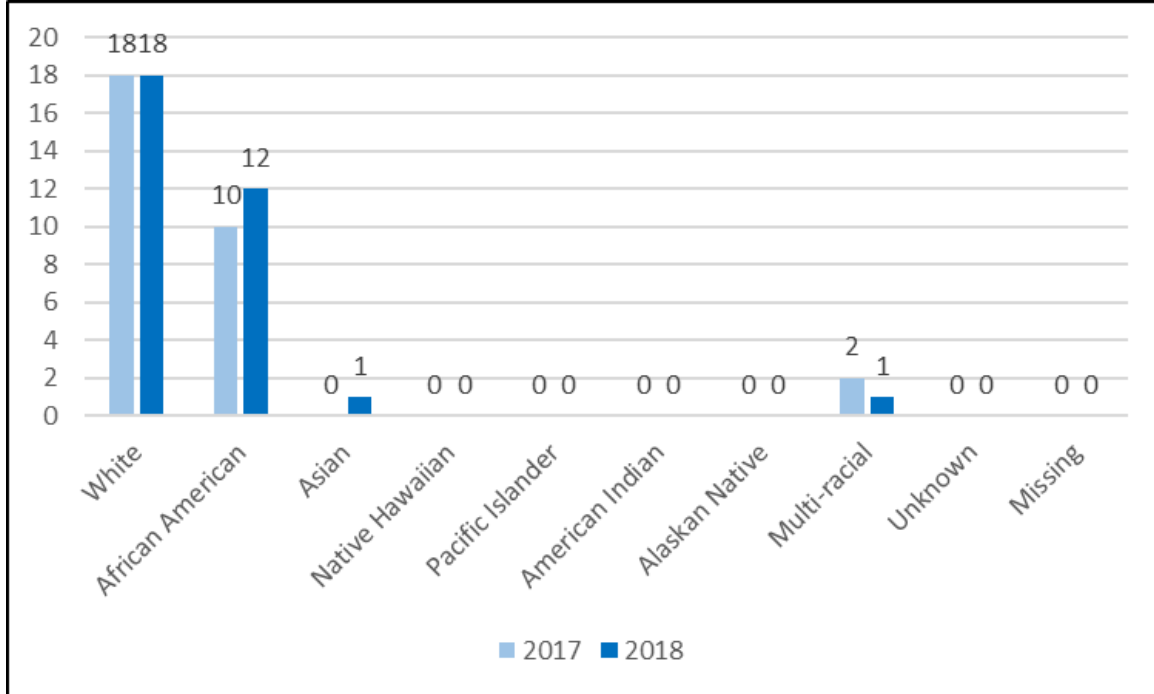
The majority of child deaths with CPS involvement in Nevada in 2018 occurred among white children (56.3%) and African American children (37.5%). See Table 79.

Table 79. Number and percent of child deaths with CPS involvement in Nevada in 2018 by race of decedent.

	Number	Percent
White	18	56.3%
African American	12	37.5%
Asian	1	3.1%
Native Hawaiian	0	0.0%
Pacific Islander	0	0.0%
American Indian	0	0.0%
Alaskan Native	0	0.0%
Multi-racial	1	3.1%
Unknown	0	0.0%
Missing	0	0.0%
Total	32	100%

As seen in Figure 55, there were more child deaths with CPS involvement among African American children and Asian children in Nevada in 2018 as compared to 2017, but fewer deaths among multi-racial children.

Figure 55. Number of child deaths with CPS involvement in Nevada in 2017 and 2018 by race of decedent.



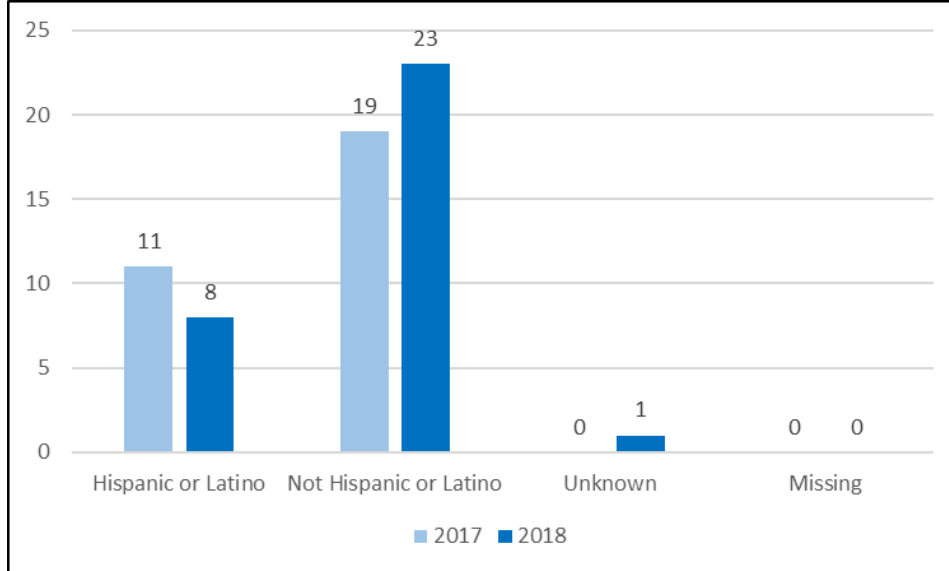
The majority of child deaths with CPS involvement in Nevada in 2018 occurred among those that were not Hispanic or Latino (71.9%). See Table 80.

Table 80. Number and percent of child deaths with CPS involvement in Nevada in 2018 by Hispanic or Latino ethnicity of decedent.

	Number	Percent
Hispanic or Latino	8	25.0%
Not Hispanic or Latino	23	71.9%
Unknown	1	3.1%
Missing	0	0.0%
Total	32	100%

As seen in Figure 56, there were more child deaths with CPS involvement among children not of Hispanic or Latino ethnicity in Nevada in 2018 as compared to 2017, and fewer deaths among children of Hispanic or Latino ethnicity.

Figure 56. Number of child deaths with CPS involvement in Nevada in 2017 and 2018 by Hispanic or Latino ethnicity of decedent.



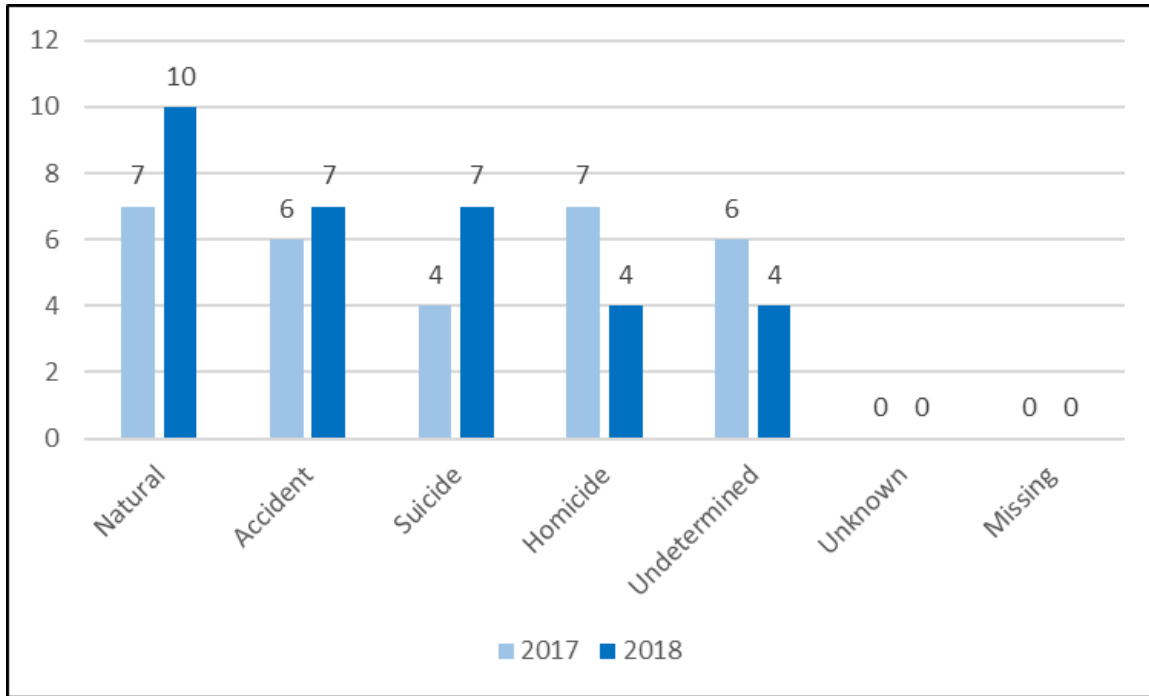
As seen in Table 81, natural deaths accounted for almost one-third (31.3%) of the child deaths in Nevada with CPS involvement in 2018. The next largest percentage of child deaths with CPS involvement were accidents and suicides (both at 21.9%).

Table 81. Number and percent of child deaths in Nevada with CPS involvement in 2018 by manner of death.

	Number	Percent
Natural	10	31.3%
Accident	7	21.9%
Suicide	7	21.9%
Homicide	4	12.5%
Undetermined	4	12.5%
Unknown	0	0.0%
Missing	0	0.0%
Total	32	100%

In Nevada in 2018 as compared to 2017, there were more child deaths with CPS involvement that were natural, accidents, and suicides, but fewer child deaths with CPS involvement that were homicides and of an undetermined manner. See Figure 57.

Figure 57. Number of child deaths with CPS involvement in Nevada in 2017 and 2018 by manner of death.



Appendix A. Previous Public Awareness Efforts Supported by the Executive Committee

Safe Sleep Related Public Awareness Efforts

SFY 2017: The Executive Committee helped fund the statewide distribution of safe sleep public service announcements (PSAs) for both radio and television, in both English and Spanish. This was done in cooperation with the Nevada Division of Public and Behavioral Health (DPBH) through the Maternal, Child, and Adolescent Health (MCAH) section and the Nevada Broadcasters Association (NBA).

SFY 2016: The Executive Committee funded the purchase of 80 portable cribs for distribution by the Washoe County Department of Social Services (WCDSS) to low-income families in the Northern region of the state in order to promote safe sleep environments. WCDSS partners with Safe Kids Washoe County to provide educational materials and other resources to families that come into contact with the child welfare system.

The Executive Committee also funded the purchase of 166 portable cribs for distribution by Baby's Bounty to low-income families in the Southern region of the state in order to promote safe sleep environments. Baby's Bounty provides an array of resources to support infant health and wellbeing to new parents, with a focus on education about safe sleep practices.

Additionally, the Executive Committee partnered again with Immunize Nevada to support distribution of their prevention-oriented PINK Growth Chart, first funded in SFY 2011.

SFY 2015: The Executive Committee collaborated again with Immunize Nevada to support distribution of their prevention-oriented PINK Growth Chart targeted for pregnant and new mothers. As with the original new baby PINK packets, this information piece combines information on several child health resources and child safety factors, including safe sleep.

SFY 2014: The Executive Committee collaborated again with Safe Kids Washoe County to support the ongoing Cribs for Kids program which targets underserved communities through a comprehensive educational campaign that promotes healthy sleep conditions for infants. This includes three primary components:

- A Train-the-Trainer program with partner agencies that provides direct education on SIDS and safe sleep information to clients, families, and caregivers.
- Targeting families who would not have a safe sleep environment to assist them with a Safe Sleep Survival Kit, which includes a portable crib, a sleep sack, a fitted crib sheet, a pacifier, and additional educational materials.
- Collaborative efforts to create a larger professional and public awareness and education campaign to serve the Nevada community.

SFY 2013: The Executive Committee continued funding the inclusion of the updated safe sleeping brochure in new-baby information packets distributed through hospitals statewide, through the partnership with Immunize Nevada.

SFY 2012: The Executive Committee collaborated with Safe Kids Washoe County and the Nevada Division of Public and Behavioral Health (DPBH) to revise the safe sleeping brochure in order to update portions of the information provided and bring the brochure into alignment with the national model provided by Safe Kids. Distribution to hospitals will continue based on the existing partnership with Immunize Nevada, which provides new-baby information packets to hospitals statewide, as well as through the expanded Cribs for Kids program being implemented by Safe Kids Washoe County.

Additionally, the Executive Committee funded a safe sleep campaign through WCDSS. This campaign included instructional messages delivered through an existing volunteer program, billboards focused on the prevention of bed sharing, printing and distribution of informational materials, and the provision of cribs for low-income families.

SFY 2011: The Executive Committee collaborated with Immunize Nevada to include a variety of prevention materials in new-baby information packets distributed through hospitals statewide. These Protect and Immunize Nevada's Kids (PINK) packets included the existing safe sleeping brochure, along with a bilingual choking prevention brochure developed in partnership with DCFS.

SFY 2010: The Executive Committee contributed funding to a Cribs for Kids pilot project through the Nevada Division of Public and Behavioral Health (DPBH), which worked in partnership with the WIC Program, Washoe County Health District (WCHD), and St. Mary's Hospital. Safe Kids Washoe County, a chapter of the national Safe Kids prevention group, was accepted as the provider for the related training curriculum. The goal was to provide new moms with pack-and-play cribs and information on safe sleeping for new babies, along with SIDS prevention.

SFY 2009: Distribution was expanded to child welfare agencies and foster parents, as well as Family Resource Centers, Family-to-Family programs, and Women, Infants, and Children (WIC) Offices statewide. The safe sleeping brochure is also available through partner websites.

SFY 2007: The Executive Committee contributed funding to the printing of bilingual brochures intended to educate parents of newborn infants and young children about safe sleeping environments. These were distributed to 30 hospitals statewide for inclusion in new birth packets and/or distribution through labor and delivery units.

[Abuse, Neglect, and Firearm Related Public Awareness Efforts](#)

SFY 2016: The Executive Committee provided funds to Prevent Child Abuse Nevada (PCANV) to print informational materials based on the *Choose Your Partner Carefully* campaign, for distribution statewide in both English and Spanish. This campaign targets prevention efforts based on the fact that in over half of substantiated abuse and neglect cases in Clark County, the perpetrator is identified as the primary caregiver's partner, typically the mother's boyfriend.

Additionally, the Executive Committee provided funds to PCANV to support a statewide child safety conference to increase awareness of child abuse prevention, child safety activities, and resources available in Nevada. This conference was targeted to child welfare professionals and stakeholders.

SFY 2013: The Executive Committee provided funds again for the *Choose Your Partner Carefully* campaign, with the goals of additional expansion into Washoe County and the rural areas. This was first funded in SFY 2012.

SFY 2012: The Executive Committee provided funds to a Clark County collaborative group for the *Choose Your Partner Carefully* campaign. This multimedia campaign included the printing and distribution of campaign brochures and postcards, direct dissemination of information at community events, bus stop advertisements in high-risk areas of the county, publication of web-based information resources, and distribution of an electronic newsletter to parents and professionals who work with families.

SFY 2011: The Executive Committee collaborated with Immunize Nevada to include a variety of prevention materials in new baby PINK packets distributed through hospitals statewide. These packets included a bilingual firearm safety brochure developed in partnership with DCFS.

SFY 2010: The Executive Committee funded the placement of firearm violence prevention information on eight billboards statewide: 1 in Elko, 1 in Ely, 2 in Reno, and 4 in Las Vegas. The prevention message was based on the *Bullets Leave Holes* campaign formerly developed in Illinois. The billboard messages were contracted for a minimum of 30 days, which resulted in approximately 70,000 exposures per day in Las Vegas, and approximately 40,000 exposures per day in Reno.

Motor Vehicle Accident Related Public Awareness Efforts

SFY 2015: The Executive Committee again provided funds to support mobile Internet access used as part of the Driving Responsibly Includes Vehicle Education (DRIVE) training program implemented by DPS. This program continues to be offered in rural areas, Washoe County, and Clark County.

SFY 2014: The Executive Committee again provided funds to support the purchase of computer equipment used as part of the DRIVE training program implemented by DPS. This program continues to be offered in rural areas and Washoe County, and is planned to expand into Clark County during SFY 2014.

SFY 2013: The Executive Committee provided funds to support the purchase of computer equipment used as part of the DRIVE training program implemented by DPS. This program is currently offered in rural areas including Douglas County, Carson City, Fernley, and the Fallon Juvenile courts. The program also expanded into Washoe County during SFY 2013.

Suicide Prevention Related Public Awareness Efforts

SFY 2017: The Executive Committee provided funding to four public awareness and education campaigns focused on suicide prevention:

- **Text4Life:** The Executive Committee contributed funding again to the operation of the Crisis Call Center, in order to continue supporting the Text4Life service.
- **Reducing Access to Lethal Means:** This campaign, through the Nevada Coalition for Suicide Prevention (NCSP), seeks to reduce the rate of suicide involving the use of guns and medication by educating the public through the dissemination of information on gun safety and medication concerns.
- **Child Abuse Prevention and Safety Conference:** This is an annual conference sponsored by Prevent Child Abuse Nevada (PCANV) and Child Abuse and Neglect Prevention Taskforce (CAN Prevention). For 2017, participants were provided continuing education about recommended strategies for addressing suicide prevention through upstream research and programs, which focus on decreasing risk factors associated with mood and anxiety disorders, social isolation, persistent high levels of stress, and adverse childhood experiences.

- **Social Emotional Learning (SEL) Program:** This is a collaboration between a variety of statewide and local Nye County agencies that focuses on conducting program evaluation and researching outcomes from a curriculum designed for elementary school students, which was developed to promote universal prevention strategies for healthy populations. This program provides training for teachers, school staff, and parents to help them reinforce social and emotional life skills in students.

SFY 2016: The Executive Committee contributed funding again to the operation of the Crisis Call Center, in order to continue supporting the Text4Life service.

SFY 2015: The Executive Committee contributed first-year funding to the operation of the Crisis Call Center, in order to support the Text4Life service. This texting program was conceived to reach out to individuals, especially youth, who use texting as a primary means of communication and who might contact the center regarding problems such as suicide, drug abuse, or other issues via text when they otherwise would not call. The goal of the program is to provide education and support regarding abuse, addiction, physical and mental health, and suicide prevention.

SFY 2014: The Executive Committee contributed funding to the continuation of the Reducing Access to Lethal Means campaign through the Nevada OSP, first funded in SFY 2013.

SFY 2013: The Executive Committee contributed first-year funding to the Reducing Access to Lethal Means campaign through the Nevada OSP. The program focuses on five areas: 1) Building community partnerships with relevant agencies and businesses including gun shop owners, gun ranges, gun retailers, gun distributors, gun show promoters, and gun owners; along with healthcare providers, law enforcement agencies, policy makers, school administrators, legislators, heads of state agencies, and those people responsible for creating statutes, rules, and regulations to ensure the health and safety of young people. These individuals and the organizations they represent should consult with one another on key decisions throughout the project and to partner in message delivery. 2) Discussing the movement's lethal means restriction with gun promoters, distributors, retailers, owners, buyers, gun range invitees. 3) Educating those who are in the business of selling guns, distributing guns, facilities offering firearms practice (shooting ranges), gun shows, and gun owners about lethal means restriction and training them how to educate parents on the topic. 4) Directly educating parents on lethal means restriction and other suicide prevention techniques through community-based suicide prevention training sessions. 5) Supplementing these project activities through a public information and media campaign focusing on lethal means restriction.

SFY 2011: The Executive Committee contributed funding to the UR Not Alone campaign through the Nevada Office of Suicide Prevention (OSP). This innovative program enabled students in participating middle and high schools to use text messaging to obtain support and resources when they are emotionally troubled and may demonstrate suicide ideation. This campaign included printing and distribution of school participation packets, informational posters and cards placed at schools, staff engagement and orientation at schools, and development and distribution of ebulletins to lawmakers and stakeholders to promote suicide prevention awareness and funding.

Appendix B. Number and percent of child deaths in Nevada in 2018 by decedent’s county of residence for detailed reviews.

	Accidents involving asphyxia	Accidents involving drowning	Motor vehicle accidents	Homicides	Homicides abuse or neglect caused or contributed	Suicides	Maternal substance use during pregnancy	Non-homicides abuse or neglect caused or contributed	CPS involvement
Carson City	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Clark	25 (86.2%)	8 (100%)	11 (73.3%)	23 (85.2%)	15 (78.9%)	19 (82.6%)	23 (100%)	17 (94.4%)	30 (93.8%)
Churchill	1 (3.4%)	0 (0.0%)	1 (6.7%)	1 (3.7%)	1 (5.3%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (3.1%)
Douglas	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Elko	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Esmeralda	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Eureka	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Humboldt	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Lander	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Lincoln	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Lyon	0 (0.0%)	0 (0.0%)	1 (6.7%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Mineral	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Nye	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (4.3%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Pershing	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Storey	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Washoe	3 (10.3%)	0 (0.0%)	3 (13.3%)	1 (3.7%)	1 (5.3%)	2 (8.7%)	0 (0.0%)	1 (5.6%)	1 (3.1%)
White Pine	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Out of state	0 (0.0%)	0 (0.0%)	0 (0.0%)	2 (7.4%)	2 (10.5%)	1 (4.3%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Unknown	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Missing	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Total	29 (100%)	8 (100%)	15 (100%)	27 (100%)	19 (100%)	23 (100%)	23 (100%)	18 (100%)	32 (100%)