

Student injuries in Utah 2019-2022



Student injury reporting system

The Student Injury Reporting System (SIRS) tracks injuries that occur while students travel to and from school and during school time or school-related activities. SIRS helps identify where, when, how, and why students get hurt at school, which allows education officials to pinpoint risk factors and develop safety guidelines and prevention programs to reduce student injuries. Numbers in this report are based on what the Utah Department of Health and Human Services classifies as reportable, which includes injuries that were severe enough to cause the student to miss a half a day of school or more or warrant any medical attention/treatment.

Some schools are not required to report. Counts shared in this report may not represent the total number of school injuries. All 42 Utah school districts and more than 800 public schools have participated.

According to this data, there is a connection between the limitations imposed by the pandemic on children's usual activities and a reduction in the total number of fractures. Additionally, the context in which these injuries occurred has changed. As students resume their pre-pandemic school activities and routines, it is essential to understand these trends to develop strategies to prevent injuries.

Key takeaways

- The number of student injuries in Utah has increased from the 2019-2020 school year to the 2021-2022 school year, with 4,961 student injuries among students in grades K-12 in the 2021-2022 school year.
- The rate of student injuries was highest among 1st and 9th graders in Utah.
- Fracture/break was the most common injury among all school injury types.
- Elementary school students were most likely to be injured during recess, and middle school/junior high and high school students during physical education class.

Between the 2012-2022 school years, the fewest number of student injuries was reported in the 2019-2020 school year (5.7 per 1,000 students), and the rate increased year over year into 2021-2022. The sharp decrease from the 2018-2019 school year to the 2019-2020 school year was primarily attributed to the COVID-19 pandemic and quarantine measures (Figure 1). The rise in injuries might correlate with transitioning from virtual to in-person learning. Students returning to physical school environments might not have been as physically active during virtual learning, potentially leading to a higher susceptibility to injuries once they resume in-person activities.

Figure 1: Student injuries per 1,000 students, K-12 by school year, Utah, 2012-2022

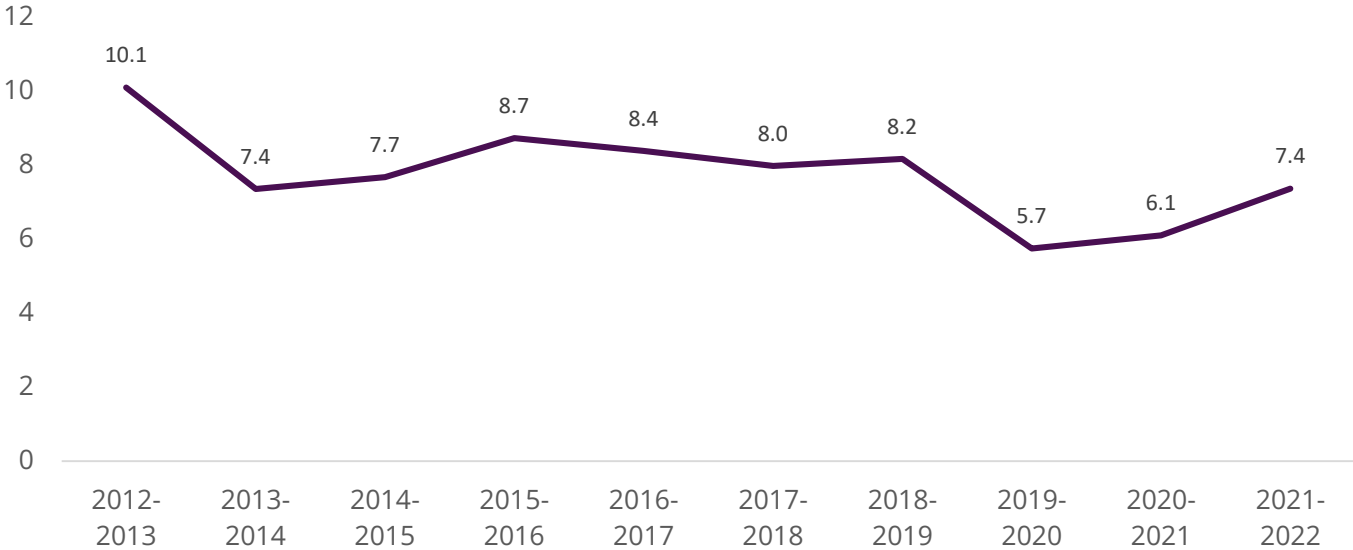
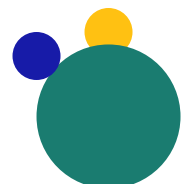


Figure 2 shows that the highest rate of student injuries was among 1st and 9th graders (7.7 per 1,000 students). The lowest rate of student injuries was among 12th graders (3.8 per 1,000 students). The notable injury rates among 1st and 9th graders suggest a need for age-specific safety interventions. Given their developmental stage, integrating play-based learning with safety education could help 1st graders. For 9th graders transitioning into high school and possibly experiencing more intense physical activities, targeted injury prevention programs in P.E. classes could be beneficial.

Figure 2: Rate of student injuries per 1,000 students, K-12 by grade, Utah, 2019-2020 to 2021-2022



Student injuries increased in every school type (elementary, middle/junior high, and high schools) from the 2020-2021 school year to the 2021-2022 school year. From the 2019-2020 to 2020-2021 school years, student injuries increased for all school types except among high schoolers. Most student injuries occurred in elementary schools (Figure 3).

Figure 3: Student injuries, K- 12 by school type, Utah, 2019- 2022

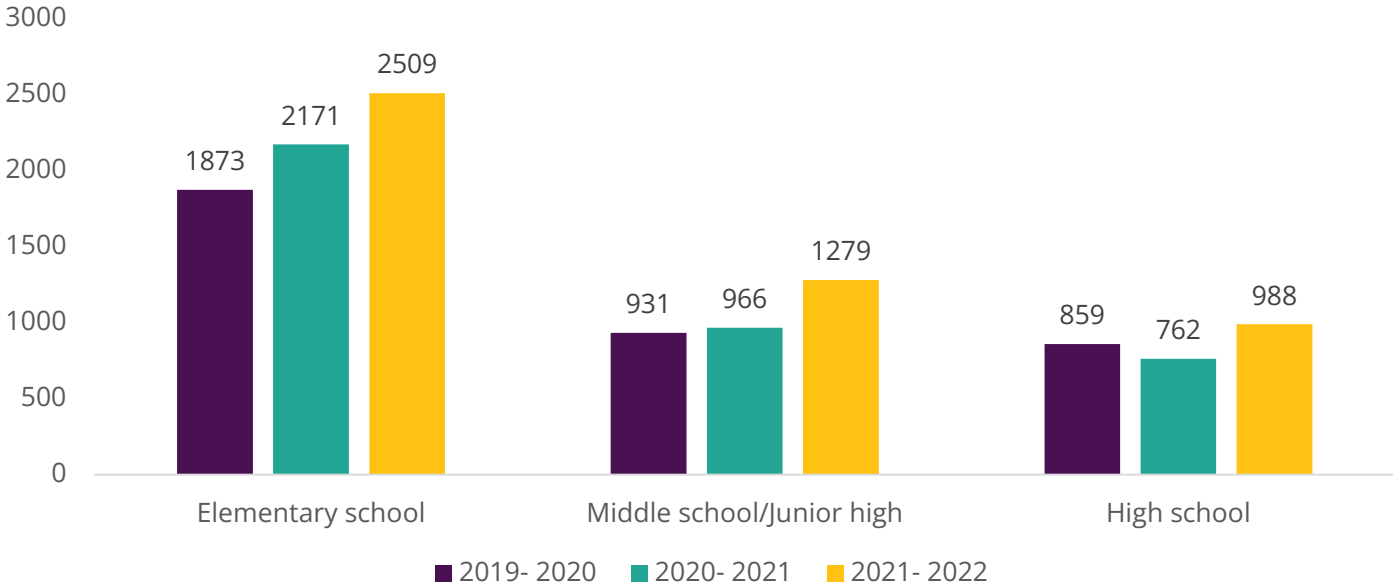
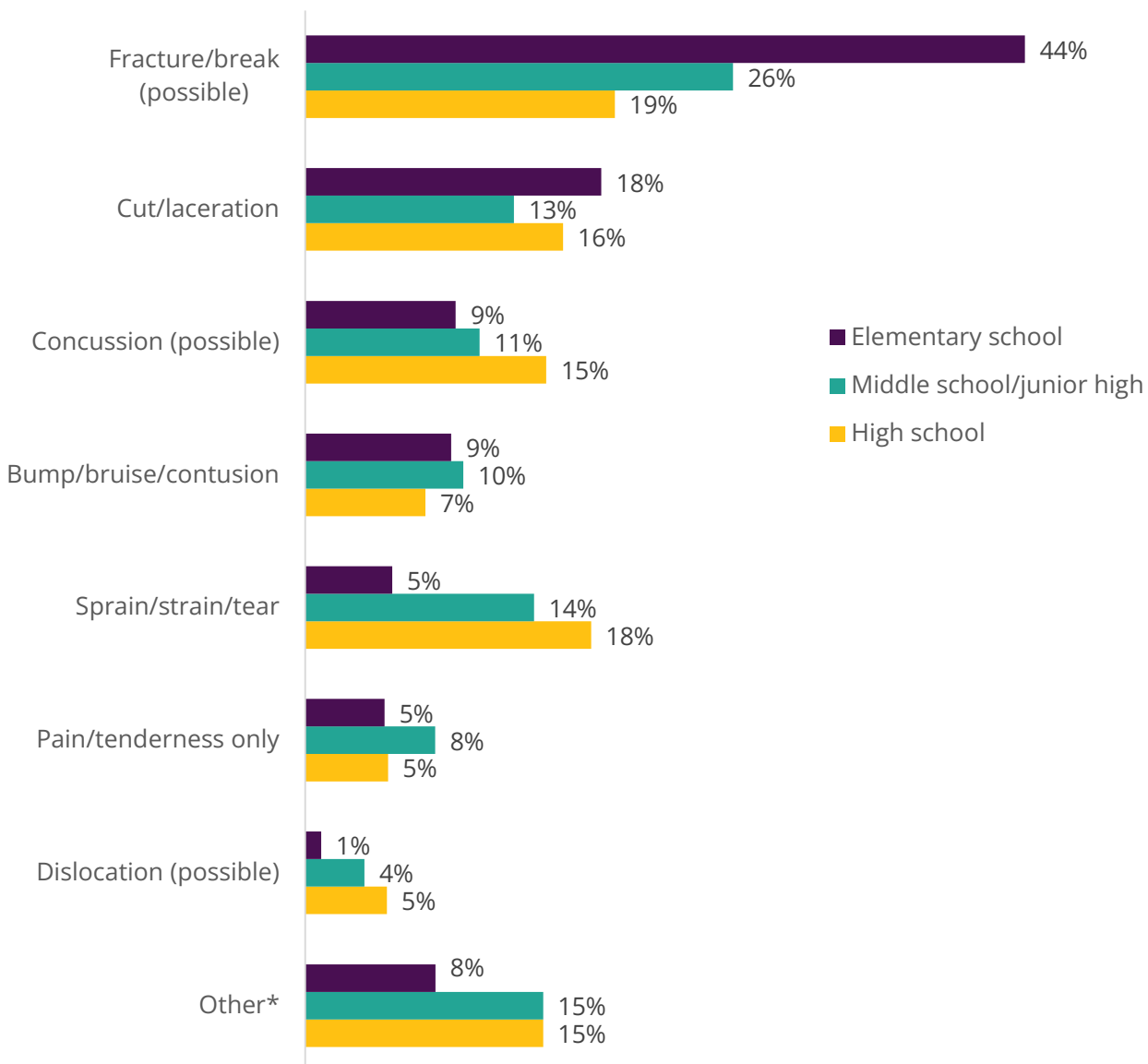


Figure 4 depicts injury types across different school types, presenting the percentage of total injuries for each type. In elementary schools, fractures/breaks (44%) and cuts/lacerations (18%) were most common. Middle school/junior high schools reported higher proportions of bumps/bruises/contusions (10%) and pain/tenderness only (8%). High schools had the highest rates of concussions (15%), sprain/strain/tears (18%), and dislocations (5%) than other school types. Given the prevalence of fractures and breaks, installing safer playground surfaces could reduce such injuries. Moreover, maintaining up-to-date sports and PE equipment and conducting regular safety audits are essential for risk mitigation.

Figure 4: Student injuries, K-12 by injury and school type, Utah, 2019-2020 to 2021-2022



*Other includes shortness of breath, no pulse/heartbeat, swelling/inflammation, loss of consciousness, puncture, abrasion/scrape, burn/scald, and other.

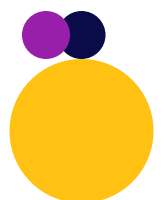
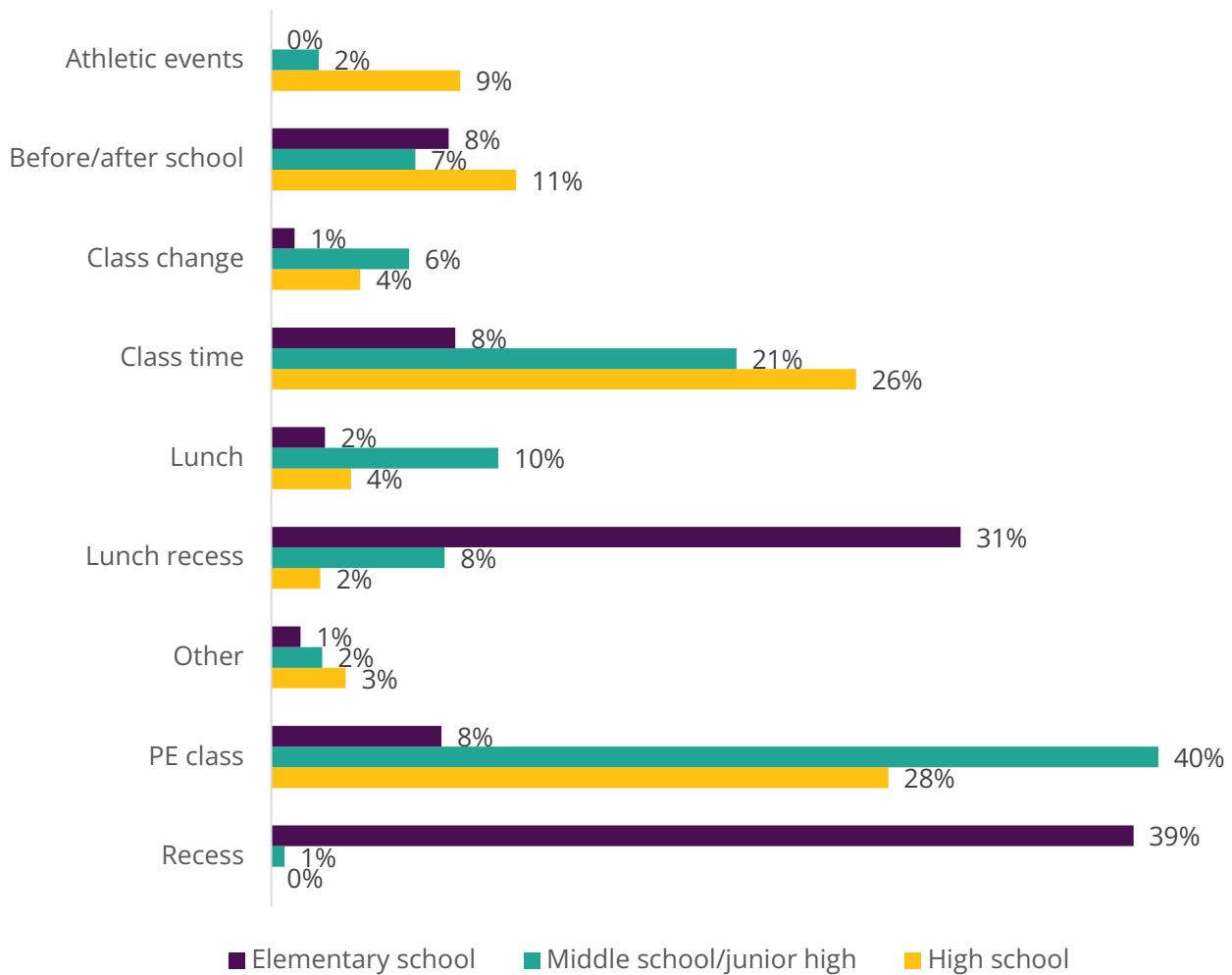
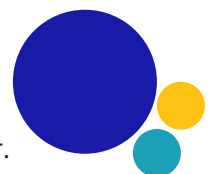


Figure 5 illustrates student injuries across school periods and types, highlighting the percentage of total injuries for each. In elementary schools, the majority of injuries occurred during recess (39%) and lunch recess (31%). Conversely, middle school/junior high schools saw higher proportions of injuries during PE class (40%), lunch (10%), and class change (6%). High schools reported more injuries during athletic events (9%), before/after school (11%), and during class time (26%). These findings suggest a need for enhanced supervision during recess for younger students and structured activities during PE for older students to prevent injuries. Additional aides or training for existing staff to recognize and address unsafe behaviors during these times could prove effective.

Figure 5: Student injuries, K- 12 by school period and school type, Utah, 2019- 2022



* Other includes assembly, athletic practice section, field trip, intramural competition, and other.



Prevention tips

1. Actively supervise children on age-appropriate playgrounds.
2. Teach playground etiquette to children—the dangers of pushing, shoving, or crowding.
3. Dress appropriately—no loose clothing, shoes, or accessories.
4. Check equipment and surroundings—ensuring there are no hazards and the ground is of soft, absorbing, and well-maintained materials.
5. Wear protective gear appropriate for the sport/activity and make sure it fits/is worn appropriately.
6. Do not return to play if there has been a possible concussion or traumatic brain injury. See a doctor first.

Resources

[Playground Safety Useful Links](#)

[Public Playground Safety Checklist](#)

[Playground Safety Checklist](#)

[Playground Safety from Utah PTA](#)

[Playground Safety Fact Sheet from Utah Safety Council](#)

[Protection of Athletes Head Injury Act](#)

[Utah School-related head injuries-Concussion and Head Injury Policy \(2021\)](#)

References

Student Injury Reporting System Data, Violence & Injury Prevention Program, Utah Department of Health and Human Services, 2012-2021 data queried via Utah's Indicator Based Information System for Public Health (IBIS-PH) [cited 2024 January].

Fall Enrollment by Grade Level and Demographics, Utah State Office of Education



“Play is our brain’s favorite way of learning.”
~ Diane Ackerman

