### The Word "Accident": No Chance, No Error, No Destiny<sup>1</sup>

### Jorge Neira, MD, FCCM; Laura Bosque, Lic<sup>2</sup>

- Fellow, American College of Critical Care Medicine; Corresponding Fellow, American Association for the Surgery of Trauma; Chair, Trauma and Emergency Program; Secretary of Health, Buenos Aires City Government; Chief, UCI Sanatorio de la Trinidad, Buenos Aires; ATLS, ACLS, FCCS Instructor, Member, Committee on Trauma, Argentine Chapter, American College of Surgeons, Buenos Aires, Argentina
- 2. Licensed in Psychology, Chair, Injury Prevention Committee, Argentine Society for the Medicine and Surgery of Trauma (SAMCT) Buenos Aires, Argentina

### Correspondence:

Jorge Neira, MD, FCCM E-mail: jan@datamar.com.ar

This article has been translated and modified from:

- Bosque L, Neira, J: Prevención de Lesiones in Trauma. Prioridades. Sociedad Argentina de Medicina y Cirugía del Trauma. Buenos Aires, Editorial Médica Panamericana, 2002.
- Neira J, Bosque L: El término accidente. Temas de Medicina Ambiental. Sociedad Argentina de Medicina Amboiental AC Octubre 2000.
- Neira J, Bosque L, Zengotita S: Informe Estadístico sobre Trauma Año 2000. Sociedad Argentina de Medicina y Cirugía del Trauma. Secretaría de Salud del Gobierno de la Ciudad de Buenos Aires.

Also see Bosque L, Neira J: El Termino Accidente. Available at http://www.samct.com.ar/prevencion/prevenci/termacc.htm.

The word accident is broadly used both popularly and by specific fields of work. For example, the expression motor vehicle accident is deep-seated in medicine, specialized literature, and even in the International Disease Classification. This requires a revision of the word's standard use and the consequences it has for those who work in injury prevention and control.

- According to its usual meaning, the word accident designates an unforeseen, generally tragic event, which alters the normal course of things. The word accident represents an obstacle to study the problem because it suggests an unexpected event. But an accident is not the result of chance or fate, and moreover, it is not intentional (meaning it is not the result of a conscious desire to cause damage).
- The word *accident* also is used to describe a human error. This use of the term results in the exclusion of the person from the sequence that derived in an unintentional injury. Therefore, it makes it impossible to analyze the actions that led to the unsafe behavior.
- Accidents also are attributed to fate, destiny, or divine intervention.
  Because these beliefs function as premises, they inhibit and even hinder the awareness of the factors that led to the event. Therefore, they cause difficulties for the implementation of prevention strategies.<sup>1</sup>

It is significant how widespread the use of a word is that: (1) does not explain the event that it names; and (2) transmits the wrong perception about the event's origin. Namely, the word accident suggests a situation that is not explained by the term itself.

Therefore, the use of the term is the first obstacle that must be faced. To overcome this barrier, a potential solution would be to replace this word with the term *injury*, first, in specialized fields such as medicine, and later, extending it to the general public. The recommendation to avoid the use of the word *accident* is based on this word's connotation, which leads us to think that these events happen by chance and are unpredictable and unpreventable. In contrast, other terms that do not have the same connotation—such as "crash", "collision", "impact", etc.—highlight the predictable and preventable aspect of injuries.

This recommendation is as legitimate as the recommendation to use a certain surgical technique for a specific pathology, for example, and so we must pay equal attention to it. The best way to say that injuries do not occur by chance is to eliminate the word *accident* from our vocabulary. We know it is not immediately possible, but it is a mission, which should not be postponed. Thus, it is necessary to bring together our efforts and to add examples that will spread the replacement of the term.

Galen Poole<sup>a</sup> explains this concern in his article, A Plea for Prevention.<sup>2</sup> He recommends the use of other words, such as incident or injury, which are more appropriate than is accident. Precisely, the word that is most used by specialists in the United States is injury. Susan Baker clearly describes the reasons for this preference:

<sup>&</sup>lt;sup>a</sup>Prevention Task Force Director: Eastern Association for the Surgery of Trauma.

The word injury comes from Latin words that mean "not right". I cannot think of a more fitting term for the number one killer and crippler of children and young people. Surely that is "not right", especially when it is in our power to change the situation.<sup>3</sup>

Consequently, all of those events that result in injuries to people or to property should be renamed. For example: motor vehicle collision versus pedestrian, motorcycle crash, fall, etc. The terms collision, crash, and fall do not have the same connotation as *accident*. Therefore, they can reduce the implicit and widely accepted assumption that these events happen by chance or at random, and are unpredictable and unpreventable.

Additionally, the word accident needs to be replaced because this term does not take into account the unintentional injuries, whether they are self-inflicted or inflicted upon someone else (suicides, homicides, and other violence such as terrorism in its various forms, and wars). Hence, injury control and prevention exceeds the word accident because intentional injuries also are predictable and preventable with suitable intervention strategies and with the knowledge of its epidemiological aspect.

We would like to present as a solid case, an editorial signed by the Editor of the *British Medical Journal*, Ronald Davis, and its Injury Prevention Editor, Barry Pless: "BMJ bans 'accidents'. Accidents are not unpredictable." This article, published by *Injury Prevention* in June 2001, presents *BMJ's* decision to formally remove the word accident from the publication, in order to create awareness about the need of injury prevention.

We believe that the correct and consistent terminology will help improve understanding that injuries of all kinds in homes, schools and workplaces, vehicles, and medical settings, are usually preventable. Such awareness, coupled with efforts to implement prevention strategies, will help reduce the incidence and severity of injuries.<sup>4</sup>

Moreover, it highlights the agreement on the wide range of this problem, which exceeds the semantic point of view.

The debate about the difficulties presented by the use of the word accident has precedents in other publications. The titles of the following articles reflect the existing consensus about the need to use other terms: "An injury is no accident" (1978),<sup>5</sup> "Medical accidents: no such thing?" (1993),<sup>6</sup> "Eschewing accidents" (1999),<sup>7</sup> "How members of

the public interpret the word accident" (1999),<sup>8</sup> "Emergency medicine terminology in the United Kingdom—time to follow the trend?" (2001).<sup>9</sup> Lee Jong-Wook, Director-General of the World Health Organization (WHO), celebrating the World Health Day on 07 April 2004 stated:

Motorized road transport has changed the face of employment, trade, family life and health care, bringing benefits that were unimaginable 100 years ago...however, the price we are paying for such benefits is too high. This is why we have chosen road safety as the theme for World Health Day 2004 and why we are launching the World Report on Road Traffic Injury Prevention. This report is the result of collaboration with the World Bank and a hundred or so experts and donors whom I would like to thank. "Road safety is no accident" is the slogan for our day. It calls upon all of us to recognize that road traffic injuries can be prevented if we take the conscious decision to give safety the priority it deserves. ... Let's decide today to end the carnage on our roads. 10

The goal for replacing the term *accident* must be that the event be understood as the consequence of a causal chain of facts and circumstances in which the subject always can intervene to avoid its occurrence or to mitigate its consequences. That is, as a *preventable fact*. Due to the multiple variables that contribute in the occurrence of an unintentional injury, the comprehension of the event may be a complex task, but it always is possible to establish the pluricausal chain of facts that determined its occurrence, although its moment and its circumstances might not be determined previously.

Avoiding the use of the word accident and working to replace it with other terms is the best way to make injuries be understood and thought of in a different sense. The goal of eliminating the word accident from our vocabulary must be that these facts no longer be associated with ideas such as chance, error, or fate. In short, they must be considered from the injury prevention point of view. The use of a vocabulary pertinent to the trauma field will help move us forward in prevention and control strategies of this disease, which represents the first cause of death for people under 45 years old and the third cause of death to all age groups, and it remains "the neglected disease of modern society". 11,12

### References

- Loimer H, Iur M, Guarnieri M: Accidents and acts of God: A history of the terms. Amer J Pub Health 1996;86:101.
- 2. Poole G: A plea for prevention. J Trauma 1998;45:394.
- Baker S: Advances and adventures in trauma prevention. J Trauma 1997;42(3):369-373.
- Davis R, Pless B: BMJ bans "accidents". Accidents are not unpredictable. BMJ 2001;322:1320-1321.
- 5. Doege T: An injury is no accident. N Engl J Med 1978;298:509-510.
- 6. Evans L: Medical accidents: No such thing? BMJ 1993;307:1438-1439.
- 7. Doege T: Eschewing accidents. JAMA 1999;282:427.
- Girasek D: How members of the public interpret the word accident. *Injury Prevention* 1999;5:19–25.
- Reid C, Chan L: Emergency medicine terminology in the United Kingdom
   —time to follow the trend? Emerg Med 2001;18:79–80.
- World Health Organization Website. Available at www.who.int/dg/lee/speeches/2004/worldhealthday/en/. Accessed 30 June 2004.
- National Research Council. 1966. Accidental Death and Disability: The Neglected Disease of Modern Society. Washington, DC: National Academic Press.
- Institute of Medicine. 1999. Reducing the Burden of Injury. Advancing Prevention and Treatment. In: Bonnie R, Fulco C, Liverman C: Committee on Injury Prevention and Control. Division of Health Promotion and Disease Prevention. Washington, DC: National Academic Press.





EXCELLENCE IN

2005

### 16 - 20 May 2005

Visit the website and join the mailing list EICC, Edinburgh, Scotland, UK

## www.wcdem2005.org

# Abstract Deadline Extended to 15 January

Congress Chairman - Andrew Marsden

For further information on the WCDEM14 Congress please contact:

Concorde Services, 4B 50 Speirs Wharf, Port Dundas, Glasgow G4 9TB, Scotland, UK