

medical costs
benefits injury high occupational
cancer resources
society Employers care Taxpayers nonworker injure
research sixty-five stroke carriers fringe
production out-of-pocket Social diseases
cardiovascular requires individuals part
Security Injured
injury

0.83 27.89 139.89 5.9 26.9
2.26 36.98 0.31 64.0 73.1 94.8 99.09 25.9
BILLION 46.26 36.0 61.0 102.54 17.0

PERSONAS:

THERE ARE SEVERAL GROUPS INTERESTED IN THIS STUDY, SHOWN BELOW.

Corporate Cal: “I want to know how many private employees are injured each year and why.”

Demographics: Professional Managers in large corporations of the private sector

Government Gary: “I want to know how many government employees are injured each year and why.”

Demographics: Government-hired Managers in the public sector

Farmer Frank: “I want to know how many agricultural workers are injured each year and why.”

Demographics: Managers of agricultural business and operations

Self-employed Sam: “I want to know how many independently-employed workers or those hired by small businesses are injured each year and why.”

Demographics: Self-employed workers and small business owners

Doctor Dan: “I want to know how to better treat patients of workplace injuries.”

Demographics: Medical Professionals treating patients of workplace injuries

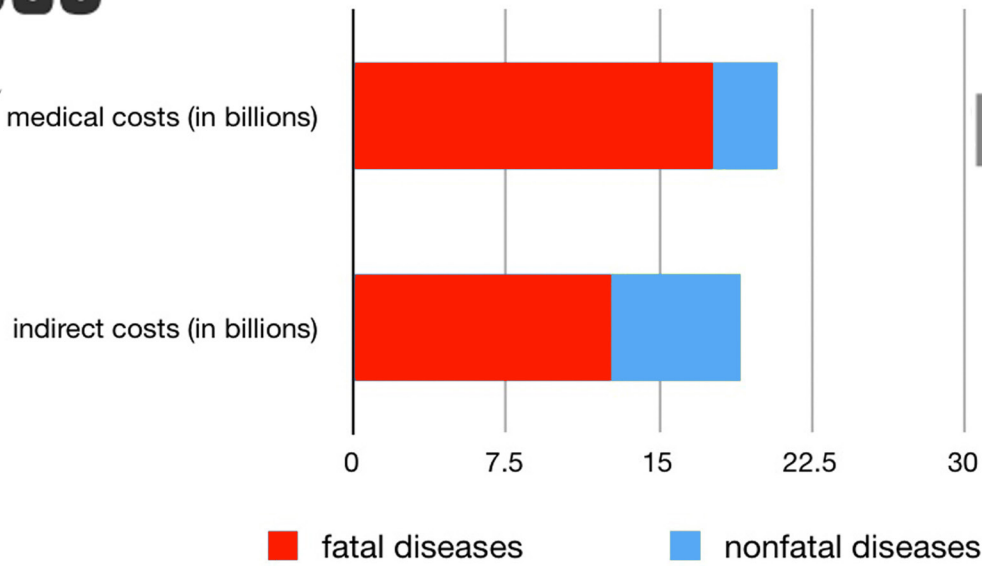
However, the most important persona to cater to is clearly Doctor Dan, since medical professionals are the ones catering to the injuries.

Needs: Doctor Dan wants to know how many of his patients are injured each year due to their occupations.

Therefore, the information must be presented in an easy-to-read format that doesn't take too much time for these busy medical professionals to comprehend.

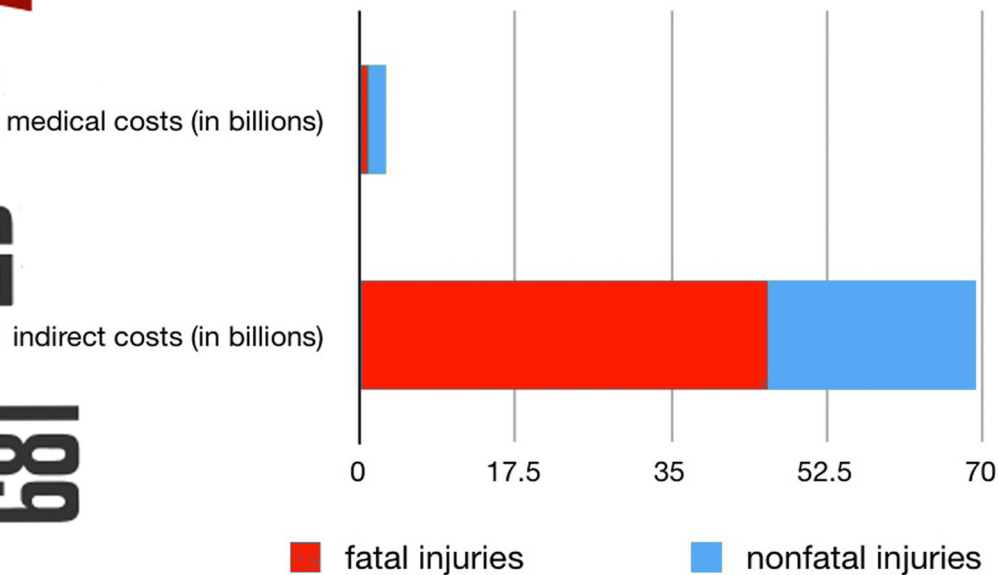
	medical costs (in billions)	indirect costs (in billions)
fatal diseases	17.66	12.67
nonfatal diseases	3.17	6.35

Cost of Occupational Diseases



	medical costs (in billions)	indirect costs (in billions)
fatal injuries	1	45.95
nonfatal injuries	2	23.35

Cost of Occupational Injuries



DATA BREAKDOWN:

NUMBER OF CASES:

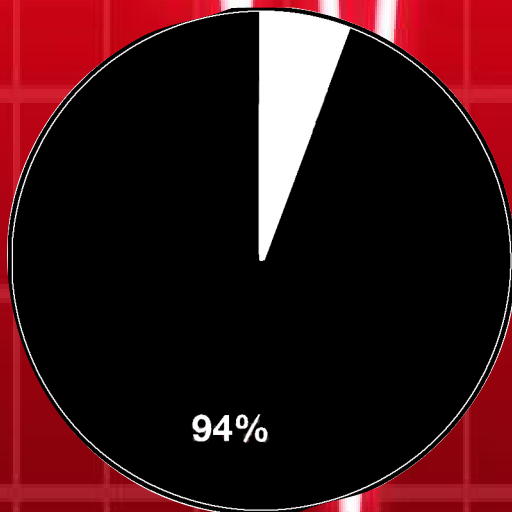
* FATAL DISEASES: 53,445

* NONFATAL DISEASES: 462,704

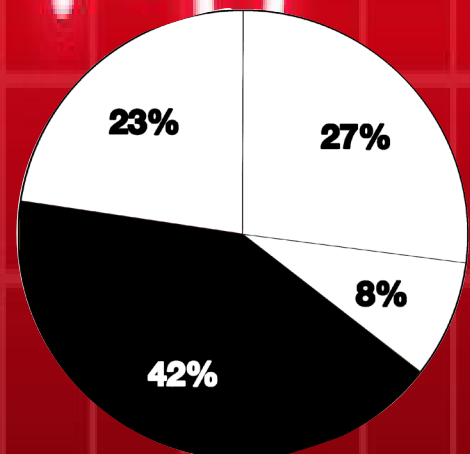
* FATAL INJURIES: 5,657

* NONFATAL INJURIES: 8,558,962

SIMPLE ANALYSIS:



94% OF ALL MEDICAL CASES FOR OCCUPATIONAL HAZARDS ARE NONFATAL INJURIES



HOWEVER, FATAL INJURIES INCUR THE MOST MEDICAL COSTS (42%)

RATIONALE:

The NIOSH article chronicles the rate of injuries and diseases caused by occupational dangers and their cost, most importantly illustrating injuries and diseases within the agricultural community. While there are certainly several different interested parties, or “personas” to which the information is pertinent, the most important group to focus on is clearly the medical professionals treating the sick or injured workers. However, we cannot ignore that the study is indeed useful to the other identified groupings, including farmers and managers of other agricultural endeavors. Therefore, while this data visualization attempts to communicate these statistics to doctors, it has been designed so that the average person can understand it, with the end goal being that all identified parties can take away a general idea of how much these occupational hazards cost them.

The data presented in this report has been drastically simplified from the research article on occupational disease and injury costs. Because the target audience is the medical community, the two graphs have been generated from the total medical costs of occupational fatal and nonfatal diseases and occupational fatal and nonfatal injuries, respectively. By breaking up the data into two simple, separate visuals, the massive and frankly intimidating amount of wording can actually be analyzed and compared at a glance. Condensing this data into user-friendly graphics will persuade managers of all occupations to consider the study seriously instead of skimming it and missing the vital “guts” of the information.

By using this method of data breakdown, we see that the majority of occupational hazard cases were nonfatal injuries, yet it is fatal injuries that incur the most medical cost. Knowing this, our “Doctor Dan” can a.) more accurately predict his patient costs, and b.) hopefully work towards allocating more money into the category where it is most needed.

