



SCSN Briefing Paper No 10

Child Safety

1 Introduction

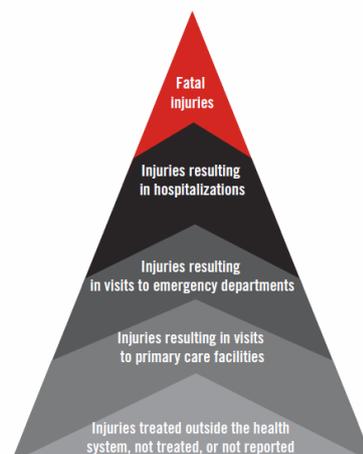
The purpose of this Briefing Paper is to emphasise the importance of child accident safety in a Scottish context and to highlight the key causes of unintentional injuries in children. This paper does not cover information on child protection issues relating to intentional injury or abuse as this is an extremely large topic and will be covered in separate Briefing Papers.

This paper also gives details of Child Safety Week which runs from annually in June and highlights how the week can be used to promote child safety to a wide range of practitioners, families and the general public.

2 Current Status

There are numerous ways in which a child can become injured or fatally wounded. In Scotland, there have been notable decreases in the numbers of children admitted to hospital due to injuries (12,000 to 8,500 from 1998 to 2009¹) however, it is still extremely important to reduce these levels even further. In Scotland, one in seven emergency admissions to hospital for children under 15 are due to unintentional injuries. It is estimated that child injury care in accident and emergency costs £146 million per year, while the total cost to the NHS from child injury is £2 billion^{IBID}.

The majority of the data in this paper is based upon hospital admission or discharge records. However, these numbers do not take into account injuries that are treated at home, by a GP or in accident and emergency, therefore, the actual numbers are considered to be much higher. The World Health Organisations (WHO) injury pyramid² illustrates this issue:



¹ Scottish Government, Good Places Better Health for Scotland's Children: Childhood Unintentional Injuries Evidence Assessment, December 2010 - <http://www.scotland.gov.uk/Resource/Doc/924/0124414.pdf>

² WHO Injury and Violence, Injury Pyramid - http://www.who.int/violence_injury_prevention/key_facts/VIP_key_fact_5.pdf

Burns and Scalds

The Information Services Division (ISD) 2011 Unintentional Injuries Report³ highlights that in Scotland there were 287 children under 15 admitted to hospital due to burns and scalds in the between April 2010 and March 2011. Of these children, the majority (197) were in the one to four age group⁴.

The majority of scalds are from overheated bathwater and the preparation, transit and consumption of hot drinks. It has been evidenced that scalds from hot drinks are twice as common as bath water scalds in the under two age group⁵. A baby's skin is approximately 15 times thinner than that of an adult, making it much more susceptible to heat and due to this a hot drink can still cause scalding up to 15 minutes after making.

The main cause of hospital admissions for burns are uncontrolled fires, however, contact burns from irons, hair straighteners, curling irons etc. are common. Over a five year period (2005 – 2009) the following hospital discharges of children were recorded in Scotland: 16 from burns from uncontrolled fires, 36 from controlled fires, 64 from unknown fires and 723 from contact burns^{IBID}. However, these figures will be considerably higher when taking into consideration the injury pyramid.

Poisoning

The ISD report identified 439 children under that age of 15 who were poisoned in 2010/11, with the majority (351) being in the one to four age group⁶. It is recognised that accidental consumption of painkillers, medicines and household products/cleaners are the main causes of poisoning. The Child Accident Prevention Trust (CAPT) highlights that child resistant caps are not childproof and can be opened by toddlers in a matter of seconds.

A further cause of poisoning, which can be often fatal, is carbon monoxide (CO). The most common source of CO is faulty gas appliances and the gas itself is odourless, colourless and tasteless making it difficult to detect. It is thought that children are more susceptible to CO poisoning due to their small body mass and as they take more breaths per minute than an adult.

Falls

Falls from cots, highchairs, windows and stairs are the most common causes of head injuries and broken bones in children. Falls in children often take parents and carers by surprise as the child was doing something that the adult did not know they could do. The effect of a severe head injury can be life changing as it can lead to learning difficulties, behavioural problems and personality changes.

³ ISD Scotland, Publication Report, Unintentional Injuries, Published December 2011 - <http://www.isdscotland.org/Health-Topics/Emergency-Care/Publications/2011-12-20/2011-12-20-UI-Report.pdf?50660341979>

⁴ ISD Scotland, Unintentional Injuries Data Tables: Table 3: Children, December 2011 - <http://www.isdscotland.org/Health-Topics/Emergency-Care/Publications/data-tables.asp?id=661#661>

⁵ Scottish Government, Good Places Better Health for Scotland's Children: Childhood Unintentional Injuries Evidence Assessment, December 2010 - <http://www.scotland.gov.uk/Resource/Doc/924/0124414.pdf>

⁶ ISD Scotland, Unintentional Injuries Data Tables: Table 3: Children, December 2011 - <http://www.isdscotland.org/Health-Topics/Emergency-Care/Publications/data-tables.asp?id=661#661>

In Scotland, there were 4,222 hospital admissions of children under 15 for falls in 2010/11. Of these, 35% occurred in the home while 65% occurred elsewhere^{IBID}.

Drowning

During 2010/11 in Scotland there were 10 hospital admissions for drowning/submerging incidents among the under 15s with the majority (five) being under the age of one^{IBID}. CAPT state that the majority child drowning incidents occur either in the home or in a garden (home or neighbours) pond. Babies can drown in as little as 5cm of water and can drown silently making no noise or struggle. Away from the home, other common incidents of drowning can occur in seas and lakes. Wind blowing off land can make the sea seem flat but it can sweep inflatables away quickly leaving children extremely vulnerable.

The statistics noted above do not include children who die abroad whilst on holiday. Between 2006 and 2010 55 children and young people drowned whilst abroad. The majority of these (30) were under seven years of age, with the rest split between the eight to 14 and 15 to 19 age ranges⁷. In many cases, a toddler wandered away from their parents and fell into an unsupervised pool.

Choking and Strangulation

A child's throat is much narrower than that of an adult and as such they can become blocked more easily. Young children are still learning to chew, swallow and breathe in the correct order and therefore food is one of the most common causes of choking in children. As with drowning, choking can be silent with no sound to warn that something is wrong. In Scotland, there were 22 hospital admissions for under 15s in 2010/11 for choking, the majority (nine) of which were aged one to four^{IBID}.

Strangulation can take less than 20 seconds to occur in children. Looped blind cords are one of the major causes of child strangulation. In the UK, 22 children have died from strangulation with a blind cord since 1999, 11 of which have been since the beginning of 2010⁸.

Road and In Car Accidents

The Reported Road Casualties Scotland 2010 report⁹ shows that in 2010 there were 1,376 road casualties aged 0 to 15. The table below shows the number of injuries, serious injuries and deaths of children in 2010 in relation to the mode of transport involved.

⁷ RoSPA, UK Citizen Overseas Drowning Statistics –2006 to 2010.

⁸ RoSPA, Blind Cord Initiative, 2011 - <http://www.rospace.com/about/currentcampaigns/blindcords/>

⁹ Transport Scotland, Reported Road Casualties Scotland 2012 , October 2011 - <http://www.transportscotland.gov.uk/files/documents/reports/j199237/j199237.pdf>

Type of Incident	Injuries	Serious injuries	Deaths	Total
Pedestrian	492	150	1	643
In Car	464	40	1	505
Pedal Cycle	121	23	1	145
Other (motorcycle, bus, taxi)	72	10	1	83
Total	1,149	223	4	1,376

The report also highlights that the peak time for child road casualties is 3pm to 5pm on weekdays, followed by a second peak between 5pm and 8pm. Fridays have been evidenced as the peak day of the week for child road casualties and August was named as the peak month.

It is estimated that children have difficulty judging speeds and distances until around the age of eight years old and CAPT state that one third of all reasons given for road pedestrian collisions in children is that they did not stop at the kerb or look before stepping into the road¹⁰

In addition to road traffic accidents, there are injuries which can be sustained whilst the car is stationary e.g. many children can be injured through fingers being trapped in car doors.

3 Key Considerations

Preventative Spend

The Transport Research Laboratory (TRL) Re-Evaluation of Home Accidents Report¹¹ estimates the following costs for road, home and leisure accidents (the report assumes that the cost of leisure accidents is the same as those at home).

	Road Accident	Home/Leisure Accident
Fatal	£1,624,330	£1,611,400
Serious	£183,650	£45,600
Slight	£14,160	£8,300

Preventative Spending is simply spending to prevent rather than spending to rectify. An increased approach to Preventative Spending within the child safety sector will ensure both long and short term results within society. Local Authorities and Community Safety Partnerships are well placed to implement Preventative Spending, with many already carrying out projects with prevention in mind.

Further information relating to Preventative Spend, with examples from RoSPA's blind cord initiative, can be found in the SCSN Policy and Strategy paper:

<http://www.safercommunitiescotland.org/Documents/PS03%20-%20Preventative%20Spend.pdf>

¹⁰ CAPT, Small Steps to Safety Ideas Booklet, April 2012 - <http://www.childsafetyweek.org.uk/wp-content/uploads/2009/04/CSW-ideas-booklet.pdf>

¹¹ Transport Research Laboratory, Re-Evaluation of Home Accidents, March 2010 - <http://www.rospace.com/homesafety/Info/re-valuation.pdf>

Child Safety Report Cards

In June 2012 the European Child Safety Alliance will publish Child Safety Report Cards for 31 European countries. The cards describe how well a country is doing to make it safe for children, the gaps in action on unintentional injury that need to be addressed and which good practices should be adopted to prevent injuries and to save more children's lives. The previous (2009) Scotland Report Card and country profile can be accessed at the following links:

<http://www.childsafetyeurope.org/reportcards/info/scotland-report-card.pdf>
<http://www.childsafetyeurope.org/reportcards/info/scotland-country-profile.pdf>

Scotland's Road Safety Targets

The Scotland's Road Safety Framework to 2020 summary report¹² describes the road safety vision for Scotland and details aims and commitments, and targets for reductions in road deaths and serious injuries to 2020. The framework outlines the following aims for children under the age of 16:

	2015 Milestone % Reduction	2020 Target % Reduction
Under 16's killed	35%	50%
Under 16's seriously injured	50%	65%
Slight casualties (all)	-	10%

Child Safety Week

Child Safety Week is an initiative run by the Child Accident Prevention Trust (CAPT). The week provides an opportunity to highlight that accident prevention is not about restricting children but about creating safer environments to allow children to lead healthy active lives. Previous Child Safety Weeks have had a proven impact on parental awareness and behaviour with independent polling from 2011 revealing that one in three parents who were aware of Child Safety Week took action to reduce the risk of a serious accidental injury happening to their children. Furthermore, the week has become a proven way of forging partnerships with 87% of 2011 Child Safety Week activities being carried out in partnership with other agencies and organisations. Partnerships who supported the week are from a wide range of sectors including: early years, accident prevention, community safety, community development, sustainable travel, education, health, social inequalities and housing.

The 2012 theme of 'Small Steps to Safety' aims to convey the clear message that it only takes a few small steps to help make a child's environment safer whilst reflecting the small footsteps taken by a young child. CAPT have produced a 'Small Steps to Safety' ideas booklet which gives key facts and prevention advice for a variety of child safety issues. There are two styles of the booklet – interactive and printable. The links to both are:

¹² Scottish Government, Scotland's Road Safety Framework to 2020 Summary, June 2009 - <http://www.scotland.gov.uk/Resource/Doc/274552/0082161.pdf>

Interactive - www.childsafetyweek.org.uk/wp-content/uploads/2009/04/CSW-ideas-booklet-interactive.pdf

Printable -

<http://www.childsafetyweek.org.uk/wpcontent/uploads/2009/04/CSW-ideas-booklet.pdf>

4 Conclusions

Scotland are successfully reducing the numbers of children killed or injured each year, however, it is obvious that even one death or injury is still too many and as such projects, schemes and frameworks which work towards reducing the risks for children are crucial. Furthermore, the education of risks and associated preventative measures is essential for people who interact and deal with children.

Child Safety Week provides a vehicle to highlight the importance of child safety and actions which can be used to protect and prevent children from being harmed.

5 Links

Below are links to websites relating to child safety which may be of further use:

- Child Accident Prevention Trust (CAPT) - www.capt.org.uk
- CAPTs Child Safety Week Website - www.childsafetyweek.org.uk
- Royal Society for the Prevention of Accidents – child safety section - www.rospa.com/childsafety
- European Child Safety Alliance - www.childsafetyeurope.org

Briefing Paper produced by:
Scottish Community Safety Network
May 2012
Version 1