



IHPE Position Statement: Unintentional Home Injuries to Children (Under 5s)

Key Information

- Child injuries are an important global public health problem.
- Unintentional injuries in and around the home are a leading cause of preventable death for children under five years and are a major cause of serious disability and ill health.
- The burden of injury falls unequally. Children in low-income countries and those from poorer neighbourhoods in high-income countries are the most vulnerable.
- Child injuries have been a neglected area for many years, particularly in low and middle-income countries.
- There are evidence-based approaches available to prevent many unintentional injuries to children.

Statement

1. The quality and quantity of data for child injury prevention should be improved. This is important for effective needs assessment, raising awareness, monitoring and evaluation.
2. It is important to raise awareness amongst the public, policy makers, and key professions. The magnitude, importance and preventability of child injuries is not widely appreciated.
3. Leadership is needed to ensure a multisectoral approach is taken and initiatives are instigated. A senior person should be designated at national and local levels to coordinate and drive forward actions.
4. Every country should develop a child injury prevention strategy. This could either stand alone or be an integral part of another strategy (e.g. national child health strategy).
5. Health inequalities should be tackled through anti-poverty strategies and by targeting deprived areas.
6. Interventions should be provided to prevent and control child injuries. They should be based on sound evidence, adequately resourced and be evaluated.

7. Reducing the burden of childhood injuries, whilst at the same time tackling inequalities in injury requires both universal and targeted approaches.
8. Greater research capacity is needed and more opportunities for training injury researchers (e.g. PhD studentships), particularly in low and middle-income countries. Future research should include the causes, costs and prevention of child injuries. Implementation research is also needed to ensure evidence is being translated to practice.

Additional Statement in Relation to England

As a considerable amount of child injury prevention research has been undertaken in England an additional statement is provided. Note: some of these points will also be relevant to other similar countries.

1. In England priorities should include: choking, suffocation and strangulation; falls; poisoning; burns and scalds; and drowning.(1)
2. **Safe and active at all ages: a national strategy to prevent serious accidental injuries in England.**(2)
The new national accident prevention strategy should be used as a call to action for different individuals, groups and organisations. The strategy has been produced by RoSPA and other eminent organisations including FPH, IHPE, Royal College of Paediatrics and Child Health, Royal College of Emergency Medicine and Royal College of Nursing.(2)
3. The Government should support this strategy and ensure that it is adequately resourced so that the evidence-based interventions can be effectively implemented.(3-9)
4. Local authorities and their partners should take heed of the priorities and actions recommended by Public Health England.(1)
5. There is a NICE-endorsed Injury Prevention Briefing (IPB) for practitioners, linked to guidelines PH 29/30.(7-9) The target audiences for the IPB are managers and practitioners of organisations such as children's centres, health visiting teams, family support agencies and fire and rescue services. Practitioners should use this evidence-based resource in their work with families.
<https://www.nottingham.ac.uk/research/groups/injuryresearch/documents/ipb-2.pdf>
6. Health visitors should make use of Institute of Health Visiting online training package – modules 1 and 2.
<https://ihv.org.uk/for-health-visitors/resources/e-learning/>
7. Commissioners of child health services should take heed of a guide for commissioners on preventing unintentional injuries among the under-fives (Produced by CAPT and the University of Nottingham).
<https://www.nottingham.ac.uk/research/groups/injuryresearch/documents/kcs-guide-for-commissioners.pdf>

8. Childrens Centres should be supported so that the practitioners can fully develop their child injury prevention roles.(10-12)
9. Training in injury prevention should be provided for health care professionals and early years practitioners.(7,13)
10. Public health teams in local authorities should be adequately resourced so that they can facilitate, support and drive forward effective action.(14,15)
11. Specific interventions to prevent home injuries in the under-fives -
 - (a) **Intensive home visiting programmes**
Those aimed at improving a range of mother and child outcomes significantly reduce injury risk in young children.(16)

(b) **Home safety education and safety equipment**

Home safety education and provision of safety equipment helps families make homes safer.(17,18) This includes increasing fireguard use, possession of functional smoke alarms, safety gate use on stairs, safe storage of poisons; having a safe hot tap water temperature, emergency contact numbers, a fire escape plan and reducing baby walker use.

The most effective interventions combine home safety inspections with education and providing or fitting equipment.(19-21) NICE guidance (PH29 and PH30) and Public Health England recommend (1,7-9):

- Families with children at high risk of injury receive home safety assessments and advice and referral to safety equipment schemes
- Home safety advice is incorporated into home visits taking place for other reasons
- Health visitors, school nurses and GPs are informed about families who may benefit from injury prevention advice and home safety assessments

(c) **Thermostatic mixing valves (TMVs)**

Public health commissioners should work with landlord organisations and social housing providers to promote installation of TMVs when undertaking major refurbishments and provide scald prevention information.(7,9,22,23)

Forthcoming Research Results

Between 2009/11 the Government funded a time-limited £18m home safety equipment scheme in England - **Safe At Home**.(24) National coordination of the scheme was undertaken by the Royal Society for the Prevention of Accidents. The aim of the scheme was:

'To reduce unintentional injury and death of children by supporting participating schemes to provide home safety equipment and advice to disadvantaged families'.

A previous evaluation focused on process measures (e.g. coverage), acceptability and implementation costs.(24) More recently, the effect of the scheme on injury rates and its economic impact have been calculated. The results will be published at the end of 2019.

References

- 1) Public Health England. Reducing unintentional injuries in and around the home among children under 5 years. London: Public Health England, 2018.
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/696646/Unintentional_injuries_under_fives_in_home.pdf
- 2) RoSPA. Safe and active at all ages: a national strategy to prevent serious accidental injuries in England. Birmingham: RoSPA, 2018.
<https://www.rospace.com/national-strategy/>
- 3) Peden, M., K. Oyebite, J. Ozanne-Smith, A. Hyder, C. Branche, F. Rahman, F. Rivara, and K. Bartolomeos. World Report on Child Injury Prevention. Geneva: WHO, 2008.
https://www.who.int/violence_injury_prevention/child/injury/world_report/en/
- 4) Watson M C and Errington G. Preventing unintentional injuries in children: successful approaches. Paediatrics and Child Health 2016; 26(5), 194-199
[https://www.paediatricsandchildhealthjournal.co.uk/article/S1751-7222\(15\)00255-3/pdf](https://www.paediatricsandchildhealthjournal.co.uk/article/S1751-7222(15)00255-3/pdf)
- 5) Watson M C and Lloyd J. The need to include accident prevention as a key area in the forthcoming Green Paper on Prevention. British Medical Journal Rapid Response 28th February 2019.
<https://www.bmj.com/content/364/bmj.l860/rr>
- 6) Watson M C and Lloyd J. Child accident prevention: evidence-based approaches. British Medical Journal Rapid Response 10th June 2019.
<https://www.bmj.com/content/365/bmj.l4043/rr>
- 7) National Institute for Health and Clinical Excellence. Strategies to Preventing Unintentional Injuries in under 15s. NICE Public Health Guidance 29. London: NICE, 2010.
<https://www.nice.org.uk/guidance/ph29>
- 8) National Institute for Health and Clinical Excellence. Preventing Unintentional Injuries in the Home among Children and Young People Aged under 15: Home Safety Assessments and Providing Safety Equipment. NICE Public Health Guidance 30. London: NICE, 2010.
<https://www.nice.org.uk/guidance/ph30>
- 9) National Institute for Health and Clinical Excellence. Strategies to Prevent Unintentional Injuries among Children and Young People Aged under 15: Evidence Update February 2013. London: NICE, 2013.
<https://www.nice.org.uk/guidance/ph29/evidence/strategies-to-prevent-unintentional-injuries-among-under15s-evidence-update-67472317>
- 10) Watson, M., C. A. Mulvaney, D. Kendrick, J. Stewart, C. Coupland, M. Hayes, and P. Wynn on behalf of the Keeping Children Safe programme team. "National Survey of the Injury Prevention Activities of Children's Centres." Health & Social Care in the Community 2014; 22 (1): 40-46.
<https://onlinelibrary.wiley.com/doi/abs/10.1111/hsc.12059>

11) Watson, M., C. Mulvaney, C. Timblin, J. Stewart, C. Coupland, T. Deave, M. Hayes, and D. Kendrick. "Missed Opportunities to Keep Children Safe? National Survey of Injury Prevention Activities of Children's Centres." *Health Education Journal* 2016; 75 (7): 833–842.

<https://journals.sagepub.com/doi/abs/10.1177/0017896916629816>

12) Institute for Fiscal Studies. *The health effects of Sure Start*. London: Institute for Fiscal Studies, 2019.

<https://www.ifs.org.uk/publications/14139>

13) Public Health England. *Reducing unintentional injuries in and around the home among children under five years*. London: Public Health England, 2014.

<https://www.gov.uk/government/publications/reducing-unintentional-injuries-among-children-and-young-people>

14) Chisholm A, Watson M, Jones S, Kendrick D. Child injury prevention: a survey of local authorities and health boards. *International Journal of Health Promotion and Education* 2017; 5(4):205–214.

<https://www.tandfonline.com/doi/abs/10.1080/14635240.2017.1312479>

15) Watson M C and Thompson S. Government must get serious about prevention. *BMJ* 2018;360:k1279.

<https://www.bmj.com/content/360/bmj.k1279>

16) Kendrick, D., Mulvaney, C. A., Ye, L., Stevens, T., Mytton, J. A., & Stewart-Brown, S. Parenting interventions for the prevention of unintentional injuries in childhood. *Cochrane Database Syst Rev.* 2013, 3:CD006020.

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD006020.pub3/abstract>

17) DiGiuseppi, C., & Roberts, I. G. Individual-level injury prevention strategies in the clinical setting. *The Future of Children* 2000, 10(1), 53-82.

<https://www.jstor.org/stable/i273909>

18) Kendrick, D., Young, B., Mason-Jones, A. J., Ilyas, N., Achana, F. A., Cooper, N. J., et al. Home safety education and provision of safety equipment for injury prevention. *Cochrane Database of Systematic Reviews* 2012, Issue 9. Art. No.:CD005014. DOI: 10.1002/14651858.CD005014.pub3.

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD005014.pub3/epdf/full>

19) Cooper, N. J., Kendrick, D., Achana, F., Dhiman, P., He, Z., Wynn, P., et al. Network Meta-analysis to Evaluate the Effectiveness of Interventions to Increase the Uptake of Smoke Alarms. *Epidemiologic Reviews* 2012, 34(1), 32-45, doi:10.1093/epirev/mxr015.

<https://academic.oup.com/epirev/article/34/1/32/492847>

20) Achana, F. A., Sutton, A. J., Kendrick, D., Wynn, P., Young, B., Jones, D. R., et al. The Effectiveness of Different Interventions to Promote Poison Prevention Behaviours in Households with Children: A Network Meta-Analysis. *PLoS ONE* 2015, 10(4), e0121122, doi:10.1371/journal.pone.0121122.

<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0121122>

21) Hubbard, S., Cooper, N., Kendrick, D., Young, B., Wynn, P. M., He, Z., et al. Network meta-analysis to evaluate the effectiveness of interventions to prevent falls in children under age 5 years. *Injury Prevention* 2014, doi:10.1136/injuryprev-2013-041135.

<https://injuryprevention.bmj.com/content/21/2/98>

22) Kendrick D, Stewart J, Smith S, Coupland C, Hopkins N, Groom L, Towner E, Hayes M, Gibson D, Ryan J, O'Donnell G, Radford D, Phillips C, Murphy R. Randomised controlled trial of thermostatic mixer valves in reducing bath hot tap water temperature in families with young children in social housing. *Archives of Disease in Childhood* 2011 Mar;96(3):232-9.

<https://adc.bmj.com/content/96/3/232>

23) Phillips CJ, Humphreys I, Kendrick D, Stewart J, Hayes M, Nish L, Stone D, Coupland C, Towner E. Preventing bath water scalds: a cost-effectiveness analysis of introducing bath thermostatic mixer valves in social housing. *Injury Prevention* 2011 Aug;17(4):238-43.

<https://injuryprevention.bmj.com/content/17/4/238>

24) Errington G, Watson M, Hamilton T, Mulvaney C, Smith S, Binley S, Coupland C, Kendrick D, Walsh P. Evaluation of the National Safe At Home Scheme. Final report for RoSPA. Nottingham: University of Nottingham, 2011.

<https://www.rospa.com/rospaweb/docs/advice-services/home-safety/final-evaluation-report-safe-at-home.pdf>

Organisations

American Burn Association (ABA).

Involved in promoting and supporting burn-related care, prevention, education, and research.

<http://ameriburn.org/>

The Australian & New Zealand Burn Association (ANZBA)

Is the peak body for health professionals responsible for the care of the burn injured in Australia and New Zealand.

<https://anzba.org.au/>

British Burn Association (BBA).

Is a charity for people interested in supporting and promoting burn care in the UK and Ireland, for the benefit of the general public. Its core aims are to educate and to encourage research into all aspects of burn injury, its treatment and prevention.

<https://www.britishburnassociation.org/>

Centre of Excellence for Early Childhood Development

The mission of the Centre of Excellence for Early Childhood Development is to improve our knowledge on the development of young children. Many topics are covered. Injury prevention (Topic Editor: Frederick Rivara)

<http://www.child-encyclopedia.com/injury-prevention/according-experts>

Children's Burns Trust

A national charity dedicated to providing rehabilitation support for burned and scald injured children and their families, as well as prevention and awareness campaigns

<https://www.cbtrust.org.uk/>

The Child Accident Prevention Trust (CAPT)

A UK charity working to reduce the number of children and young people killed, disabled or seriously injured in accidents.

<https://www.capt.org.uk/Pages/Category/services>

CAPT also maintains the website – “Making the Link” This supports senior practitioners and policymakers working to prevent unintentional injury to children and young people in England.

<http://www.makingthelink.net/>

European Association for Injury Prevention and Safety Promotion (EuroSafe).

Their mission is to prevent home and leisure accidents by working in partnership with industry, governments, research institutes and health and safety practitioners to help reduce the greatest risks.

<http://www.eurosafe.eu.com/home>

The European Burns Association (EBA)

Promotes burn prevention and all other aspects of burn treatment.

<https://www.euroburn.org/>

Interburns

An international volunteer network of expert health professionals working to transform global burn care and prevention through education, training, research and capacity-building.

<http://interburns.org/>

The International Society for Burn Injury (ISBI),

One of the main aims of the society is to disseminate knowledge and stimulate prevention in the field of burns.

<http://www.worldburn.org/>

The Keeping Children Safe research programme

A collaboration between University and NHS researchers from Nottingham, Bristol, Norwich, Newcastle and Leicester. The Child Accident Prevention Trust and local Primary Care Research Networks, NHS Trusts and Children's Centres were also involved. Produced research and resources for practitioners and commissioners.

<https://www.nottingham.ac.uk/research/groups/injuryresearch/projects/kcs/index.aspx>

The Royal Society for the Prevention of Accidents (RoSPA)

A charity helping to put an end to unnecessary suffering at work, on the road, in the home, and at leisure. Their vision: Life, free from serious accidental injury.

<https://www.rospace.com/>

Safe Kids Worldwide

Working to help families and communities keep kids safe from injuries. More than 400 coalitions in the United States and partners in more than 30 countries to reduce traffic injuries, drownings, falls, burns, poisonings and more.

<https://www.safekids.org/>

World Health Organisation (WHO).

Two key documents:

- World report on child injury prevention
- Preventing injuries and violence: a guide for ministries of health

<https://www.who.int/topics/injuries/en/>

Lead Authors: Dr Michael C. Watson
Dr John Lloyd
Institute of Health Promotion and Education
<https://ihpe.org.uk/>

@InstituteHPE

24th June 2019