

ENVIRONMENTAL SCAN ON CHILD FALL PREVENTION ACTIVITY AND RESOURCES: SO WHAT? NOW WHAT? * SUMMARY

Using a previously conducted Environmental Scan** as a starting point for discussion, stakeholders were approached for an interview and discussion.

METHODS:

- A total of 21 interviews were conducted with 23 key informants, using an open-ended, semi-structured questionnaire with 7 questions.
- Informants are: health promotion leads and coordinators, injury prevention specialists and policy consultants, trauma coordinators, researchers and data experts and agency planners.

FINDINGS: TRENDS, PATTERNS AND EMERGING CONTEXTUAL ISSUES

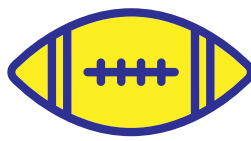
Differences Between Falls in Older Adults and Children:



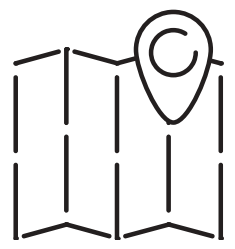
1.) AWARENESS OF THE ISSUE



2.) DEGREE OF INJURY



3.) COMPETITION FOR RESOURCES

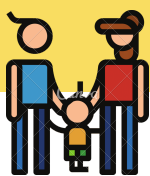


4.) WHERE CHILDHOOD FALL PREVENTION FITS

Siloes



- **Jurisdictional** : fragmentary approaches to childhood fall prevention where adoption of policy and practice is piecemeal
- **Mandates and organizational relationships**: mandates between health authorities, organizations, hospitals do not align regarding childhood fall prevention
- **Health and public health**: disconnect between health/hospitals and public health



Balancing Risk and Play.

- **Many concepts covered**: risky play, active play, unstructured play, physical literacy, harm reduction
- **Parenting**: balancing healthy child development and risks associated with exploring the world; the need to teach children how to safely take risks.
- **Practical challenges**: playground standards too rigid; need a national conversation to address the challenges of jurisdictional siloes; the influence of media



Vulnerable Populations

Low socioeconomic status (SES), immigrants and refugees, Indigenous peoples

- Experience community safety issues other than falls
- The need to build trust with vulnerable populations and utilizing appropriate approaches

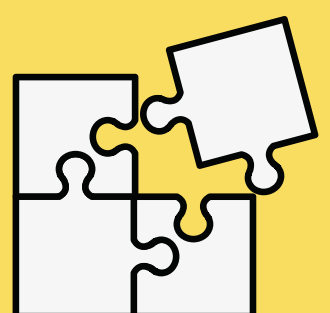
Social Policy Relevance

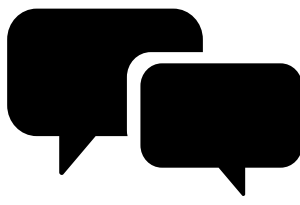
A growing interest in social and structural determinants of health policy and the application of socio-ecological approaches

- Focusing efforts according to specific aspects of childhood developmental stages

Address Practical Challenges

- Implementing social policies that address local community context
- Getting the attention of stakeholders working in active living
- Having formal and informal collaborations
- Changing system landscapes and structures
- Identifying stakeholders working in the field
- Having sufficient resources and prioritizing
- Making the information culturally relevant





RECOMMENDATIONS

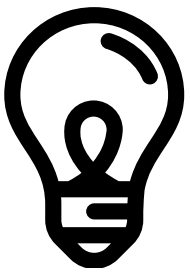
GENERAL RECOMMENDATIONS

- Take a broader approach to “Child Safety: at home, play and school” and situate child fall prevention within that.
- Bring the differing schools of thought together to address the tensions between helicopter parenting and overly restrictive standards and proponents of unstructured/risky/active outdoor play.



CONSIDERATIONS

- Consider approaches that can break down siloes and the ways injury prevention is stratified and re-conceptualize where childhood fall prevention fits at home, play and school environment.
- Consider whether there is interest in preventing all falls or just serious falls. The issue being raised about falls being a regular part of childhood is an important consideration, but how this is addressed is equally important.



ADDRESSING ISSUES

- Examine how certain aspects of childhood fall prevention can be addressed more holistically and comprehensively, in order to work across jurisdictions.
- Examine the issues of data and the media: if the data being examined is too narrow and does not take into account the broader context and implications, then the media can misuse it.
- Examine community safety as a whole for newcomers, immigrants and refugee children.



WORK TOGETHER

- National and provincial approaches to improving the linkage and collaboration of health, public health and other sectors of activity.



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