

Injury and Violence Prevention Center

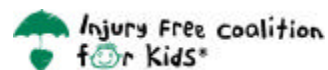
Injury Prevention Parent Workshop Series

**Facilitator's Guide  
2005**

Injury Free Coalition for Kids<sup>®</sup>

Children's Hospital of New York-Presbyterian

Columbia University



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# Injury and Violence Prevention Center

## Injury Prevention Parent Workshop Series

### Facilitator's Guide

#### Introduction

Injury is the leading cause of death and disability for children in the United States aged 1 to 21 years. While this statistic may sound discouraging, many severe childhood injuries and injury-causing incidents can be prevented through specific precautions that make a child's environment safer. The injury risks that a child confronts change over time as he/she grows and develops. Similarly, the precautions to protect the child must also change in response to the new hazards.

Parents can be the most effective agents of change for their children. Many other people—including neighbors, friends, family, community members, teachers, etc.—touch a child's life as well. All adults can contribute to making the environment safe for children in two ways: 1) through direct action (making environmental changes) and 2) through indirect action (supporting parents as they enact changes to protect their children, or advocating on behalf of parents and children to legislators and others). Parents and other adults in the community are both *responsible for* and *capable of* changing their homes and their communities to be more “kid-friendly”—that means, to be safer places for children to grow up.

The workshops described in this Guide are intended for parents of preschool-aged children who live in an urban environment. There are six workshops covering the following topics: the preventability of childhood injury; playground safety; bicycle/wheel safety; traffic and motor vehicle safety; and home safety. The suggested activities are interactive and require the participation of the parents attending the workshop. The written materials were designed to accommodate a variety of literacy levels. However, these materials are only take-home supplements to the group learning that the workshops promote. In fact, the workshops themselves do not depend on the written handout materials, but on the quality of the group activities. The most important components for workshop success are an energetic facilitator and the participation of all members of the parent group.

The activities can be adapted to many different settings, audiences, time frames, and student needs. This Guide will help you lead each session and adapt the materials appropriately to the particular circumstances, experiences, and interests of your group.

If you are reading this Guide, you are part of the solution to the pediatric injury problem. You are an advocate for children and an educator for parents. We thank you for taking on the responsibility of preventing injuries to children, and for helping us get the word out about building safe communities for the youngest members of society!

## Glossary

<u>Advocacy</u> *	<b>n.</b> The act of pleading or arguing in favor of something, such as a cause, idea, or policy; active support.
<u>Cognitive Development</u> *	<b>n.</b> The growth and maturation over time of the mental process of knowing, including aspects such as awareness, perception, reasoning, and judgment.
<u>Developmental Milestone</u>	<b>n.</b> A skilled learned by a child during his/her process of growth often understood as a signal that the child has achieved a particular maturity expected for the child's age
<u>Hazard</u> *	<b>n.</b> 1. A chance of being injured or harmed; danger: <i>Space travel is full of hazards.</i> 2. A possible source of danger: <i>a fire hazard</i>
<u>Injury</u> *	<b>n.</b> 1. Damage or harm done to or suffered by a person or thing: <i>escaped from the accident without injury; a scandal that did considerable injury to the campaign.</i> 2. A particular form of hurt, damage, or loss: <i>a leg injury</i>
<u>Occupant</u> *	<b>n.</b> One that occupies a position or place: <i>the occupant of a motor vehicle</i>
<u>Pedestrian</u> *	<b>n.</b> A person traveling on foot, a person walking
<u>Pediatric</u> *	<b>adj.</b> Dealing with the care of infants and children and the treatment of their diseases
<u>Precaution</u> *	<b>n.</b> An action taken in advance to protect against possible danger, failure, or injury; a safeguard: <i>followed safety precautions when using heavy machinery</i>
<u>Risk</u> *	<b>n.</b> 1. The possibility of suffering harm or loss; danger. 2. A factor, thing, element, or course involving uncertain danger; a hazard: <i>"the usual risks of the desert: rattlesnakes, the heat, and lack of water" (Frank Clancy).</i>
<u>Severe Injury</u>	<b>n.</b> For the purpose of collecting data about injuries, any injury resulting in hospitalization or death

All definitions with an asterisk (\*) were adapted from:

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## Key Themes

There are four key themes that should be stressed throughout each of the six sessions and always when discussing safety with parents and other caretakers of children.

- ❖ **Child Development:** Children follow a natural course of cognitive (learning), emotional, and physical development. So, what is reasonable to expect from a four-year-old is too much to expect from a two year old, because s/he is not at the same level on the developmental spectrum. In addition, every child develops at his or her own speed. While there are “developmental milestones” that most children meet, the appropriate age range for meeting them varies considerably. The characteristics and developmental stage of an individual child should be considered when thinking about what safety hazards that child might face.
- ❖ **Supervision:** Children need *consistent, positive, directive* supervision and guidance. Adults play a critical role in protecting children from injuries by supervising children and their play environments, including toys, TV, video games, and playground equipment. Parents and caregivers *do* have the ability, and the responsibility, to supervise children’s play as well as their play spaces but without smothering their creativity, activity, and development.
- ❖ **Discipline:** Improving communication, discipline, and supervisory skills in parents may be injury prevention itself. Helping parents to express their feelings and concerns, and working with them to develop supervision and guidance strategies, will teach them to deliver firm, consistent, gentle, and effective discipline messages to their children, preventing both intentional and unintentional injury and positively affecting the parent/child relationship overall.
- ❖ **Preventability of Injury:** Most childhood injuries can be prevented and parents and caregivers have the power to do so! Many parents do not feel in control of their own or their child’s environment, or of their child’s choices and behaviors. But parents and caregivers are the most important and constant influence on young children. They are a child’s first teachers, and a child depends on them for examples of behavior, as well as for their safety, security, and well being. With some skills-building, support, and encouragement, parents will feel confident about their abilities to protect their children from injuries!

These four points form the foundation of this guide and of the six sessions described. Facilitators should remind themselves that these are the most important messages to get across each time. Directly or indirectly, the exercises during each lesson should bring parents closer to understanding these key themes, in addition to achieving the specific injury prevention goals of each lesson.

## Evaluation

It is important to evaluate the effectiveness of this curriculum and assess its usefulness in teaching the principles of injury prevention. Please take attendance at each session. Have participants fill out the one page, anonymous evaluation form found at the back of the handout for each session and hand it in to you. Please send these back to us: they will be vital in knowing what to retain and what to change in this curriculum in future years.

## *Session I: Injuries CAN Be Prevented!*

⇒ Pass around attendance sheet.

### 1.) Ice Breaker

*Purpose:* The icebreaker activity will allow the participants and the facilitator to get to know each other. The participants will learn the facilitator's reasons for conducting the workshop, and the facilitator will hear from each parent and find out the ages of her children. It is important that the facilitator be aware of the parents who have children younger or older than their Head Start child so that safety issues relevant to children of other ages may also be incorporated into the lesson. The facilitator can remind the parents who have only preschool-aged children that every parent will face new challenges as their little ones grow older, and that thinking now about the child's future will help her prepare for what is to come. Encourage the parents in the group to learn from each other's experiences (bad and good). Parents are their children's first teachers, and can be very effective at teaching one another. The icebreaker activity will help set the tone for participation from every member of the group and for the sharing of all experiences— both the successes and the challenges.

*Action:* Arrange chairs in circle if possible. Have each person in the circle state her first name, how many children she has, and how old they are. The facilitator introduces herself last, then goes into an overview of the workshop series and of today's workshop.

- ⇒ Use the Overview / En General sheet in the participant binder to outline the objectives of today's session.
- ⇒ Explain that today's session includes general information that may help them protect their children from injuries.
- ⇒ *Alternative:* If the participants already know each other and the facilitator, this activity may be skipped, or another warm-up activity may be substituted.

### 2) Brief Whole Group Discussion

*Purpose:* To further introduce the injury topic to the participants. This activity should make the parents aware of three points: 1) Injury is common—it is an inevitable part of life for all children as part of their normal development; 2) Severe injury, that is, injuries that result in hospitalization of a child, are much less common. Parents often think that these injuries are accidents that cannot be prevented, but that they will not happen to their own children; and 3) There **are** certain things that parents and other adults can do to make the places that children live and play safer for them, to protect them from a **severe** injury.

*Action:* Ask: "Raise your hand if any of your children has ever had to be hospitalized because of an injury." Count out loud, note on the board how many. Ask: "How many have had to take their child to the Emergency Room because of an injury?" Count out loud, mark down the number. Ask: "How many have put a band-aid on your child because of an injury—a scrape, cut, bruise...?" Point out that everyone (or almost everyone) has raised their hands.

The bottom of the Injury Prevention Pyramid, shown in blue on the cover of the materials for this session, and parent responses to the last question demonstrate that deaths and even hospitalizations from injuries are only a very small portion of the injuries that actually occur to children. Parents tend to think that injuries are not preventable – they are a normal, inevitable consequence of childhood

development. Because most injuries to children are not severe, parents feel that the really severe injuries will not happen to their own children. Severe injuries—injuries that result in hospitalization or death—are not common, but they do happen, and they are preventable. In this and the following workshops, we will be discussing the patterns that injuries follow, based on the age, developmental stage, and sociodemographic characteristics of children; and the ways parents can prevent severe injuries to their own children.

- ⇒ Emphasize child development: What is a hazard for a preschooler was probably not a hazard when the same child was only 4 months old, and it is not likely to be a hazard when the child is 8 years old. The safety risks in a child's surroundings are constantly changing as the child develops and learns new skills.

Children do get hurt as part of growing up, and often. There is no immunization for injury like there is for chicken pox or the flu. Exploration, and therefore injury, are parts of normal child development. Exploration is healthy, and sometimes will result in minor injury. On the other hand, there are certain things that parents and adults can do to make the places that our children live and play safer, and to avoid a serious, severe injury.

Ask two participant volunteers to share a quick story of a time that a child they knew, either theirs or someone else's, was injured. Allow only two stories.

- ⇒ With each story, ask the participants to think about why and how the child was injured, and what might have been done to prevent the injury or to make it less severe. Keep the conversation short and directed, and not judgmental or accusatory of the parent whose child was injured.
- ⇒ *Alternative:* Use two or three recent newspaper or magazine articles that describe a severe injury to a child. The articles should be short, obvious, and catchy, from a source that the participants would read. Ideally, the stories were ones that received a lot of press and will be familiar to most of the participants. Distribute the articles. Ask if anyone knows the story and can tell the group what happened. Then ask the questions above—why and how the child was injured, and what might have been done to prevent the injury.

### 3.) Brainstorming/ Webbing (see sample injury web, Figure 1)

*Purpose:* To help participants think about different types of injuries, what causes them, how they happen, and where they happen. Also to consider where in the web actions can be taken to prevent each kind of injury.

*Action:* Explain that as a group, you are going to think about different injuries and make a web. Ask: What are different kinds of injuries that happen to children? What accidents happen to children that make them get hurt?

- ⇒ Encourage participation by all; if the discussion is slow to start, use the two stories that were shared as examples.
- ⇒ Prompt the participants, especially if they are slow to start the discussion or if there is a pause in responses. Be sure to elicit a wide variety of responses that include unintentional and intentional injury and violence, putting it in impersonal story contexts (For example: What about a 17 year old who commits suicide, is that injury? Or-- What about a person who gets stabbed in a mugging? Or—When a child gets abducted? Is there emotional injury that could result? What about physical injury?)

- ⇒ Try to use examples that challenge norms about what constitutes injury—for instance, fears and experiences parents may have regarding violence in their neighborhoods; the emotional trauma of war, abduction, fleeing one’s country, etc.; or issues of discipline, family violence, and neglect and their long- and short- term effects on children.
- ⇒ Emphasize that “injury” is a broad term that encompasses many concepts, and that things we may not usually think of as injury (like gang violence) do fall under its umbrella.
- ⇒ Try to suggest examples that reinforce positive social norms or call attention to negative social norms in a gentle way. Encourage parents who mention model behaviors or who suggest broader definitions of injury, and attempt to bring up issues of community violence, family violence, sexual violence, etc.— but only if the group dynamic allows the discussion of such sensitive issues. What are the environmental factors in our community that facilitate violence in this community more than in others?

Next, ask: Where do these injuries happen?

- ⇒ Probe “where” for each different injury type on the list—e.g., in the home, on the street, at school, etc.

Next, ask: Why and with what do these injuries happen? (See Figure 2: Partial List of Causes of Injury)

- ⇒ Distinguish between the *mechanism* of an injury (e.g., fire, motor vehicle crash) and the injury itself (e.g., burn, broken leg).
- ⇒ Probe for social causes (e.g. city agencies ignore this neighborhood), probe for preventable factors (e.g. environmental factors, anger and stress management, behaviors like wearing a bike helmet), probe for tools that cause injuries (physical objects, e.g., firearms, matches, lighters, etc.).

#### 4.) Lecturette

*Purpose:* To expose the participants to injury facts in general and specific to Washington Heights, and to the reasons why children are particularly vulnerable to injuries.

*Action:* Present the general injury statistics from the [Did You Know / Sabía Ud.](#) page in the participant binder. The facilitator can read them, or have participants read them aloud. Ask: Are injuries always accidents?

- ⇒ Explain that in injury prevention, we don’t use the word “accident;” ask the parents not to say it either, and then remind them!
- ⇒ We prefer the term “injury” or “event” because most injuries are *preventable*, and the word “accident” makes it sound like they aren’t. “Accident” implies that parents and adults are not capable of protecting ourselves and our children, when really, we are.

Next, ask: Why are *children* particularly susceptible to injury?

- ⇒ Emphasize the principles of creating a safe environment:
  - Child Development: Exploration is a normal part of child development. At each stage, children need to wander around their environment and try things out. So, especially as children become more and more mobile as they get older, we need to make sure that they don’t have the opportunity to try out things that could hurt them, by removing these things from their surroundings.
  - Supervision: Children, especially young children, are not yet able to control their impulses, distinguishing right from wrong, and knowing fantasy from reality. Supervision helps them learn these skills and provides the control and decision-making abilities that children themselves lack.

- Communication: Communicating with children is not the same as communicating with adults. It is a difficult balance between talking down to a child and talking to the child in a manner he or she can understand and will respond to. Establishing good communication with a child can help that child learn to express him/herself effectively and elicit the behavioral responses you desire from the child.
  - Discipline: Even though they complain about rules, children need limits to be set for them and enforced **gently, kindly, and consistently**. Children will keep testing the water to see how deep they can go—and if there is no boundary for them, they will inevitably fall too deep.
- ⇒ There are a few specific characteristics of children that make them more vulnerable to injury. They have less peripheral vision than adults. They don't understand future time or consequences to actions (cause and effect). They have short attention spans. They have difficulty judging their distance from another person or object and how fast it may be moving. They react slowly and it takes them time to process new information or visual stimulus. Lastly, they are not physically developed, so they have less control over their bodies, they have poor balance and coordination, and they are not as strong physically as adults.

Last, ask: *What is injury prevention?*

⇒ Wrap-up the above lecture/discussion and point out that it has been **proven** that injuries can be prevented. In Harlem, their push to put window guards on all windows reduced the number of children who fell out of windows by 96%. The Harlem Hospital Injury Prevention Program has also successfully reduced the number of children who die in motor vehicle crashes as well. Injury prevention is making changes in a child's home, school, and community to make them safer places for the child to grow up.

## 5.) Closing

Answer any questions, and review the resources sheet and other pages in the participant binder, especially the "Activities You Can Do With Your Child" ideas. Mention that the topic for the next session will be Playground Safety. Ask the participants to briefly fill out and hand in the evaluation sheet at the back of their binder materials. Remind them that the evaluation page is anonymous. Answer any questions they have about the form. Collect the evaluation and the attendance sheet to return to the Injury and Violence Prevention Center (IVPC).

### *Timing Guide for Injury Prevention Session I*

<b>Activity</b>	<b>Materials</b>	<b>Time Allotted</b>
Ice-breaker		10 minutes
Discussion		15 minutes
Webbing	Chalkboard and Chalk // Easel, Large Paper and Markers	25 minutes
Lecturette		15 minutes
Closing	Binder Materials, Evaluation	5 minutes
<b>Total Time</b>		<b>1 hr., 10 mins.</b>

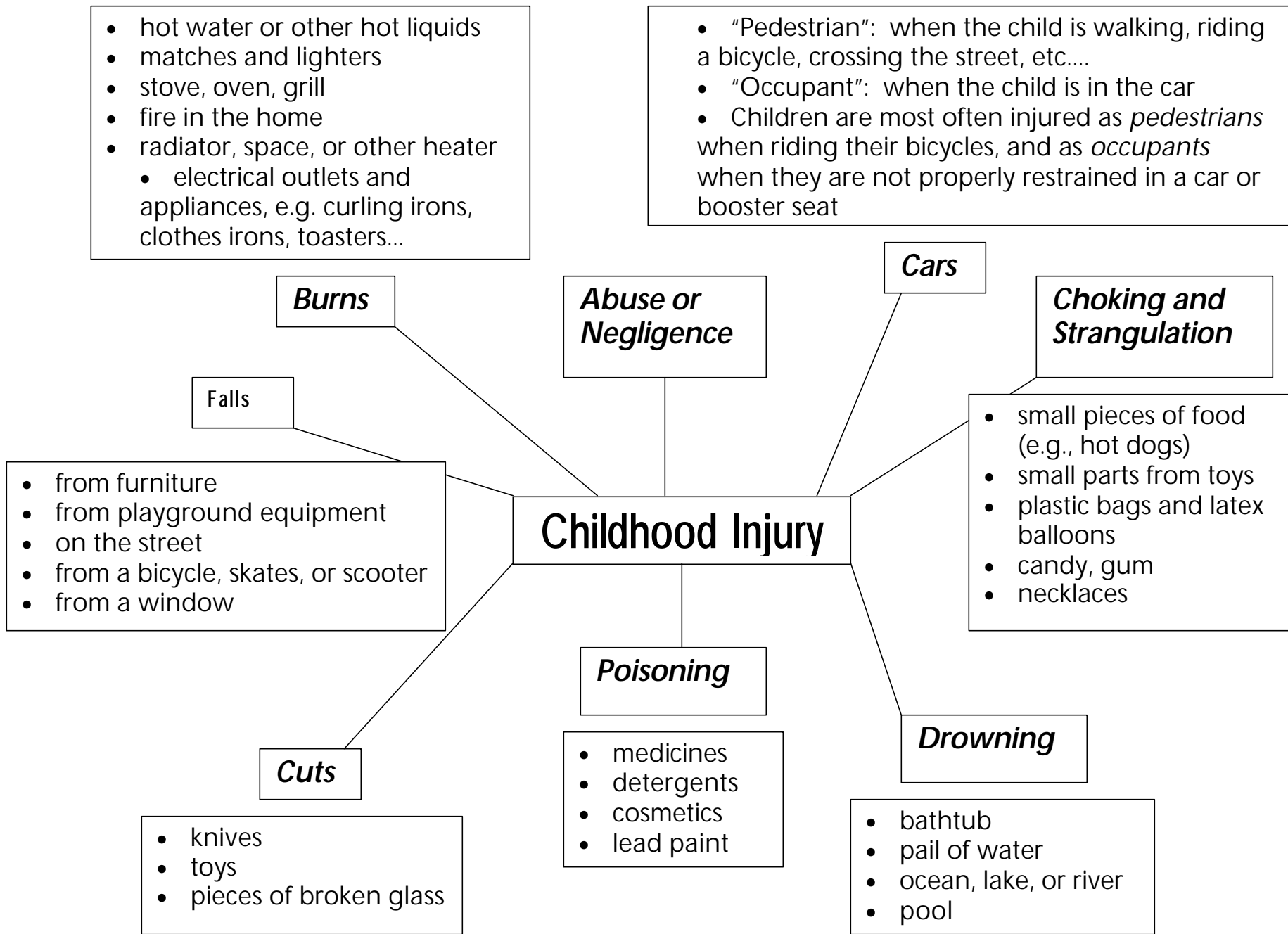


Figure 1: Sample Injury Web

## Figure 2: Partial List of Causes of Injuries

### Social Causes

- Lack of enforcement / policing issues
- Neglect by city agencies
- Lack of information and education of residents, parents, caregivers
- Economic development (good for parent self-esteem, well-being of family)

### Preventable Causes

- Environment (e.g., neglect of public and private areas such as playgrounds; hazards in the home or at school; intersections with no traffic light)
- Behavior (e.g., anger and stress management; discipline strategies; communication skills)
- Tools / equipment (e.g., bike helmet, knee and elbow pads, fire extinguisher, car seat)

### Tools / Objects that cause injury

- bikes, skates, scooters, skateboards, baby walkers, other wheel toys
- firearms
- matches, lighters, cigarettes, candles, cooking oil, gasoline, turpentine/ paint thinner
- motor vehicles
- knives, scissors, and other sharp objects
- small pieces, parts, and foods (e.g., wheels from a toy car; grapes or hard candies)
- hot liquids
- peeling or chipped paint
- detergents, cleaning products, beauty products, medicines

## *Session II: Help Your Child Play It Safe!*

⇒ Pass around attendance sheet.

### 1.) Introduction to the topic: The Magnitude of the Playground Injury Problem

*Purpose:* Many parents do not believe that playground injuries, or any unintentional injuries, for that matter, can be prevented. They often think that playground maintenance is not a parent's responsibility; neither is general supervision for all of the children playing. But parents must remember—there is no lifeguard at the playground. Children need close supervision, and that includes a clean, well-maintained play space that is under control. This activity will introduce the participants to the range of injuries that occur at the playground and to the ways in which parents are both responsible and capable of preventing these injuries to children.

*Action:* Introduce the topic for today: Helping your child play it safe. This title refers to safety at the playground. Let the parents know that they will be doing most of the talking, and that you'd like their input in the discussion that the group is about to have. Remind them that there are not really right or wrong answers for every situation at the playground—you are there to share and discuss thoughts, opinions, and experiences.

⇒ Emphasize child development: not all playground equipment is appropriate for all children. Parents need to decide what equipment is safe for their children, and set play limits for the child accordingly.

⇒ Emphasize supervision: though there may be many parents at a playground, there may not be many parents watching the children closely. Many parents use the time at the playground as a social hour for themselves as well as for their children. This can be dangerous, especially when the playground is crowded.

*Ask:* What kinds of injuries do children get at a playground? In other words, in what ways do children get hurt when they are at the playground?

- Begin the discussion by reminding the group of the answers given during the first session. Write on the board/easel pad the answers that the group came up with during the Session 1 brainstorming that were relevant to playgrounds.
- If the group has difficulty answering, suggest different mechanisms (e.g., falling or cuts), causes (e.g., no guardrail or rust on the slide), and injuries (e.g., broken wrist).
- Write participant's answers down, but limit the time for this activity. They did a similar task with the brainstorming during the last session. This activity is only to introduce the topic and jog their memories back into injury, so the list should be fast, not comprehensive.
- If someone says "accident," ask them to change their wording and remind them why.

*Ask:* Do you think that playground injuries are a big risk for children in New York City? How often do you think children get hurt at the park? For example, how many children do you think get seriously hurt on a playground in New York City in a given year?

- Try to get a response from most participants, if not all

*Action:* Present the *Did you know?...* statistics. Either read them aloud yourself or have volunteers read them aloud, one at a time. After each, ask the group, "So, what does this mean? How does this relate to our children?" Allow the participants to ask questions or have brief discussions around the meaning and implications of each statistic. If necessary, explain what the statistic means.

## 2.) Presentation of SAFE concepts (SEPA in Spanish)

*Purpose:* To introduce the participants to the "SAFE" method of playground injury prevention for parents. Emphasize the four points of SAFE playground safety: Supervision, Appropriate equipment, Falls prevention, and Equipment maintenance.

*Action:* **If you plan to use the SAFE Playgrounds video** from National Program for Playground Safety (available for loan from the IVPC) or other appropriate video, play the video for the parents. After, repeat important points that the video made and refer the parents to the SAFE (SEPA) handout, the Playground Safety Checklist, and the Activities to do with your Child pages in their binder materials. Answer any questions they have about the video or the handouts.

### In lieu of or in addition to video:

- Refer the parents to the Playground Safety Checklist in their binder materials
  - Have volunteers read each point out loud. Let participants ask questions after each point, and encourage another parent to answer the question before jumping in to answer.
  - Show the parents with a yardstick how tall 30 inches is and how far nine feet is, in reference to the distances given on the Checklist
- Show the group the enclosed pictures of the playground at 173<sup>rd</sup> Street in New York City.
  - First show them Pictures 1, 2 & 3, that give a broader view of what the whole playground looks like (high, medium, and low areas). Ask them first what they notice that is good about this playground overall. Examples: rubber safety surfacing; variety of equipment (small, medium, and large equipment separated for different age groups); guardrails in high areas; fence marking off playground from other parts of the park; rock wall to block playground from the street; tree cover to shade from the sun on hot days...
  - Show them Picture 5, of the dinosaur apparatus. Ask them to think about whether this piece of equipment is safe. For what age children would this equipment be safe? What is the purpose of the apparatus? What would a child be learning by using it? What are some risks or hazards associated with it?
  - Show the group Pictures 6 and 7 of the swings and ask them the same questions. Good things: swings are very secure; no "big kid" swings (only baby swings) because not enough space; swings separate by fences from other areas of park. Bad things: Chains exposed; metal can get hot on a sunny day, especially dangerous for a baby; chains and hardware can rust (rust is dangerous because it can cut a child); peeling paint can also be a hazard. Explain to them what an "S-Clip" is (a chain link—demonstrate with Picture 7, the swing detail). An exposed S-clip can also be dangerous to a child, especially to a baby: in summer, metal can heat up and burn the child; the shape of the S-clip could also pinch the fingers of a curious child.
  - Now ask them what they would like to change, what some possible dangers are that they see in these pictures. Examples: black metal fence that blocks playground from other parts of the park has pointy pickets; space in between

The enclosed pictures are of the playground at 173<sup>rd</sup> Street. It would be great, if it's a nice day and the parents were up for it, to actually conduct the session at a playground. Otherwise, these pictures should help.

1. Show the participants the three pictures that give the broader views of what the whole playground looks like (high, medium, and low parts). Ask them first what they notice that is good about this playground overall. Examples: rubber safety surfacing; variety of equipment (small, medium, and large equipment separated for different age groups); guardrails in high areas; fence marking off playground from other parts of the park; rock wall to block playground from the street; tree cover to shade from the sun on hot days...
2. Now ask them what they would like to change, what some possible dangers are that they see in these pictures. Examples: black metal fence that blocks playground from other parts of the park has pointy pickets; space in between bars on fence and guardrails might not be wide enough to prevent a child from getting his/her head stuck; metal slide can burn children in the summer; lots of leaves falling on ground can be slippery; wood floors can cause splinters...
3. Show the group the pictures of the swings and ask them the same questions. Good things: swings are very secure; no "big kid" swings (only baby swings) because not enough space; swings separate by fences from other areas of park. Bad things: Chains exposed; metal can get hot on a sunny day, especially dangerous for a baby; chains and hardware can rust (rust [moho] is dangerous because it can cut a child and the child will likely need to get a tetanus shot); peeling paint can also be a hazard. Explain to them what an "S-Clip" is (a chain link—demonstrate with the picture provided).
4. Ask the participants to go through the playground safety checklist and see if they have missed anything in the pictures. Then ask them, what might be a hazard that you can't see in the picture? For example: the pictures do not show the entrance to the playground. The entrance to the playground might be very safe or very unsafe, depending on what it looks like, and parents should pay attention as they walk into the playground. They

Facilitator's Guide insert: playground pictures

should also look for and locate the other entrances or exits to see if they are safe. In this particular example, there is no gate to the playground on the corner of 174 and Ft.

Washington—any child could run right into the street. Children wandering into the areas behind the playground may also be dangerous—although it is good for them to have ample space to play ball games and run around, there is nothing dividing the grassy area from the hard, sharp rocks behind the grass. These rocks are steep, slippery, and hard, and a child who falls on them or from them could be seriously hurt. The rocks are visible in the background of one of the photographs.

bars on fence and guardrails might not be wide enough to prevent a child from getting his/her head stuck; metal slide can burn children in the summer; lots of leaves falling on ground can be slippery; wood floors can cause splinters... Ask them to give suggestions about what could be done to make each hazard safer.

- Ask the participants to go through the playground safety checklist and see if they have missed anything in the pictures. Then ask them, what might be a hazard that you can't see in the picture? For example: the pictures do not show the entrance to the playground. The entrance to the playground might be very safe or very unsafe, depending on what it looks like, and parents should pay attention as they walk into the playground. They should also look for and locate the other entrances or exits to see if they are safe. In this particular example, there is no gate to the playground on the corner of 174<sup>th</sup> Street and Ft. Washington Avenue —any child could run right into the street. Children wandering into the areas behind the playground may also be dangerous—although it is good for them to have ample space to play ball games and run around, there is nothing dividing the grassy area from the rocks behind the grass. These rocks are steep, slippery, and hard, and a child who falls on them or from them could be seriously hurt. The rocks are slightly visible in the backgrounds of Pictures 5 & 6.
- Refer them to the SAFE (SEPA) handout in their binder materials.
  - Invite volunteers to read out loud the points under each letter (one volunteer per letter)
  - After each letter is read, ask the group if they have any questions. Help them brainstorm ways they can follow the recommendations on the handout.

### 3.) Small group activity

⇒ **Distribute Small Group Worksheet for *Play It Safe!***

*Purpose:* This small group activity will allow the parents to work together to devise strategies for setting limits for their children at the playground. They will have the opportunity to share their experiences and ideas for enforcing the rules for their children.

*Action:* Refer the participants to the Play It Safe! handout in their binders. Break the large group into groups of 3-4 participants. Assign each small group a playground area (e.g., slide, climber, or swings)—there can be more than one group working on a single area, if the whole group is large. Acknowledge that setting rules and enforcing them at the playground is particularly difficult because there are so many children following different rules. Ask the parents to work as a group to decide what the most important dangers to a child are at the area they were assigned, and to come up with 3 rules to set for their children at that area that address those concerns, and to describe what methods they would use to enforce the rules they made. Help the groups set realistic, productive strategies, rather than just saying “I will tell him to, and he will listen.” Remind the parents that setting rules and getting children to obey them are difficult tasks for all parents. Even though it is difficult, parents must set limits and enforce them consistently for their children’s safety. Developmentally, children need a few logical, consistent rules that are always enforced to help them learn to associate cause and effect, which will, in turn, help them learn to obey the rules, rather than many rules that do not use obvious logic and that are impossible or more difficult to enforce. Setting limits and enforcing them gently but consistently will help a child learn to follow a routine, to trust the parent, and to understand that actions have consequences. It is a useful overall discipline strategy that is not just good at the playground, but to give structure to the child’s life.

Give the groups around 7 minutes to discuss rules to set at the playground for their children and ways to enforce the rules. After 7 minutes on task, ask the groups to come back together as a whole and have a spokesperson from each smaller group share the group's strategies with everyone else. Ask other participants to comment constructively or ask questions of the group that is presenting. Respond to their ideas, particularly reinforcing positive strategies and asking them to think a little more about the consequences of the negative ones. Try to minimize negative or pessimistic comments from the larger group and limit the amount of time that each group's strategies are discussed.

⇒ Bring up the possibility (as listed in the binder handout Activities To Do With Your Child) of how to start a Playground Watch Group in the neighborhood, where each parent would agree to set the same rules for their children to make the playground safer and make it easier for the parents to convince their children to follow the rules. Do they think this is feasible? Would it work? How would they go about organizing it? Would they hand out fliers about it? Approach the mothers playing with their children in the park? Have meetings?

#### 4.) Practice

*Purpose:* Once the parents have devised these strategies, they need to feel like they are capable of implementing them in real life (the concept of "self-efficacy"). To show them that they have developed feasible strategies that they will indeed be effective at putting them into action, they need the opportunity to practice before trying the strategies out on their own children.

*Action:* Explain that you will read a situation, and would like a volunteer to act out her reaction. If you were the parent in this situation, what would you do? The list of situations can be found in the binder materials, if parents would like to make notes. Ask for a volunteer to react to situation number one. Ask her to talk to you as though she were speaking to her child directly. What would she say? Read each situation out loud and let her react. Reinforce positive responses. Remind the group of the principles of SAFE (SEPA) and of the rules-setting strategies they worked out. Ask if other members of the group would have reacted differently.

⇒ Emphasize consistency over time: The child is not going to adjust to new rules overnight, especially at the playground where there are so many children who seem like they are not following *any* rules. It is likely that the child will not obey the rules the first time the parent sets them, or *even* the **fifth** time! But consistency over time will convince the child—children *do* eventually adjust, as long as they know what to expect each time they go to the playground.

⇒ There should be *positive consequences* to obeying the new limits. For example, you can say that the child has one hour to play. If he or she plays well and obeys the limits you set, you can offer a prize for good behavior, such as an extra half-hour of play time. If the child does not obey the limits, you will go home after the original one hour time limit. Positive reinforcement—that is, rewards for good behavior—has been shown to be more effective for child discipline than only negative reinforcement—or punishment for bad behavior. This is not to say that bad behavior should be ignored, only that in addition, a child should benefit from behaving well.

*Variations:* Could be done as a role play; Could be done as an introduction to the small group activity to develop rules and enforcement strategies.

## 5.) Closing/Wrap-up

Answer any questions the participants still have. Refer them to the Resources list and Activities You Can Do With Your Child sections of the binder. Mention that the topic for the next session will be Bicycle and Wheel Safety. Ask the participants to briefly fill out the evaluation sheet found at the end of their materials. Remind them that the evaluation is completely anonymous, but important so we can make the workshops better for next time. Answer any questions they may have about the form. Collect both the evaluations and the attendance sheet.

### *Timing Guide for Injury Prevention Session II*

<b>Activity</b>	<b>Materials</b>	<b>Time Allotted</b>
Introduction	Board and Chalk/Markers	15 minutes
SAFE/SEPA Activity	Video or SAFE handout and playground safety checklist; playground pictures	25 minutes
Small Group Activity	Play It Safe! Handout	20 minutes
Practice	List of situations	20 minutes
Closing	Resources list, Evaluation	10 minutes
<b>Total Time</b>		<b>1 hr., 30 min.</b>

***Injury and Violence Prevention Center  
Injury Prevention Parent Workshop Series***

***Serie de Talleres:  
La Prevención de Lesiones en los Niños***

**Play It Safe!  
¡Jueguen Seguros!**

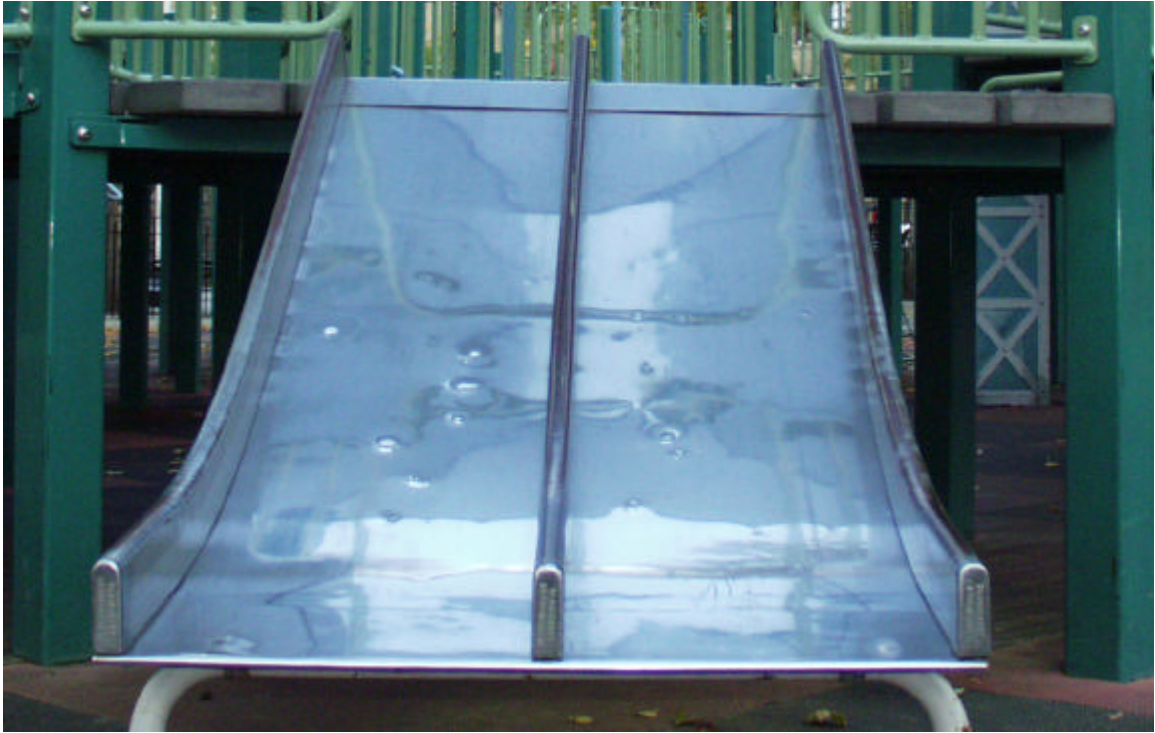
**Small Group Worksheet**

Strategies for setting rules at the playground...  
Estrategias para poner limites en el parque de juego...

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_









### Session III: Watch It On Wheels!

⇒ Pass around attendance sheet.

#### 1.) Introduction

*Purpose:* To introduce the current topic of bicycle and wheel safety. Both last session's topic and this session's topic are part of a larger concept, outdoor safety. Outdoor safety includes a variety of safety issues and injuries, including swimming injuries in pools or in the ocean, pedestrian injuries as children travel around the streets, playground safety, and bicycle or wheel safety. Today we are going to focus mainly on safety on wheels, meaning safety on bicycles, tricycles, scooters, skateboards, skates, and any other "toy" that children use that has wheels. We will also touch on pedestrian safety as it relates to children on wheels, but really save that topic for another day.

*Action:*

Ask: Raise your hand if you have a child who owns bicycle, tricycle, scooter, skateboard, roller blades, or sneaker skates. (Count)

Ask: Raise your hand if you have a child who owns a helmet. (Count)

Ask: Raise your hand if you have a child who wears a helmet every single time he or she rides a bicycle, scooter, etc... (Count)

NOTE: If few children "own" any of these toys, ask them "own," then ask, "What about riding them? How many of you have a child who rides a bicycle, tricycle, scooter, skateboard, or skates at least once a week, even if it actually belongs to their brother or a neighbor?" Write numbers on board for all to see. Point out that even though it is common for children to ride wheel toys, very few wear a helmet every time. Review the *Did you know...* statistics from the binder materials. Ask for volunteers to read them out loud. Discuss each one briefly, asking someone from the group to explain what it means for children in Washington Heights. Answer any questions the group may have about the statistics, and explain them if no one in the group can.

#### 2.) Game: Myth or Reality?

*Purpose:* To continue to discuss facts related to bicycle and other wheel safety.

*Action:* Divide the group into two teams; the winning team will receive small prizes. Locate the *Myth or Reality?* game list in the binder. The participants can follow along in their own binders. Ask each question out loud. Teams will alternate to answer the questions. The first team must say whether the statement is a myth or a reality *and give an explanation*; if they are incorrect, ask the other team to try to explain why the answer is not correct. Follow the explanations for each item found in the Facilitator's Guide. Award one point per correct answer (no points are awarded for a correct explanation after a wrong answer because there are only two answer options, so the answer is obvious once the first team gets it wrong). The team with the most points at the end of the game wins. There are fifteen statements. If necessary, the game may be shortened.

#### 3.) Demonstration

*Purpose:* To help parents answer the question: What can we, as parents, do to help our children be safe on wheels? To familiarize parents with wheel safety-related devices and let them practice using them properly.

*Action:* Locate the Home Wheels Maintenance Checklist in the session materials and call it to the attention of the participants. Referring to the Checklist and an example bike, demonstrate bicycle sizing and maintenance. You need only to go over the bicycle list, but should point out that there are lists for inline skates, skateboards, and scooters as well. Stress that bicycle maintenance, like playground equipment maintenance, is essential for safety. A bike that is ridden often should be checked at least once per week.

Next, demonstrate helmet sizing. Show the child's helmet and size a volunteer using an adult helmet so they can see how a helmet is supposed to fit. Emphasize that helmets should not be shared or bought to be "grown-into"—helmets should fit snugly from the moment they are bought or they will not protect the child from severe head injury. Once a helmet is cracked, for example, after a crash, it must be replaced.

A useful analogy to illustrate the importance of a helmet to the parents is that a helmet is like a bike rider's "uniform"—a baseball player uses a batting helmet, a bike rider uses a bike helmet. A batter never bats without his helmet; a child should never ride without his or hers. It is part of the game. Demonstrate the other safety gear; explain how and why it is used. Point out the drawing of the proper hand signals at the bottom of the *Activities You Can Do With Your Child* page in the binder materials; show parents the signals and let them practice them a few times as a group. Note: hand signals should be performed with the left hand.

*Alternative:* A game modeled on "Simon Says" could be used to allow parents to practice the hand signals, and can be suggested to parents as a fun way to teach their children to use the signals as well.

Talk to the parents about these other tips for safety:

- Emphasize supervision, particularly for children under 10.
- Talk about child development: To ride a bicycle, a child must have excellent balance, hand-eye coordination, control of movement, and street-crossing skills. Most children are not developmentally ready to use all of these skills at the same time until they are at least 10.
- No riding on bumpy, wet, or rocky surfaces.
- Encourage them to have their children wear light-colored and/or reflective clothing or to put reflective patches on their helmets—this increases visibility even during the day. For example, many sneakers now have reflective material on them for decoration and safety. If possible, show examples of reflective material—backpacks, sneakers, clothing, etc.—and reflectors that can be attached to a bicycle.
- Encourage them not to let their children ride at night.
- Ask parents to name characteristics of a space that is a good place for a child to ride his or her bicycle (e.g., spacious; flat, clean, paved surface; safe; well-lighted; closed to car traffic). Encourage them to take the child to the park to ride instead of on the street or sidewalk—ask them to name some parks in the area that are good for bike riding. (e.g., Ft. Tryon, Edgcombe). Parks are usually safer places to ride because they are closed to cars and are in general more child-friendly than other public areas.

Review other important points from the *Myth or Reality?* game and answer any questions the parents may have about topics that have come up so far.

#### 4.) Small Group Activity

⇒ **Distribute Small Group Activity Worksheet for Helmet Safety.**

*Purpose:* For this activity, small groups of parents will work together to discuss different strategies for encouraging their children to wear a helmet and follow the other bicycle/wheel safety rules discussed. They will also discuss ways to enforce new rules they will set for their children.

*Action:* Divide the group into smaller groups of 3-4 participants. Ask them to devise at least 3 strategies for getting their children to wear a helmet and to follow the other wheel safety rules. Help the groups be realistic—ask them to think beyond just “I will tell him to do it, and he has to because I am his mother.” Remind them that all parents have difficulty getting their children to obey rules, particularly new ones, and that they are working in groups to support and help each other think of realistic ways of convincing children to obey. Give the group 10 minutes to complete their list of strategies.

After 10 minutes, bring the whole group back together. Have a spokesperson for each group share the list the group came up with, and explain how they would enforce each strategy. Allow other groups to comment constructively or ask questions. Reinforce positive strategies; ask parents to think about the consequences of negative ones.

#### 5.) Wrap-up

*Purpose:* To help the parents put all of the information from the session together.

*Action:* Have the parents look at the materials in the binder, particularly the Resources page, the Activities You Can Do With Your Child, the Head Smart pages the children can color, and the Wheel Safety Pledge. Go over what parents should do at home: read the brochure for helmet fitting and the Bike Maintenance Checklist, talking to the child and supervising him/her, decorating the helmet, Parents should review the information with the child and supervise him/her. The parent can encourage the child to decorate his/her helmet, color the Wheel Safety Pledge; and learn traffic signs and traffic rules. Ask the participants to briefly fill out and hand in the evaluation sheet at the back of their binder materials. Remind them that the evaluation page is anonymous. Answer any questions they have about the form. Collect the evaluation and the attendance sheet.

#### *Timing Guide for Injury Prevention Session III*

Activity	Materials	Time Allotted
Introduction	Board and Chalk, Did you know?... sheet	15 minutes

Game	Game List in materials, prizes	15 minutes
Demonstration	Helmets, safety gear, bicycle	20 minutes
Small Groups	Paper	10 minutes
Wrap-up	Resource list, Evaluation	10 minutes
<b>Total Time</b>		1 hr., 10 mins.

***Injury and Violence Prevention Center  
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***Serie de Talleres:  
La Prevención de Lesiones a los Niños***

**Watch It On Wheels...**

Cuidado con las Ruedas...

**Small Group Worksheet**

Strategies to encourage your child to wear a bicycle safety helmet...  
Estrategias para animar a su hijo a ponerse el casco protector...

1. \_\_\_\_\_  
\_\_\_\_\_
  2. \_\_\_\_\_  
\_\_\_\_\_
  3. \_\_\_\_\_  
\_\_\_\_\_
  4. \_\_\_\_\_  
\_\_\_\_\_
  5. \_\_\_\_\_  
\_\_\_\_\_
-

## Session IV: Safety On the Road

⇒ Pass around the attendance sheet.

### 1.) Introduction

*Purpose:* To introduce participants to the topic of traffic safety.

*Action:* Go through the *Did You Know...* page. Ask for volunteers to read them out loud. Discuss each one briefly, asking someone from the group to explain what it means for children in Washington Heights. Answer any questions the group may have about the statistics, and explain them if no one in the group can.

### 2.) Felt Board Activity

*Purpose:* To demonstrate to the participants what happens physically to passengers in different car crash situations.

*Action:* Using a felt board and pieces, simulate what happens to a preschool child in different positions during a car crash. Ask a volunteer to move the pieces. Tell the parents the situation, and ask them to predict what happens.

- Motor vehicle crash, with a child in the front seat
- Motor vehicle crash, with a child in the back seat
- Pedestrian injury—a child is walking across a wide main street and the light changes.
- Pedestrian injury—a child is riding a scooter across a side street.
- Pedestrian injury: it is a hot summer day and the children on the block are playing in the stream of an open fire hydrant.

After each situation, discuss with the group the relevant safety points:

- What sort of restraint system should the child have been in, if any?
- What were some traffic signs or other environmental cues that might have given clues for safety?
- What are the properties and characteristics of the cars that contributed to the injury?
- What supervision, if any, was necessary to avoid the injury?
- What characteristics of the children involved made them more prone to be injured in the situation? (e.g. children have trouble judging speed and distance; slow reaction times; little peripheral vision; they believe that if they see a person, that person also sees them)
- Reinforce information from prior sessions (e.g., the importance of protective gear such as a helmet, supervision, stage of child development, appropriateness of activity) Particular points:
  - *Child restraint:* children should not sit in the front seat of a car until they are at least 12 years old. Children should ride in booster seats until they are at least 8 years old, 4'9", and 80 lbs. A car seat should be used until the child reaches 40 lbs.

- o *Environment*: extra care, caution, and supervision is needed when a child crosses a wide avenue. Children walk slowly, and they are not very visible to cars because of their height. If children feel rushed to make it across the street, they may run out in front of a car when the driver cannot see them or make another poor decision about crossing. So, many times finding an alternate routes may be the most effective injury prevention. Also, parent organizing can help advocate for longer lights at an intersection or other environmental changes by the government to make an intersection safer for children.
- o *Activity appropriateness and child development*:
  - Children should not ride bikes without close supervision *by an adult* until they are at least 10 years old. An older sibling or teenager can ride alone, but are often not able to supervise a young child adequately, and it may not be fair to the teen to expect him/her to do so. Adolescents are, in fact, still developing their own judgment abilities. It is therefore recommended that adults, rather than other children or teens, be charged with supervising children.
  - Preschoolers should not ride scooters or skateboards—they do not have the strength to control them, and their height makes them less visible than older children on these particular toys. Even if a driver can see the child, he/she may not realize how fast the child is moving because the child is on wheels. It may appear that the child is walking.
- o *Visibility*: Children have poor peripheral vision, and they believe that if they see another person, that person also sees them. This perception can put them in great danger.
- *Alternative* (if available): Use I Read Signs book to show parents the different traffic signs and make sure the parent knows what each means, and how to explain what it means to the child. Also remind parents of the hand signals from the previous session (bike riding), and associate the different hand signals with the road signs.

### 3.) Lecturette: Car Seats

*Purpose*: To inform parents about the importance of child passenger restraints, and to help them choose the proper restraint for the ages and weights of their children.

*Action*: Introduce the topic by referring to the Car Seat Comparison Chart in the binder. Go over the chart with the parents, then ask them to identify the seat that is appropriate for their children. Ask two or three volunteers to say aloud which seat is right for her child and why.

- ⇒ Ask the parents, what are the barriers to using a car seat? Why don't parents in Washington Heights and Inwood usually put their children in car seats? Acknowledge their responses and talk about the different situations parents have found themselves in related to car and/or booster seat use.
- If parents say that they do not use car seats because they don't have a car, ask about taxis. Do taxis have accidents, too, or only people in their own cars? Are children (and other passengers) at risk when they are in a taxi? What are the unique barriers to using a car seat in a taxi? Whose responsibility is it to provide the car seat? There are no right or wrong answers in this discussion. However, remind parents that their children, when unrestrained, are at risk in any car traveling for any distance at any speed. Inconvenience is minimal when compared to the crippling or death of a child.

- Please refer to *Figure 3, Possible reasons not to use a car seat*, and see how your group's answers compare to other groups. Remind the parents that they are not alone in feeling the barriers to car seat use, but that they can change to make their children safer.

⇒ Next, demonstrate car seat and booster seat use with the models. As you demonstrate, ask the parents why, especially in light of the felt board activity, it is important to use car seats and booster seats.

- Encourage seat use in cabs and other people's cars, even if the participants do not drive or have a car of their own.
- Also, encourage parents to practice putting their seats in correctly and to read the instruction manual. 85% of car seats are installed incorrectly, so even though they are being used, they may not fully protect the child from injury. Show parents the One Minute Safety Seat Checklist—using this tool included in their packet, they can check in one minute if the seat is installed properly or not. Encourage the parents to tape the section of the Checklist that is applicable to their children to the back of the safety seat so that they will always have it when they are strapping in their baby.
- Remind parents that the safest seat in the car is in the middle of the back seat, because the whole front of the car can absorb the energy of the crash before reaching the passenger, and there is no seat in the middle that may move backwards and crush the passenger. This is the safest position for a car seat, a booster seat, and a child older than 8 years who may sit, belted, in the back seat without a safety seat.
- Booster seats are necessary because children under age 8 and shorter than 4'9" do not have the height and weight they need for a seat belt to fit properly. The belt will sit too high across the child's neck and stomach, which can cause internal damage and death in a crash. A booster seat gives the child the added height he/she needs to have the regular seat belt for the car lay across the child's body in the right position.

#### 4.) Role Play Activity: What Would You Do?

*Purpose:* To allow parents the opportunity to develop strategies for talking to their children about traffic safety and for setting and enforcing traffic safety-related rules.

*Action:* Refer the group to the "What Would You Do?" page of the session's materials. Ask for volunteers to act out each of the given situations. Read the situation out loud, then ask the participants to respond to the questions posed. Have one volunteer be the parent and one be the child. Tell the "child" to think about how an actual child of that age would respond and to try to act that out. Have the "parent" respond to the child. Then, let the group discuss constructive suggestions about things they might add or do differently, or questions they have for the actors.

Reinforce positive responses. Answer any questions.

⇒ After the role play, mention any important points that were not brought up during the discussion. Emphasize the importance of *constructive teaching* and guidance, setting examples for children, supervision, and POSITIVE reinforcement of good behavior. Remind

the group that antagonistic methods of intervention are usually not effective—for example, don't try to scare the child into acting safely.

⇒ Teach the group to “Stop, Look, and Listen--” Stop at the corner, Look left, then right, then left again to check from oncoming cars, then Listen for cars that they might not have seen-- at each intersection. Remind the group about the importance of wearing safety gear and using a child passenger restraint even for short, supervised trips—you never know who else is on the road with your child. Finally, remind them of last session's activity of setting strategies and limits for the child about bike riding—these same techniques will be useful for teaching the child to cross the street, and the rules from today's lesson apply whether the child is walking or riding.

## 5.) Closing

Go through the rest of the materials with the parents, including the resources and activities pages. Explain the One-Minute Safety Seat Checklist and the Walkability Checklist, and encourage parents to use these materials and do these activities with their children.

*Alternative:* Ask them to do the Walkability Checklist as they walk with their child home from school today, and to share the answers in the group during the next session.

⇒ Ask the participants to fill out and hand in the evaluation sheet at the back of their binder materials. Remind them that the evaluation page is anonymous. Answer any questions they have about the form. Collect the evaluation and the attendance sheet.

### *Timing Chart for Injury Prevention Session IV*

<b>Activity</b>	<b>Materials</b>	<b>Time Allotted</b>
Did You Know	Did You Know?... sheet	5 minutes
Felt Board Activity	Felt Board and pieces	20 minutes
Lecturette	Booster seat, car seat for demonstration	15 minutes
Role Plays		30 minutes
Closing	Resource list, Evaluation	5 minutes
<b>Total Time</b>		1 hr., 15 min.

### **Figure 3: Common reasons some parents give for not using a car seat**

- The car seat doesn't work with the seat belt that the car has.
- The car seat is too complicated to put in.
- The taxi driver should provide the seat—it's not my responsibility because it is not my car.
- It's inconvenient—to use a car seat in a taxi, you have to walk around for the rest of the day carrying the big, heavy car seat.
- A car seat doesn't leave enough room for the rest of the passengers in the car.
- We are only going a short distance, and in the taxi, we sit in the back seat.

## Session V: Poisons, Fires, and Burns

⇒ Pass around the attendance sheet.

### 1.) Introduction

*Purpose:* Today's topic is the first half of what will be discussed in the last two injury prevention sessions: home safety. In each room of the home, there is at least one thing that poses a risk to the safety of a young child. But, as was discussed during the first four sessions, there are some simple things that parents and other caregivers can do to reduce those risks to children and make the home a safer place for the whole family. This session covers poisoning prevention, fire safety, and burns.

*Action:* Give participants a brief verbal overview of the session based on the information above.

### 2.) Did You Know?...

- Go through the *Did You Know...* page. Ask for volunteers to read each statistic out loud. Discuss each one briefly, asking someone from the group to explain what it means for children in Washington Heights. Answer any questions the group may have about the statistics, and explain them if no one in the group can.

### 3.) Brainstorm

*Purpose:* To get participants thinking about common household hazards in each room of the house. To prepare the group for the small group activity to develop strategies for preventing such hazards in a particular room.

*Action:*

- ⇒ Make a chart with large blank squares for each room: living room, dining room, kitchen, bathroom, bedroom (use easel board, dry erase board, or chalkboard)
- ⇒ Say: "Let's try to think about common things that are in our homes that could start a fire. Name something and tell me what room that's in." If necessary, prompt the group to start talking by suggesting: cigarettes, matches, stove, etc.,...
- ⇒ Prompt by asking about ages and relating each hazard to an age or to a developmental stage—If this is a risk for a three year old, is it still a risk when the child is 7?
- ⇒ Now ask about poisons and keep filling in the chart: "Let's try to think about common things that are in our homes that could poison a child. Name something and tell me what room that's in." If necessary, prompt the group to start talking by suggesting: bleach, floor cleaner, perfume, etc.,...
- ⇒ Again prompt by asking about ages and relating each hazard to an age or to a developmental stage—If this is a risk for a three year old, is it still a risk when the child is 7?
- ⇒ Be sure to include carbon monoxide poisoning, lead poisoning, smoke inhalation (in case of a fire), cigarettes, cooking oil, hot water, candles, matches, etc... Please see *Figure 4, Burn/Fire and Poisoning Hazards in the Home* for a more comprehensive list of examples.

#### 4.) Small Groups

⇒ **Distribute Small Group Activity Worksheet: *Safe at Home I*.**

*Purpose:* The participants will work together and share their techniques and experiences as parents to develop strategies to prevent injuries from common household items.

*Action:*

- ⇒ Divide participants into 5 groups and assign each group a room in the house: bathroom, kitchen, living room, dining room, bedroom. For each risk that the larger group has listed on the chart for that room, ask the smaller group to think of one way to reduce or eliminate that risk for a child in the home. Allow the small groups ten (10) minutes on task.
- ⇒ After 10 minutes, bring the whole group back together and have a spokesperson for each small group report the group's ideas back to the larger group. Allow participants to comment constructively, make suggestions, or ask questions.
- ⇒ Go over other strategies that might not have been mentioned, esp. ways to put out a fire other than fire extinguisher (e.g., baking soda or covering it to deprive it of oxygen) and that it is a law that water heaters/boilers in apartment buildings not be set above 120°F to prevent burns to small children and the elderly.
- ⇒ Refer participants to the Risk/Prevention List in their session materials. This list shows many common household hazards, and demonstrates that for most of these hazards, there are just a few simple solutions. It also shows that one solution can prevent many risks (e.g., cabinet locks can prevent many kinds of poisoning from occurring, as well as preventing fires by keeping matches away from children).
- ⇒ Encourage parents to go through the list at home and make sure that the items on the list are appropriately secured out of reach of children.

#### 5.) Demonstration

*Purpose:* To familiarize participants with several home safety products that can be easily purchased in the neighborhood.

*Action:* Demonstrate battery insertion, testing, and use of a smoke detector and a carbon monoxide detector; the use and storage of a fire extinguisher (e.g., it needs to be easily accessible to be useful); use of cabinet locks, spout cover, and bath thermometer. Remind participants to change the batteries in the detectors twice a year. Suggest that they do it annually on their birthday—so they always know how long it has been since they last changed the batteries.

#### 6.) Lecturette: The Importance of an Escape Plan

*Purpose:* An escape plan can be instrumental in helping a family, particularly children, out of a house or apartment in the case of a fire in the home. The development and practice of an escape plan can make children and adults more familiar with what to do in case of a fire emergency, and can prepare them to leave the home quickly, calmly, and safely if a fire does occur.

*Action:* First, discuss the importance of having an escape plan and how to make one up for your family. An escape plan shows a floor layout of the apartment or house, and notes two

exits from each room in case of a fire in different locations in the house. Each room will show an exit through the normal door, then an alternative exit through a window or fire escape. For rooms with no fire escape, a window ladder may be useful. Emphasize the benefits of involving the whole family and practicing the escape plan, and the following important points:

- ⇒ Teach your children (and your babysitter) what to do if there is a fire. When an adult is injured in the fire or if no adult is present-- if the children are with an older sibling or a babysitter-- the escape plan can help children know what to do automatically, whether an adult is present or not. In the case of an injured adult, the children should leave the building as planned and tell a firefighter or another adult outside where the injured person is located.
- ⇒ ALWAYS leave the burning building before calling 9-1-1
- ⇒ Have a set meeting place away from the burning building where you and your children can meet up if you get separated during the evacuation or if you are not home during the emergency. This way, they will know where to find you and you will know where to look for them.
- ⇒ Refer to the escape plan worksheet. Encourage participants to use the worksheet to create an escape plan from their own home, to have their children decorate it, and to post it in a visible place. Encourage the participants to explain the escape plan they develop to both their children and any other caregivers for the kids, and to practice it on a regular basis. Suggest that they let their children color the "Junior Fire Marshal Certificate" when they have learned and practiced the escape plan.

## 7.) Work in Pairs

*Purpose:* As participants work in pairs, they will practice developing an escape plan for their own homes and can help each other work out the details of the plan.

*Action:* Divide the participants into pairs. Instruct them to go through the Escape Plan Checklist in their binder and write out a step-by-step escape plan for one room in their homes. They can use this as a starting point for an escape plan for their entire home that they can later go over with their family. For example, if a fire were to start in your child's bedroom, how could you safely escape from the kitchen?

- ⇒ Allow the pairs 15 minutes to draw the plan. Circulate through the room, checking on each group, helping them, and answering any questions they may have.

## 8.) Wrap-up

*Action:* Go over the suggested home activities and the resource list with the participants. Ask the participants to fill out and hand in the evaluation sheet at the back of their binder materials. Remind them that the evaluation page is anonymous. Answer any questions they have about the form. Collect the evaluation and the attendance sheet. After the session, offer the participants the opportunity to touch, handle or practice with any of the items from the demonstration.

*Timing Chart for Injury Prevention Session V*

<b>Activity</b>	<b>Materials</b>	<b>Time Allotted</b>
Introduction		3 minutes
Did You Know	<i>Did You Know?...</i> sheet	5 minutes
Brainstorm	Board, Chalk/Markers	15 minutes
Small Groups	Risk/Prevention List	15 minutes
Demonstration	Safety Products	10 minutes
Lecturette	Fire Escape Plan Checklist	10 minutes
Pairs	Escape Route Template	15 minutes
Wrap-up	Resource List, Evaluation	5 minutes
<b>Total Time</b>		1 hr, 20 mins.

## Figure 4: Burn/Fire & Posioning Hazards In the Home

### In any room

Extension cords  
Electrical Outlets  
Heaters  
Lead Paint

### Kitchen

Stove/Oven (burn, fire, and CO poisoning!)  
Matches  
Cooking Oil  
Any hot pan on the stove, particularly boiling liquid  
Curtains

### Bathroom

Cleaning Products, Detergents, Soaps  
Beauty Products  
Hot water  
Metal Faucet  
Fumigation materials  
Medicines

### Living Room

Candles—curtains & tablecloths  
Cigarettes/Matches/Lighter  
Appliances, Frayed Cords

### Bedroom

Space or other heaters  
Cigarettes/Matches/Lighter  
Perfume/Cologne  
Clothes Iron

***Injury and Violence Prevention Center  
Injury Prevention Parent Workshop Series***

***Serie de Talleres:  
La Prevención de Lesiones a los Niños***

**Safe At Home I  
Seguridad en el Hogar I**

**Small Group Worksheet**

Strategies to reduce or eliminate home safety risks...

Estrategias para reducir o eliminar riesgos en el hogar...

please circle:    living room    dining room    bathroom    kitchen    bedroom  
encircula uno:    sala            comedor        baño           cocina        recámara

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_  
\_\_\_\_\_

5. \_\_\_\_\_  
\_\_\_\_\_

## Session VI: Home Safety and Review

⇒ Pass around the attendance sheet.

### 1.) Demonstration

*Purpose:* The demonstration will familiarize the participant with different home safety products and re-orient the group to thinking about home safety. In this last session, we will discuss home safety beyond poison safety and fire prevention.

*Action:* The facilitator should open the discussion by showing products or pictures of products. Ask the group what each item is, what it is used for, and why it is important. For each item, have them read a fact from the *Did You Know?...* page in their binder materials. Show:

- Window guard
- Baby tub
- Anti-slip tub mat
- Toys: pictures or examples of “good” and “bad” toys can be used to demonstrate both the function of a “choke tube,” and to begin the discussion about violent and non-violent toys and video games, and about violence prevention.

### 2.) Small Group Activity

*Purpose:* This small group activity will get the participants thinking about home safety and risk reduction in the context of all the different injury prevention topics that were discussed over the course of the workshop series.

*Action:* First, with whole group, quickly review a list of different mechanisms of injury in the home. Falls, drowning, firearms, choking, cuts, electricity, suffocation should all be mentioned. Refer to Figure 1 and remind them of the brainstorm web of different injuries they created in the very first session. Write responses on the board. Then, divide participants up into smaller groups. Assign each group a room in the house (or more than one room, if there are fewer than 5 groups), and distribute overheads of the injury risk pictures for each room: kitchen, bath, living room, bedroom.

⇒ Ask each group to circle all of the injury risks in the picture(s) they have. Ask them to write down the type of injury that could be caused by the hazard and at least one way to prevent that injury or to reduce the risk.

⇒ Have the group join again as a whole after 20 minutes on task. A representative from each group will show their picture(s) on the overhead machine and explain what strategies they devised for reducing or eliminating the risk. Let the participants from other groups make constructive comments and suggestions or ask questions. Relate hazards and the prevention strategies (e.g., environmental modification, explanations to children) back to earlier sessions.

⇒ Emphasize risks at different developmental stages (e.g., choking as a hazard only for children under 3 years), the importance of supervision, and strategies to teach the child the prevention skill. Remind participants of the Risks/Prevention List in the Session V materials.

### 3.) Lecturette: Age-Appropriate and Non-Violent Toys

*Purpose:* Playing is necessary for a child's development. However, toys can also present grave danger to children if they are not appropriate for a child's age—for example, if a toddler plays with a toy that has small pieces, s/he could choke by accidentally swallowing one of the small pieces. Toys for older children are not as developmentally stimulating for a younger child and vice versa. In addition, some toys, including television shows and video or computer games, are marketed to children yet are not appropriate for them because of violent and/or sexual content. Parents should make a conscious effort not to purchase violent toys for their children (such as toy guns) and to monitor closely what their children watch on TV. Experiences with violent toys and exposure to violence through media outlets may make children more prone to violent behavior as they grow up.

*Action:* Use pictures and "live" examples of different kinds of toys to demonstrate violent and non-violent toys. Use the Safe Toys handout from the binder materials as a guide. Emphasize that an "age-appropriate" toy depends on the age and developmental stage of the child who is going to use it—and a rule of thumb for multiple children playing together, is that the most appropriate toys for the group should be determined by the youngest child who is going to use it. So, if a two year old and a 4 year old are playing together, any toy with small parts is not age-appropriate because it poses a risk to the younger child. If the 4 year old were playing alone, s/he could use a toy with small parts, because 4 year olds are much less likely to choke on small pieces.

As children progress through different developmental stages, they are exploring and learning constantly. One of the ways children learn is by watching what happens in their surroundings. They learn social skills and behaviors by seeing what other children and adults do, both in their immediate environment and on television. For this reason, it is important to monitor what children watch on television and what video/computer games they play as they grow up. Children as young as two years old can be influenced by seeing graphic violence on TV often. Children find it difficult to differentiate reality from fantasy, and may feel either terrorized by what they see or desensitized by it. Either way, kids are more likely to behave violently later in childhood and into adolescence if they are exposed to violence—real or fictional— as young children.

Discuss with participants what positive, non-violent toys include for different age groups: books, stuffed animals, dolls, costumes to let them act out different "adult" roles, large and small blocks, building sets, chemistry sets, microscopes, cars and trucks, ...

### 4.) Game: Age-Appropriate Toys

*Purpose:* In this game, participants will work together to decide what toys are appropriate for what age group.

*Action:* Divide the participants into three groups. Have three game set-ups available in different areas of the room, preferably posted on the wall. Each group has to match their toy picture cards to the appropriate age group on a grid. The first group to fill in the development chart correctly wins.

## 5.) Wrap-up/Closing

This is the last workshop of the series. Thank everyone for their participation, answer any final questions, and fill out the Session 6 evaluations. Remind participants that the home visitors will be conducting a follow-up session in the home with a home assessment checklist and a second survey for the parent. These interviews are anonymous and are for the purposes of improving the workshops in the future, so we hope they will all agree to answer the questions that the home visitor asks. In addition, the person who wrote the curriculum would like the opportunity to speak with a few people who attended most or all of the sessions about what they thought about the workshops. If anyone is willing to speak with her, please identify yourself at the end of the session.

⇒ Facilitator: please take down contact information for the participant so that Pietra can set up a time to meet her and discuss the workshops informally with her.

### *Timing Chart for Injury Prevention Session VI*

<b>Activity</b>	<b>Materials</b>	<b>Time Allotted</b>
Demonstration	Home Safety Products	15 minutes
Small Group Activity	Overhead Pictures	30 minutes
Lecturette	Toy Pictures	10 minutes
Game	Game Cards, Prizes	10 minutes
Closing	Evaluation	20 minutes
<b>Total Time</b>		<b>1 ½ hours</b>