



at the Centre for Health Promotion  
University of Toronto

*THCU's 12 Step Communication Model*

## **Safe Kids Week 2001**

**A Campaign to Prevent and Reduce Scalds and Burns Implemented  
by Safe Kids Canada**

*August 31, 2006*



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## **Disclaimer**

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## Background

Safe Kids Canada (SKC) is a national injury prevention program of Toronto's Hospital for Sick Children. It is funded entirely through corporate sponsorships and donations. Its purpose is to promote and implement evidence-based strategies to reduce the risk of unintentional injury, the leading cause of death and disability among Canadian children. Through a wide range of services and partnerships, SKC raises public awareness regarding injury risk and preventive action, provides free resources in both English and French, and advocates for changes that will create safer environments for children. Each year since 1997, SKC has conducted a Safe Kids Week (SKW) campaign. The campaign, which is funded by Johnson & Johnson, focuses on raising public awareness, providing education and advocating for change about one specific safety issue.



## Project Management

### Time Management

SKW 2001 ran from May 28 to June 3, 2001. The topic was chosen in July 2000. A more detailed timeline of activities is given below.

- Background topic research—August 2000 to February 2001
- Campaign resource development—October 2000 to February 2001
- Production—March 2001
- Distribution—began in March 2001
- Pre-campaign survey—March 2001
- Launch event—May 2001
- Post-campaign survey—June 28 and July 12, 2001

## Money and Other Resources

The total cost (including financial support to Environics [the public relations firm hired to manage the media aspects of the campaign], SKC, and estimates from Johnson & Johnson) of the campaign was estimated at \$600,000. Johnson & Johnson is the primary sponsor of SKW. Hydro One also helped support the 2001 campaign on burn and scald safety.

SKC had nine full-time employees, four of whom worked specifically on the campaign. The rest helped out with planning and implementation in various smaller ways. The full-time campaign staff included a project manager, a person responsible for advocacy activities, a person responsible for the community component, and one administrative assistant. An expert advisor from the National Expert Advisory Committee (NEAC, please see Stakeholder Participation below) was contracted to complete the post-campaign evaluation.

## Stakeholder Participation

Representatives from SKC, Johnson & Johnson, and Environics comprised the steering committee that managed SKW. Johnson & Johnson and Environics were responsible for the retail and media components respectively (using educational/key messages developed by SKC). SKC was responsible for the development of educational messages, strategies and activities, and campaign evaluation.

A National Expert Advisory Committee, comprising a team of prevention research and programming experts, works with SKC on an ongoing basis to assist with the selection and development of projects as well as overall organization direction. This committee meets three to four times a year.

An additional burn and scald expert advisory panel, comprising several physicians, professionals involved in previous scald/burn prevention campaigns, and firefighting staff, provided guidance on campaign resource and message development.

Over 350 partners across Canada participated in SKW 2001. A listing of partners can be found on the SKC website at <http://www.safekidscanada.ca>. The partner network includes individuals and organizations from public health, emergency services, schools, daycare centres, hospitals, family resource centres, community health centres, government, and Aboriginal groups. These partners organized activities and events to promote SKW in their communities. They also contributed their views in the resource development phase.

The intended audience was also involved in creative development (for more detail, please see step 12, Formative Evaluation).

## Decision-Making Process

The steering committee considered advice from the advisory committee, partners, and the target audience, but was ultimately responsible for all campaign decisions.

SKC streamlined the campaign-management process by limiting the number of face-to-face meetings to a few each year, with all other business conducted via email or teleconference.

## Data Gathering and Interpretation

Data was collected at multiple stages of the planning process. Literature on the relationship between burns and childhood development was collected for audience analysis. A national survey was conducted to provide information on parental awareness of burns and their causes. Campaign resources were focus tested with the target audience and a post-campaign survey was conducted to evaluate the campaign. More details about this data collection are available under steps 3, 11, and 12.



## Revisit Health Promotion Strategy

Each year, the SKW topic is selected based on the following criteria:

- a. Significant burden of injury—either substantial number of children injured or severe injuries to small number of children (e.g., scalds)
- b. Topic has a clear focus—the main safety issue and safety messages are clearly evident
- c. Topic is applicable within both urban and rural communities and for all income levels
- d. Opportunity for good media attention—
  - Topic lends itself to news hook—low level of public awareness overall or an “I didn’t know that!” factor
  - Topic does not repeat recent SKW campaigns
  - There is no significant competition from other organizations on this topic
- e. Topic has strong focus on personal responsibility and a problem/solution approach—parents can implement safety tips to keep their children safe, their children’s safety is not largely dependent on environmental changes (e.g., team sports)
- f. Opportunity for good partner participation, as demonstrated by
  - partners interested in topic
  - partners implementing strong local programs on the topic
- g. Topic complementary with retail campaign—the retail campaign is always developed to mirror the educational campaign, retailers carry resources identical to those distributed by the communities

After considering the above criteria, prevention of scalds from hot liquids, including household tap water, an under-recognized but highly preventable source of serious injury to young children, was selected as the focus for SKW 2001.

A key factor in tap water scald burns is the temperature of the water. Hot water heaters in Canadian homes are typically set at 60°C. At this temperature, human skin will burn severely in one to five seconds. Resulting injuries tend to be serious, sometimes fatal, and have a significant economic impact on families and society in general.

The SKW campaign on scald prevention was part of a larger SKC policy-change strategy to revise federal legislation to lower the maximum limit of hot water heater temperature in homes.



## Audience Segmentation and Analysis

The primary target audience for the campaign was parents of children under the age of 15 years. This audience was selected based on the developmental factors described below.

### Infants and toddlers

- Infants and toddlers are at high risk for scalds and burns because of their natural curiosity and desire to handle objects.
- From age six months, contact burns and scalds become a common problem with babies as they touch hot surfaces or spill hot liquids on themselves.
- Children this young cannot understand and remember the danger of hot objects and liquids.

### Preschoolers (3–5 years old)

- These children love to imitate adult work.
- They play pretending to cook and lack a clear sense of danger.
- Playing with matches and lighters can be risky at this age.
- Burns from common household tools such as curling irons, stoves, irons, etc., is possible.

### School-age children (5–9 years old)

- These children love to play at adult chores.
- They do not have a reliable sense of danger.
- School-age children may be able to learn basic fire-safety messages but are not old enough to handle burn risks such as making fires, cooking, or working with hot appliances.

## 10–14 years old

- Risks include burns from fire setting, fireworks, and explosives as older children may experiment with homemade or purchased materials.
- Availability of “recipes” and ingredients through the Internet has been identified as a problem.
- Children this age can learn to safely handle cooking tasks, with initial adult supervision and instruction.
- As adolescents begin part-time jobs, burns are an important source of work-related injuries.

Various surveys, including SKC's own 1994 and 1997 surveys, indicated that about half of all Canadian parents are not aware of the risks of "too-hot" tap water. A 1996 Health Canada focus group with parents from diverse cultural backgrounds found that knowledge of burn risks was weak. More than half of the parents incorrectly believed that most burns to young children were fire related.



## Communication Inventory

In addition to the talented SKC staff, the campaign accessed Johnson & Johnson's graphic-designer team for the creation of the campaign materials.



## Set Communication Objectives

For more details on Steps 5, 6, and 7, please see Table 1: Campaign Timeline (p 7) and Table 3: Campaign Overview (p 11).

### Individual

- To increase parents' awareness of burn and scald injuries
- To increase parents' safety practices in relation to burn and scald prevention

### Network

- To increase support for burn and scald injury prevention among community professionals who work with families and children

### Societal

- To increase support for the proposed legislation among community professionals who work with families and children
- To revise national legislation so that the pre-set temperature of all new domestic hot water heaters is 49°C

## 6 STEP

# Select Channels and Vehicles

The campaign had three main components:

1. Two national news conferences (Toronto and Montreal) supported by press releases and pre-taped video footage (to support media personnel in producing a story about the topic, also called the B-roll)
2. A national retail program involving more than 5,000 stores that sell Johnson & Johnson products across Canada through which brochures, displays, and thermometer cards to measure hot tap water were distributed
3. A community program that involved distribution of free posters and partner guides as well as temperature cards (at cost) to 350 community partners

All resources were available for download from the campaign website. New information on the topic was added on to the existing SKC website. The existing toll free Safe Tips line carried a special message for SKW. Various partners throughout Canada implemented related community events and activities.

## 7 STEP

# Combine and Sequence

SKW is always held in the spring. In 2001, it ran from May 28 to June 3. The distribution of campaign resources began in March 2001, prior to the campaign launch.



Credit: Safe Kids Canada





## Develop Messages

**Table 2: Message Elements**

|                 |  |
|-----------------|--|
| <b>What</b>     | <ol style="list-style-type: none"><li>a. Hot water burns like fire.</li><li>b. Hot liquids, not fire, are the most common cause of burns to children.</li></ol>  |
| <b>So What</b>  | <ol style="list-style-type: none"><li>a. Approximately 1,500 children (0–14 years) visit the emergency department each year because of a burn injury (Beaukne, 1997). Of the burn injuries, around 45% are scald burns, 34% are contact burns, and 9% flame burns.</li><li>b. Scald burns associated with hot tap water tend to be deeper and more extensive compared with scald burns associated with hot drinks (Feldman, 1978). As a result, children with tap water scald burns have longer hospital stays.</li><li>c. At 60°C, a third-degree burn (i.e., in full thickness) will occur in a child in one to five seconds, whereas at 49°C, a third-degree burn takes at least five minutes to occur.</li></ol> |
| <b>Now What</b> | <ol style="list-style-type: none"><li>a. Test the temperature of your hot tap water and lower it to 49°C (120°F).</li><li>b. Keep hot drinks away from children. Put a lid on hot drinks (e.g., use a travel mug).</li><li>c. Keep your child safely out of the way when you are making hot foods or drinks.</li><li>d. Check every month to make sure your smoke alarm is working. Change the battery once a year.</li><li>e. Do not underestimate your child’s ability to reach and climb.</li><li>f. Do not overestimate his/her ability to understand the burn risks in your house.</li></ol>  |

The above messages were developed based on previous burn campaigns, including the Hospital for Sick Children and BC Children’s Hospital’s 1998–1999 Safe Start “Hot Water Burns Like Fire” campaign, Australia’s 1992–1994 New South Wales Scalds Prevention Campaign, Wisconsin’s 1982 tap water scald project, Harstad Norway’s 1985–1996 project, and Health Canada’s projects among others.

The campaign messages and slogans were developed in December 2000.



## Develop Identity

SKW has been running since 1997 and has had a consistent logo, material format, and overall look from 2000.



## Production

The campaign messages, creative, and related materials were all developed in-house by the SKC team and the graphic designers. SKC developed a background document that summarized all current research and statistics on burn and scald injuries as well as effective programming strategies to address the issue. This information was reviewed by the burn and scald expert advisors' panel, described previously (see p 2). The information was then distilled into key messages and supporting information by these advisors.

The following campaign resources were produced:

- A beta roll (called the B-roll) with various images relating to the campaign messages (e.g., image of someone turning down the temperature on their hot water tank) was part of the media kit produced by Environics.
- Over half a million temperature cards and over one million brochures and fact sheets were printed.
- A campaign poster was available for download off of the SKC website.
- A community partners' guide was developed (in December 2000 and finalized for print in January 2001) and made available for download. It included ideas for generating media coverage and information on how to write a media advisory.



## Implementation

In March 2001, Environics and SKC jointly organized a national survey on attitudes and behaviours related to scalds and burns prevention. Using random-digit dialing, 550 parents (of children below 15 years of age) were interviewed by telephone (for survey questions, please see Appendix A, p 18).

The survey was mainly used to garner media attention and was not used as an evaluation tool. The survey was conducted to focus interest on scald and burn prevention issues and to provide a snapshot of what parents know, believe, and do in cases of scalds and burns. The survey results became the headlines for the media release and were released nationally on May 28, 2001, during the campaign launch.

The survey results are summarized below:

- 30% of parents were aware that scalds were the most common type of burn injury
- 30% of respondents were aware that of all scald injuries, tap water scalds are the most severe
- 16% of parents were aware of the recommended temperature (49°C) to minimize the risk of tap water scald injuries
- 70% of parents reported keeping their children from underfoot while cooking
- 30% of parents put a lid on hot drinks around children

The campaign ran from May 28 to June 3, 2001. Two media conferences were held on the first day of the campaign in Toronto and Montreal. The pre-campaign survey results (mentioned above) were announced as part of the news release. The initial launch included a photo opportunity in which rubber ducks (one for each child that was burned or scalded that year) were put into Nathan Philips Square reflecting pool in Toronto and Lac aux Castors in Montreal. This event resulted in substantial media coverage. Between 75 and 100 media kits were distributed to media outlets and media personnel at the launch event.

Over half a million temperature cards were distributed through retail stores and 100,000 through community partners. There were a total of 35 million media impressions (media impressions are the number of times an ad, image, or message appears in the media), concentrated in Ontario, Quebec, Alberta, and British Columbia.

Hundreds of community events occurred throughout the country. In addition to distributing SKW campaign resources, partner activities also included providing an on-site plumber who could show parents how to reduce their hot water heater temperature; contacting local coffee shops to obtain coffee mugs with lids for staff, youth, and parents,

**Table 3: Campaign Overview**

| <b>Step Five<br/>Set Communication Objectives</b>                              | <b>Step Six<br/>Select Channels and<br/>Vehicles</b>                                  | <b>Step Seven<br/>Implementation Details</b>  |
|--|---|---|
| <b>Individual</b>  |   |   |
| To increase parents' awareness of burn and scald injuries                      | <b>Events</b> / news conferences  | Two news conferences were held on May 28, 2001, one each in Toronto and Montreal, to launch the campaign.   |
| To increase parents' safety practices in relation to burn and scald prevention | <b>Events</b> / local community events  | Educational events that focused on actions parents could take to reduce burn and scald injuries were held in May and June 2001.   |
|  | <b>Phone</b> / toll-free number   | Information on the phone line was modified to include a special message on SKW in May 2001. The number for this phone line appeared on all campaign resources.  |
|  | <b>Print</b> / media kits, brochure, press release, poster, FAQs, scald and burn tips | Media kits were distributed to media outlets and to media personnel at the launch event. Brochures were distributed in May 2001 by community partners and approximately 5,000 stores that sell Johnson & Johnson products. Press releases, each addressing one or more key messages, and results of the EnviroNics survey results were distributed through Canada News Wire to media outlets on May 28, 2001. A poster file was posted on the campaign website on April 26, 2001. An FAQ file was posted on the campaign website on April 19, 2001. A scald and burn tips file was posted on the campaign website on May 8, 2001. |
|  | <b>Promotional items</b> / thermometer cards  | Items were distributed in May 2001 by community partners and by approximately 5,000 stores that sell Johnson & Johnson products.  |

| Step Five<br>Set Communication Objectives  | Step Six<br>Select Channels and<br>Vehicles   | Step Seven<br>Implementation Details  |
|--|---|---|
| <b>Individual continued</b>  |   |   |
|  | <b>Displays</b> / displays  |   |
|  | <b>Audio-Visual</b> / beta roll<br>(B-roll)   | Video footage of images that relate to the campaign was available via satellite to television stations to assist in story coverage. B-rolls were distributed to select partners in May 2001.                                      |
|  | <b>Electronic Media</b> /<br>campaign webpage   | Information for parents/public was posted in May 2001. Information for the media was posted in May 2001. All campaign resources were available for download on the SKC website.   |
| <b>Network</b>   |   |   |
| To increase support on scald and burn injury prevention from community professionals who work with families and children | <b>Print</b> / partner guides,<br>journal article   | Posted on January 1, 2001, on Safe Kids website (partner guides). Distribution of partner guides started in January 2001. Article (journal article) on scalds and burns appeared in The Medical Post in July 30, Vol. 38, no. 28. |
|  | <b>Events</b> / local<br>community events   | Educational events that focused on the topic were held in May and June 2001.  |
|  | <b>Electronic Media</b> /<br>campaign webpage   | All campaign materials were available for download on the campaign website.   |
| <b>Societal</b>  |   |   |
| To increase support for the proposed legislation among community professionals who work with families and children       | <b>Print</b> / brief to Minister<br>of Health   | A letter to change the National Building Code and National Plumbing Code to lower hot tap water temperature to 49°C was written on Jan 28, 2002.  |
| To revise national legislation so that the pre-set temperature of all new domestic hot water heaters is 49°C             | <b>Print</b> / Call to Action –<br>letter-writing campaign<br>from parents and<br>professionals | Additional activities to achieve these revisions occurred in the three years following the campaign.  |



etc. Partnering units in every province promoted the SKW message by conducting several such activities, some of which were unique to a unit or province. Information about local activities was posted on May 3, 2001, on the SKC website.

The public awareness raised through this campaign was used to launch an advocacy effort that continued after the conclusion of the campaign.

Please see Table 3: Campaign Overview (p 11) for additional details.

## Evaluation

### Formative Evaluation

Campaign materials were pre-tested with parents of children below 15 years of age at the HSC. The materials were shown to parents and then both open- and closed-ended questions were asked. Tools were also designed based on feedback of partners in previous years. Since SKC implements a child injury prevention campaign every year, they were familiar with the kind of resources that appeal to parents and the public.

### Process Evaluation

#### Objective One

To obtain regional representation of partners across Canada, particularly in the Atlantic region and northern territories, which were previously under-represented

Progress on this process objective was monitored using SKC's internal database of listed partners.

#### Lessons Learned

Web access to campaign materials is vital for partners.

Level of participation from partners in the campaign depended on

- level of sector interest, which varies according to the topic and identified community priorities
- available financial and human resources (the often limited resources for injury prevention initiatives can make it difficult for partners to participate in the campaign every year)
- amount received from the grant program with the SKC (partners who met the criteria could receive funding up to several hundred dollars to assist them with executing the campaign activities)

## Indicators

- significant increase in participation from Atlantic provinces
- increase in Quebec partnerships (up 40%)
- increase in Northwest Territories partnerships (up 25%)
- 1,200% increase in number of fire services who participated as primary partners
- 8 of the 13 provinces/territories saw increase in number of participating partners (rest remained the same)

## Objective Two

To provide community partners with quality materials and tools to help conduct SKW activities in their own communities (quality is defined as accurate, consistent, easy to understand, and developed to meet the needs identified by partners)

A post-campaign survey of partners was conducted to monitor progress toward this objective.

## Indicators

- new poster-format feedback was positive
- 21% of partners felt information was available in a more timely manner than in previous years
- 76% of partners conducted their own activities in their communities during SKW
- over 93.5% were interested in participating in SKW 2002

## Objectives Three and Four

To increase the number of public inquiries for Safe Kids information via website and Safe Tips Line

To obtain quality media coverage across Canada (quality meaning that coverage includes national media and reflects key messages and the estimate for volume of media coverage (number of impressions) was set based on SKC's previous years' experience and the campaign topic)

Progress toward the above objectives was monitored through a media scan. Since the media campaign had no paid messaging, the attention garnered was based entirely on the pre-campaign survey information released by Environics to attract media outlets.

## Indicators

- an increase in overall media impressions with the highest number of media impressions in 2001 since 1997
- less radio (25 broadcasts versus 59) and print (46 clippings versus 72) coverage but more television (46 broadcasts versus 34) coverage
- increased television coverage due to increased use of B-roll and interviews

## Objective Five

To ensure that the sponsor is happy with the campaign

A retail team survey on satisfaction was conducted by Johnson & Johnson to monitor progress toward this objective.

## Indicators

- sponsor representatives seemed pleased with campaign communication, management, and outcome

## Outcome Evaluation

A national post-campaign telephone survey was conducted by an expert advisor at SKC using random-digit dialing between June 28 and July 12, 2001 (i.e., three to five weeks post campaign). The 38-item questionnaire was pre-tested on five parents with children below nine years of age. This survey focused on parents of younger children as SKC felt that these parents would have been more likely to pay attention to the campaign messages.

A total of 29,871 telephone numbers were called. Of these, 4,392 (15%) were non-residential numbers. Of the 25,479 residential telephone numbers, contact could not be established for 9,638 (38%). Of the 15,841 residential numbers where contact was established, 4,286 households (27%) refused to participate and 9,818 households (62%) were ineligible (no children under nine years in the household). Of the 1,737 households with children under nine years of age, detailed interviews were completed with 504 households, of which 251 had been exposed to the campaign and 253 were in the unexposed group. Exposure to SKW 2001 was defined as having “seen, heard, or read anything about scald and burn prevention during the period May 28 to June 3, 2001.” These two groups (exposed and unexposed) were then compared on a variety of variables.

In addition to the demographic questions, some of the survey questions were

- What were the four key campaign messages?
- Identify recommended “safe” temperature for water that would reduce the risk of tap water scalds in children.
- Would you support national legislation mandating safe hot water temperatures?

- Have you ever tested the temperature of the hot water in your home? If yes, did you use a temperature testing card? What was the temperature of the hot water? Did you lower the temperature subsequent to testing?

Questions were also asked about safety behaviours involving scald prevention and smoke-alarm ownership and maintenance. The results are summarized below:

- 14% (251 of 1,737) of parents of children below nine years of age recalled seeing, hearing, or reading about scald and burn prevention during SKW.
- Parents exposed to the campaign were 1.5 to 5 times more likely to be aware of key campaign messages compared to unexposed parents.

When asked to identify steps or actions that could be taken to protect children from scalds and burns in the home,

- 23% of exposed parents mentioned lowering the hot water heater temperature compared with 14% of unexposed parents,
- 12% of exposed parents compared to 8% of unexposed parents recommended keeping children out of the kitchen while cooking,
- 4% of exposed parents mentioned keeping hot drinks out of the reach of children compared with 1% of unexposed parents,
- exposed parents were 2 to 3 times more likely to test and lower the water heater temperature compared with unexposed parents, and
- 70% of parents who had picked up a thermometer card tested the tap water temperature compared with 10% of parents in the exposed group who did not pick up a card and 6% of parents in the unexposed group.

However, there were no significant differences between exposed and unexposed parents on specific scald prevention behaviors in the kitchen or on smoke-alarm ownership and maintenance.

With regard to revising legislation,

- 74% of exposed parents and 73% of unexposed parents supported a federal legislation to lower the maximum limit of hot water heater temperature in homes; and
- three years of advocacy following SKW 2001 resulted in a revision of the Ontario Building Code standards to reduce hot water to 49°C when it is delivered at the tap in residential applications. However, there is still work to be done to implement these revisions throughout the country.

# For More Information

For more information on the campaign, please contact

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# References

1. Beukne G. (ed). For the safety of Canadian children and youth. Ottawa: Health Canada, 1997.
2. Feldman K., Schaller R., Feldman J. & McMillon M. Tap water scald burns in children. *Pediatrics* 1978; 62:1-7.

# Appendix A

## Decima Research Inc. Safe Kids Week 2001 Scalds and Burns Telephone Survey.

Decima Express national telephone omnibus data collection took place in March 2001. Sample: Representative National Sample of Parents/Guardians of a Child 15 or Under (approximate n=550)

### Are you the parent or guardian of a child age 15 or under?

|                    |   |                     |
|--------------------|---|---------------------|
| Yes                | 1 | continue            |
| No                 | 2 | thank and terminate |
| Don't know/Refused | 2 | thank and terminate |

### What do you think are the MOST common causes of burn injuries (READ LIST – ENTER ONE ONLY)

#### ROTATE LIST

|   |   |
|---|---|
| Fire  | 1 |
| Scalds  | 2 |
| Contact burns (e.g. stoves, irons, space heaters) | 3 |
| None of the above                                 | 8 |
| Don't know/Refused                                | 9 |

### Which of the following do you think causes the MOST severe scalds to children (READ LIST – ENTER ONE ONLY)

#### ROTATE LIST

|   |   |
|---|---|
| Tap water scalds                                    | 1 |
| Hot liquids (e.g., coffee, tea)                     | 2 |
| Boiling water spill (e.g., overturned pot on stove) | 3 |
| None of the above                                   | 8 |
| Don't know/Refused                                  | 9 |

### What is the temperature of the hot water coming out of your tap in Celsius or Fahrenheit (ENTER A NUMBER)

Don't know/Refused 999

### Were you aware that there is a recommended temperature to prevent scalds from hot tap water?

Yes No

If yes – what is that recommended temperature (note if they are using Celsius or Fahrenheit)

**a) How often do you now or did you take extra measure to keep kids out the way while you are cooking? For example, using safety measure such as putting your child in a highchair to keep them away from the stove, sitting your child at the table, or keeping kids out of the kitchen when you are cooking. Do you do it...(READ LIST – ENTER ONE ONLY)**

|                    |   |
|--------------------|---|
| Always             | 1 |
| Sometimes          | 2 |
| Rarely             | 3 |
| Never              | 4 |
| Don't know/refused | 9 |

**b) How often do you put a lid on hot drinks when you are at home and around the kids? Do you do it.... (READ LIST – ENTER ONE ONLY)**

|                    |   |
|--------------------|---|
| Always             | 1 |
| Sometimes          | 2 |
| Rarely             | 3 |
| Never              | 4 |
| Don't know/refused | 9 |