Listen and Learn:

Working with Ethno-Cultural Communities to Share Injury Prevention

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• Childhood injuries in Canada

• Why culturally appropriate injury prevention programs?

• Three year program overview

• Program deliverables
Unintentional injuries are the leading cause of death among children in Canada.

290 Deaths

21,000 Hospitalized

82,621+ Emergency department visits


Injuries to children cost the Canadian healthcare system $4 billion annually
Immigration is an important aspect of population growth in Canada.

Approximately 1.1 million immigrants arrived in Canada (2001 – 2006)

In 2006: 6.1 million foreign born individuals were enumerated in the census in Canada

One in five recent immigrants who arrived in Canada between 2001 and 2006 were children aged 14 and under.

Need ‘culturally appropriate’ injury prevention programs that focuses on immigrant children.
Three Year Program Overview

Program Deliverables and Enhanced Outputs

• Safe Kids Canada engaged 80 parents and community leaders:
  - interviews
  - focus group discussions
  - consultations

AIM: identify cultural norms and barriers to accessing health information & develop culturally appropriate resources

• Over 45,000 educational resources were developed in three target languages.

• 100 key stakeholders now have an increased capacity to provide culturally appropriate resources for target communities.
Program Deliverables and Enhanced Outputs

- **Over 2 million** immigrants were reached in the target communities through social marketing campaigns.

- Additional program outputs were facilitated through media relations (press releases, television interviews and radio talk shows).
Three Year Program Objectives

• To establish a national injury prevention program that translates knowledge to diverse populations in Canada.

• Ensure identified communities have access to culturally appropriate injury prevention resources for the purpose of influencing risk and safety behaviours to reduce the burden of injury.

• To establish collaborative relationships with appropriate key stakeholders, such as ethno-cultural agencies who serve diverse communities.
Geographical Location for Program Outreach

- According to the Statistics Canada 2006 census, approximately 41% of all recent immigrants settled in/around Toronto.

SO: Safe Kids Canada chose to implement the initial three year program cycle in the Greater Toronto Area (GTA).

Identify Three Target Communities

- Selected: Punjabi, Chinese and Portuguese communities

[Target communities were selected based on most common ethnic languages spoken in the GTA (Statistics Canada 2001 census)]
Research

• The Volunteer Consulting Group (VCG) from the University of Toronto conducted qualitative research on effective ways of reaching out to ethno-cultural and immigrant communities.

• Research data was based on interviews with community leaders from target communities.

• Background research using extensive literature review was also conducted to understand and identify how ethnicity and immigrant status influences the risk of childhood injuries in Canada.
2008 Program Deliverables

Community Engagement

- Research was conducted on three target communities to identify and select *key informants* based on their direct experience with the Punjabi, Chinese and Portuguese immigrant communities.

- Twenty key informant interviews were conducted from various primary settlement and multicultural organization across the GTA.
Objectives of Key Informant Interviews

- Identify community perspective on childhood injuries
- Identify effective community outreach strategies

Common Themes from Key Informant Interviews

- Immigrant parents face both linguistic isolation, and societal barriers in accessing health related information
- Home injuries are prevalent among recent immigrant children
- Emphasizing laws on Canadian child safety legislation is an effective way of raising awareness among immigrant parents
- Promoting safety messages through ethnic media is a powerful and effective medium
Quote from Key Informant Interview

“In my experience as a settlement worker, new immigrant parents are faced with many challenges such as looking for jobs and financially supporting their families. Allocating money on child safety devices can often rank lower on their priority list. Parents lack awareness on childproofing homes and other safety practices as their country of origin may not have certain safety regulations enforced” – Settlement worker (Access Alliance Multicultural Health and Community Centre)
2008 Program Deliverables

Theme for 2008 – Home Safety

“Keep Your Child Safe at Home” brochure was developed in Punjabi, Simplified Chinese and Portuguese.

To ensure safety messages were culturally relevant, the brochure content was focus-tested with parents and reviewed by community leaders and representatives.

- 5000 brochures developed in each target language
- 15,000 brochures printed
- Brochures were distributed to recent immigrant communities through public health units, settlement agencies and multicultural organizations operating in the GTA.
- Great-West Life, London Life and Canada Life’s logo placed on all resources developed
2008 Program Deliverables

Home Safety Promotion Through Ethnic Media

- A 30-second radio public service announcement (PSA) on falls and poisoning prevention was developed in the three languages.

- Safe Kids Canada established a partnership with a Toronto-based multicultural media station (CIRV Multicultural Mix), that airs radio and television programs for diverse communities in Ontario.

- The radio public service announcements aired everyday for two months (October- November 2008) by CIRV.

- A Safe Kids Canada television public service announcement dubbed in Portuguese was also aired by CIRV during October and November 2008.
POISON PREVENTION:

“Injury kills more children in Canada than any other cause. Keep your children safe. Every year children are killed when they swallow medicines and pills that they think are candy. Always keep medicines and poisonous products locked up and away from children. When you have visitors at home, make sure their purse or bag is also out of reach. For a safety brochure in Chinese visit www.safekidscanada.ca. This message is bought to you by Safe Kids Canada proudly supported by Great-West Life, London Life and Canada Life.”

FALL PREVENTION:

“Injury kills more children in Canada than any other cause. Keep your children safe. Falls from high places such as kitchen counter tops, beds and stairs can cause serious head injuries to your child. Never place car seats, baby carriers or rockers on any high surface. Your child may wiggle and roll and can be seriously hurt if these carriers fall. For a safety brochure in Chinese visit www.safekidscanada.ca. This message is bought to you by Safe Kids Canada proudly supported by Great-West Life, London Life and Canada Life.”
2008 Program Deliverables

Additional Program Activity

• In order to disseminate key home safety messages in the Punjabi community, Safe Kids Canada staff members participated in a television interview on Sur Sagar Channel (Rogers 626). The interview was aired in September 2008.

• A press release was circulated to all prominent and popular Punjabi, Chinese and Portuguese newspapers in the GTA.

• An article based on the press release was published in Ming Pao Chinese newspaper in October 2008. Ming Pao has a daily circulation of 158,000.
2009 Program Deliverables

Theme for 2009 – Booster Seat Safety

• Aim = promote car passenger safety among Chinese, Punjabi and Portuguese recent immigrant families in the GTA

Motor vehicle collisions kill more children than any other injury. An estimated 100 children age 14 and under are killed and more than 12,000 children injured every year due to traffic collisions.

• To identify and understand parents’ level of awareness of car passenger safety, Safe Kids Canada conducted three focus group discussions with Chinese and Punjabi recent immigrant parents (40 recent immigrant parents participated)
2009 Program Deliverables

Common Themes from Focus Group Discussions

- All parents perceived using car seats as extremely important in keeping their children safe while riding in cars.

- Most parents lacked awareness about the purpose of a booster seat and how it protects children in a car crash.

- There is a lack of resources available in native language that provides clear and simple safety recommendations on child passenger safety.

- Ethnic media is an effective way of reaching out to recent immigrant communities.
Quotes from focus group discussions

• “A child is not strapped to a booster seat like a car seat. I worry when my child will be in a booster seat, his neck will not be protected during a car crash. I just don’t think they are safe.”
  - quote from a mother, Chinese new immigrant

• “If the sole purpose of the booster seat is to buckle children to seat belt and elevate their position. You can use a cushion/pillow under them and elevate their position. I just don’t see why they have to use booster seat. They seem unnecessary.”
  – quote from a father, Punjabi new immigrant
Booster Seat Campaign

- Safe Kids Canada designed and implemented a summer campaign to raise awareness and increase use of booster seats among the Chinese, Punjabi and Portuguese recent immigrant families in the GTA.

Campaign Strategies

- Develop and distribute culturally appropriate resources

- Based on feedback from parents, Safe Kids Canada developed a culturally appropriate brochure on booster seat use in all three target languages.
2009 Program Deliverables

Over 30,000 brochures in Chinese, Punjabi and Portuguese language were distributed to various public health units, regional police departments, public libraries and settlement agencies in the GTA. Great-West Life, London Life and Canada Life’s logo was placed on all resources.

Sample Brochure in Portuguese Language

Use Assentos Elevatórios para Manter a Sua Criança em Segurança

Quem Precisa de um Assento Elevatório?
As crianças que já não cabem nas cadeiras para carro viadada para a frente estão prontas para usar um booster seat (cadesinha do segurança) ou, dependendo de sua idade, um cinturão de segurança de cabeça. Se a criança não caber em qualquer um dos dois, deve-se procurar um assento elevatório adequado.

Porquê Usar um Assento Elevatório?
Os assentos elevatórios são feitos para crianças com pelo menos 4 pés e 9 polegadas (145 cm) de altura. Quando uma criança é demais pequena para um cinto de segurança, ele toca na pescçoço da criança e fica muito alto no estômago dela. Sem um assento elevatório, a sua criança pode ser gravemente ferida num acidente.

Um assento elevatório da 75 por cento mais proteção que os cintos de segurança sozinhos.

Como Funcionam os Assentos Elevatórios?
Um assento elevatório levanta a sua criança do modo a que o cinto de segurança se aplique corretamente.

O cinto de seu carro que toca no colo de sua criança se segura com mais segurança e o assento elevatório vai ao lugar durante um acidente ou uma paragem brusca.

No Canadá, há diferentes tipos de assentos elevatórios à venda:

Um assento elevatório de cintos elevados: providencie proteção para a cabeça e o pescoço em carros sem encostos de cabeça.

Um assento elevatório com cintos pode ser usado em carros com encostos de cabeça ajustáveis ou assentos com cintos elevados.

Quando é que uma Criança Está Pronta para Usar um Cinto de Segurança Sozinho?
Para saber se a sua criança está pronta para o cinto de segurança, peça a sua criança e depois verifique se o cinto de segurança se aplica corretamente. O cinto do ombro deve cruzar o peito da sua criança sem tocar na face ou no pescoço dela, e o cinto do colo deve ficar baixo, por acima dos ombros dela. Se o cinto de segurança não se aplicar dessa forma, a sua criança ainda precisa de um assento elevatório.

Para saber mais sobre assentos elevatórios:
Visite www.safekidscanada.ca
O site não é uma droga e o programa nacional de prevenção de estetos do hospital das crianças. Trabalhamos para melhorar a segurança em crianças.
2009 Program Deliverables

Campaign Strategies [cont’d]

➤ *Create awareness through newspaper advertisements*

- Safe Kids Canada established partnerships with 4 leading ethnic newspapers in the target communities:
  - Sing Tao Daily newspaper (Chinese/Cantonese language)
  - Canadian Post City newspaper (Chinese/Mandarin language)
  - Punjabi Post newspaper (Punjabi language)
  - Ajit Weekly (Punjabi language)
- Safe Kids Canada developed culturally appropriate advertisements in Chinese (Cantonese and Mandarin) and Punjabi. The ads ran weekly for 4 weeks in all the newspapers during the month of July 2009.
保护孩子每一次的乘车安全，
请使用儿童汽车座椅。

很少有人意识到，汽车安全带是针对成人的体形而设计。因此，在遇到车祸或紧急刹车的情况下，使用儿童汽车座椅的孩子会更加安全。体形已超出正向汽车座椅的儿童，若其身高在4英尺9英寸以下，体重在40至80磅（18-36千克）之间，则应使用儿童汽车座椅。儿童汽车座椅会将孩子受伤的风险降低近75%。

有关保护儿童安全的详情，
请浏览 www.safekidscanada.ca
## 2009 Program Deliverables

<table>
<thead>
<tr>
<th>Language</th>
<th>Newspaper</th>
<th>No. of Ads in July</th>
<th>Circulation number</th>
<th>Media Impressions</th>
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</thead>
<tbody>
<tr>
<td>Chinese (Cantonese)</td>
<td>Sing Tao Daily</td>
<td>4 Ads in July</td>
<td>180,000/day</td>
<td>720,000</td>
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<tr>
<td>Chinese (Mandarin)</td>
<td>Canadian City Post</td>
<td>4 Ads in July</td>
<td>180,000/day</td>
<td>720,000</td>
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<tr>
<td>Punjabi</td>
<td>Punjabi Post</td>
<td>4 Ads in July</td>
<td>18,000/day</td>
<td>72,000</td>
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<tr>
<td>Punjabi</td>
<td>Ajit Weekly</td>
<td>4 ads</td>
<td>15,000/weekly</td>
<td>60,000</td>
</tr>
</tbody>
</table>

*Approximately 2 million people reached based on media impression*
2009 Program Deliverables

Campaign Strategies [cont’d]

- Create awareness on booster seat use through radio messaging

  - A 30-second public service announcement (PSA) on booster seats was developed in Chinese (Mandarin and Cantonese), Punjabi and Portuguese languages.

  - Safe Kids Canada established partnership with two (Radio A1, Punjabi Post 770 AM) ethnic radio stations in Toronto.

  - The Chinese and Punjabi 30 second radio PSA on booster seats were aired every day for the month of July 2009.

2009 Program Deliverables

English Script of Radio Public Service Announcements

“Motor-vehicle collisions are one of the leading causes of death among children in Canada. Keep your children safe while riding in cars by using a booster seat. Children who have outgrown forward-facing car seats are ready to use a booster seat if they are less than 4 feet 9 inches tall and weigh between 40 and 80 pounds. Seat belts are designed for adult bodies. Using a booster seat will keep your child safer in a crash.

This message is brought to you by Safe Kids Canada, proudly supported by Great-West Life, London Life, and Canada Life.”
2009 Program Deliverables

Campaign Strategies [cont’d]

- Advocate booster seat safety through media relations

- Community leaders were selected to speak on behalf of Safe Kids Canada on various ethnic radio talk shows.

- A nurse from the Chinese community and a Punjabi community leader advocated for booster seat use for their respective communities on A1 Chinese Radio and Punjabi Post 770AM during a 10-minute talk show.

- OMNI Chinese channel covered a 3 minute segment on Safe Kids Canada’s booster seat campaign. It was also mentioned on the OMNI Portuguese newscast.
Advocate booster seat safety through media relations [cont’d]

- Safe Kids Canada staff members attended a one-hour live television talk show on Sur Sagar Channel, a national Punjabi network. The talk show focused on booster seat use and safety recommendations.
- Press releases containing information on program initiative and
- Where to access translated brochures on booster seat use was distributed to various ethnic newspapers in the GTA.
Conclusion

- Recent immigrants, particularly children, often experience high rates of injury.

- Developing injury prevention programming that is ethnically and culturally sensitive is essential.

- A ‘participatory approach’ that engages immigrant communities can support developing evidence-based safety materials and key messages.

- Social marketing strategies that utilize community resources can then raise awareness of and promote dissemination of these safety messages/materials.