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**Children's Health and Safety Baseline Survey**  
**Final Report**  
(HC POR 10-01)

*Ce rapport est disponible en français sur demande.*

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## **EXECUTIVE SUMMARY**

### **1-1 Background, Approach and Methodology**

#### *Background and Objectives*

In response to the Government of Canada identifying the health and safety of Canadians and their families as a priority, Health Canada has developed a marketing campaign to ensure awareness of, and access to, the wealth of expert information the Government of Canada has developed in the areas of children's health and safety. This multi-departmental initiative is being led by Health Canada and will ensure all priority issues within each department are effectively communicated in campaign products. Topics expected to be covered in the campaign include: consumer product, food, medication, chemical and toy safety; food safety; injury prevention, physical activity, immunization and infectious disease prevention; cyber-safety, bullying prevention and emergency preparedness; and, vehicle and road safety, child restraints, boating safety and rail safety.

Health Canada commissioned a survey of parents of children age 16 or younger with the goal of gathering some key baseline measures, partly in order to potentially track their movement as a result of the communications efforts. The objectives of this baseline survey on parents' knowledge and awareness of children's health and safety were to assess parents':

- Current level of understanding, perceptions of risk, and concern.
- Informational needs, sources, and expectations.
- Behaviour toward improving understanding of risks and methods to mitigate risks.

#### *Approach and Methodology*

This research consisted of a telephone survey of Canadian parents (or guardians) of children age 16 or younger. A total of 1,008 surveys were completed with this target population across Canada. The survey was conducted between October 4, 2010 and November 3, 2010 and a response rate of 31.6% was achieved. The survey sample was stratified by region (Atlantic, Quebec, Ontario, Prairies, and B.C.) with about 200 completions in each region. For analysis purposes the sample data was weighted to be representative of the actual population by age of parents, gender and region. The margin of error on the full sample is a maximum of +/-3%, 19 times out of 20.

### **1-2 Key Findings**

The survey can be categorized into five main sections: information access and sources; views on children's health and safety; awareness and use of website; familiarity with health and safety standards; and, behaviour change. The key findings from each of these sections are presented below.

### *Information Access and Sources*

- Nearly three-quarters of parents (73%) have looked for information about health issues related to their children and slightly less (62%) about safety issues. Just over half (55%) have looked for both kinds of information. Parents with children aged one to three years are most likely to have looked for this type of information while those with children 13 to 16 years old are the least likely. Those with higher levels of educational attainment, household income and women are more likely to seek out information on the health and safety of children.
- Overall, medical information (58%) is the type of information most frequently sought, followed by information on car seats or restraints (16%). Those with household incomes of \$100,000 or higher and parents 35 to 54 years are also more likely to seek medical information. Parents are most likely to look for information about children's health and safety once every two or three months or less (52%). Ten percent claimed to do so about once a week or more.
- The vast majority of parents consult the Internet (84%) for information on children's health and safety, followed by a doctor or physician (20%) or books (18%). The incidence of looking to a doctor or physician for information is slightly higher among those with a lower income level.
- Almost three-quarters (72%) of parents say the information they find on child health or safety issues meets most (60%) or all (12%) of their needs. Those with children aged six years or less are more likely to feel the information they find meets most of their needs compared to those with children aged seven to 16 years.
- Among the 20% of parents who have not looked for information about child health or safety issues, over half (57%) say they do not know what they would look for or would not look for anything. Those who were able to anticipate the specific types of information they would seek out were most likely to mention medical information (18%) followed by information on immunization (6%). The Internet (71%) was clearly the source that these parents would most likely turn to, followed by doctors (23%).

### *Views on Children's Health and Safety*

- Three quarters of all parents (74%) strongly agree<sup>1</sup> that they are aware of the health and safety risks in their child's environment.
- The majority of parents strongly agree that they typically look for children's health and safety information only when they have a specific need (69%) and most of these parents also tend to actively use this information once they have found it (65%). Parents of children one to three years old (78% strongly agree) have the highest propensity to make active use of found information, which is significantly higher than those with children 13 to 16 years old (61% strongly agree).

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<sup>1</sup> Based on a ten-point scale where "1" means "Strongly Disagree" and "10" means "Strongly Agree". For interpretive purposes, a rating of "8" or higher out of 10 is interpreted as "strongly agree", a rating of "4" to "7" as "somewhat agree" and "1" to "3" as "disagree".

- A strong majority of parents either strongly (59%) or somewhat (35%) agree that they are able to find information about how to protect the health and safety of their children.
- The majority of parents (56% somewhat agree) are reluctant to *wholeheartedly* accept that the Canadian Government is the most reliable source of children's health and safety information, although about one third (31%) strongly agree this is the case.
- About one third (31%) of parents strongly agree that they usually wait until they hear about a children's health and safety issue before searching for information on the topic.
- Most parents are relatively proactive when it comes to keeping current about the latest children's health and safety information. In total, 25% strongly agree and 46% somewhat agree that they regularly search for information about children's health and safety to keep abreast of the latest information. Over one-quarter (29%) claimed that they do not conduct regular research to stay current.
- The proliferation of different sources of information on children's health and safety leads to confusion as to which ones are reliable, as shown by the fact that almost one-quarter (23%) of parents strongly agree and a further 56% somewhat agree that this is the case.

#### *Awareness and Use of Website*

- Parents who looked for information about child health or safety issues and used the Internet to do so were most likely to mention using a search engine, such as Google or Yahoo, at 44%. Health Canada was cited by 20% of parents. No other site was mentioned by more than four percent of parents.
- About one-third (31%) of parents of children 16 or under is aware of the [healthycanadians.gc.ca](http://healthycanadians.gc.ca) website. Awareness is greater among parents under 35 years old compared to those who are 35 years of age or older.
- Among those who are aware of the [healthycanadians.gc.ca](http://healthycanadians.gc.ca) website, only about half (54%) visited it, for a total usage incidence of 17%. Those who have visited the [healthycanadians.gc.ca](http://healthycanadians.gc.ca) website are also more likely to have visited the Health Canada website (30% vs. 17%).

#### *Familiarity with Health and Safety Standards*

All parents surveyed were asked to rate their level of familiarity with twelve specific health and safety standards. Roughly half to two-thirds of parents surveyed claimed to be very familiar<sup>2</sup> (i.e. a rating of "eight out of ten" or higher) with most of these standards.

- *Nutrition, Obesity, and Physical Activity* - standards for nutrition, obesity, and physical activity among children are the best known to Canadian parents, with more than two-

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<sup>2</sup> For interpretive purposes, a rating of "8" or higher out of 10 is interpreted as "very familiar", a rating of "4" to "7" as "somewhat familiar" and "1" to "3" as "Not familiar".

thirds (66%) claiming to be very familiar with these standards. Parents with children 13 to 16 years (70%) tend to be more familiar with the standards and familiarity is lowest among parents with children less than a year old (55%).

- *Car Seats* - standards respecting the safety and installation of car seats for children are the second-most familiar to the Canadian parents with two out of every three (66%) parents indicating they are very familiar with these standards. As car seats tend to be less relevant to parents with older children, those with children 13 to 16 years old (52%) are significantly less familiar with these standards compared to parents with children six years or less (73% – 86%).
- *Water and Pool Safety* - close to two thirds (62%) of parents claimed to be very familiar with standards for water and pool safety; however, some important differences exist among parents based on the age of their children and where they live. In general, parents' familiarity with water and pool safety standards rises with the age of their children (a low of 51% for those with children under one year to a high of 67% for those with children seven to 12 years).
- *Children's Medication* - six in ten (60%) parents claimed to be very familiar with the health and safety standards for children's medication. Women and parents of children less than six years old tend to be more familiar with these standards.
- *Food Safety* – almost six in ten parents (58%) reported that they are very familiar with food safety standards. Women are more likely than men to be very familiar with food safety, while the same is true for parents with household incomes of less than \$40,000.
- *Environmental Health* - parents are moderately familiar with standards for environmental health, with a majority (54%) rating themselves as very familiar with these standards. Parents with household incomes of less than \$40,000 are less likely than higher income households to be very familiar with these standards.
- *Vehicle, Road, Boating and Rail Safety* – half of parents (50%) are very familiar with standards regarding standards for vehicle, road, boating, and rail safety, and at the other extreme, 13% are not familiar with these standards.
- *Bullying* - about half of parents said they are very familiar with standards for children's health and safety related to bullying. The older the child the higher the likelihood that parents are very familiar with standards related to bullying (low of 25% for those with children under one year to a high of 62% for those with children 13 to 16 years).
- *Cribs* - although only half (49%) of parents are very familiar with standards regarding the safety and installation of cribs there is a distinct difference in the level of familiarity between parents of younger and older children. Specifically, parents with children that are less than four years old (68%) claimed to be very familiar with standards for cribs compared to those with children 13-16 years of age (41%).
- *Use of the Internet* - Less than half (48%) of all parents indicate they are very familiar with health and safety standards pertaining to use of the Internet by children and teens. As older children would be more likely to be users of the Internet it is not that surprising to find that parents with children seven to 12 years (54%) and 13-16 years (56%) are more likely than parents of children one to three years (31%) or less than one year (35%) to be very familiar with Internet safety.

- *Toys* - Relative to the other areas tested, familiarity with the health and safety standards for toys is low with less than half of all parents (44%) claiming to be very familiar with the associated standards. Women and parents of younger children (high of 53% for those with children ages 1-3 years old to a low of 38% for those with children 13-16 years) are more likely to be very familiar with the standards for toys.
- *Cyber-Bullying* - Cyber-bullying is clearly the area that parents are least familiar with in terms of safety standards (36% are very familiar). Cyber-bullying seems of greater concern to parents of older children (a high of 43% for those with children 13-16 years), as their children are more likely to be using the Internet more frequently.

### *Behaviour Change*

- Over half (55%) of all parents surveyed claimed that within the past 12 months they had made changes in their usual behaviour or actions in an attempt to further protect the health and safety of their children. Younger parents (less than 35 years of age) were more likely to have made changes compared to those 35 years or older.
- Among those who made changes to their behaviour the majority indicated they undertook actions in seven specific areas. Ensuring their children's immunization records are up to date (89%) was the activity that these parents were most likely to have completed. Parents of children three years or younger (95%-97%) are more likely to have updated their children's immunization records compared to those with children 13-16 year old (85%).
  - ✓ The incidence of parents undertaking some of the other activities, such as checking car seat restraints for proper installation and talking to their children about bullying or cyber-bullying is directly related to the age of the child.
- Parents (45%) who did not make any changes to their behaviour in the past 12 months were asked if they recalled undertaking any of seven specific actions. When prompted, most of these parents recalled that they, in fact, were already undertaking these activities.
  - ✓ The two activities that parents were most likely to have recalled undertaking in the past 12 months were ensuring that immunization records are up to date (88%) and teaching their children about the importance of daily physical activity (87%). Less than half of the parents (45%) tried to gain a better understanding of the risks on how to prevent food allergies.

The cost of this research was \$74,991.75

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# SOMMAIRE DE GESTION

## 1-1 Contexte, Approche et Méthodologie

### *Contexte et objectifs*

En réponse au gouvernement du Canada qui veut faire de la santé et de la sécurité des Canadiens et de leurs familles une priorité, Santé Canada a développé une campagne marketing afin de s'assurer que tous les Canadiens soient informés et aient accès à la mine d'informations pertinentes que le gouvernement du Canada a développées dans le domaine de la sécurité et de la santé des enfants. Cette initiative interministérielle est mise de l'avant par Santé Canada, qui veut s'assurer que tous les enjeux prioritaires à l'intérieur de chaque ministère soient communiqués efficacement dans les produits de la campagne. La campagne portera sur : les produits de consommation, les aliments, les médicaments, les produits chimiques et la sécurité des jouets; la salubrité des aliments; la prévention des blessures, l'activité physique, l'immunisation et la prévention des maladies infectieuses; la cybersécurité, la prévention de l'intimidation et la planification d'urgence; la sécurité des véhicules et la sécurité routière, les harnais pour sièges d'auto, la sécurité nautique et la sécurité ferroviaire.

Santé Canada a mandaté un sondage auprès de parents d'enfants de 16 ans ou moins dans le but d'établir les lignes de base clés, en partie pour suivre potentiellement leur évolution par suite des efforts de communication. Cette enquête initiale sur les connaissances et la sensibilisation des parents à l'égard de la santé et de la sécurité des enfants visait à évaluer les parents sur les points suivants :

- Le degré de compréhension actuel, les perceptions du risque, et les préoccupations.
- Les besoins, sources, et attentes quant aux informations.
- Le comportement grâce à une meilleure compréhension des risques et des façons d'atténuer les risques

### *Approche et méthodologie*

Cette recherche consistait à effectuer un sondage téléphonique auprès de parents (ou tuteurs) canadiens d'enfants de 16 ans ou moins. Un total de 1008 sondages a été complété auprès de cette population cible, partout au Canada. Le sondage a été effectué entre le 4 octobre 2010 et le 3 novembre 2010, et un taux de réponse de 31,6 % a été obtenu. L'échantillon du sondage a été stratifié par région (Atlantique, Québec, Ontario, les Prairies et la Colombie-Britannique) et a donné environ 200 entrevues complétées dans chaque région. Pour des besoins d'analyse, les données de l'échantillon ont été pondérées afin d'être représentatives de la population actuelle par âge, sexe et région. La marge d'erreur pour l'échantillon total est d'un maximum de +/-3 %, 19 fois sur 20.

## 1-2 Résultats clés

Le sondage peut être divisé en cinq sections principales : accès à l'information et sources d'information; points de vue sur la santé et la sécurité des enfants; notoriété et utilisation du site Web; connaissance des normes de santé et de sécurité; et changement de comportement. Les résultats clés pour chacune de ces sections sont présentés ci-dessous.

### *Accès à l'information et sources d'information*

- Plus des deux tiers des parents (73 %) ont cherché de l'information sur des questions de santé liées à leurs enfants et un peu moins (62 %) sur des questions de sécurité. La moitié (55 %) ont cherché les deux sortes d'information. Les parents d'enfants de un à trois ans sont les plus susceptibles d'avoir cherché ce type d'information alors que les parents d'enfants de 13 à 16 ans sont les moins susceptibles de l'avoir fait. Ceux qui ont un plus haut niveau de scolarité, un meilleur revenu du ménage et les femmes sont plus susceptibles de chercher de l'information sur la santé et la sécurité des enfants.
- Dans l'ensemble, l'information médicale (58 %) est le type d'information qu'on recherché le plus souvent, suivie de l'information sur les sièges d'auto et les harnais (16 %). Ceux dont le revenu du ménage est de 100 000 \$ ou plus et les parents de 35 à 54 ans sont aussi les plus susceptibles d'avoir cherché de l'information médicale. Les parents sont plus portés à chercher de l'information sur la santé et la sécurité des enfants une fois tous les deux ou trois mois ou moins (52 %). Dix pour cent ont affirmé l'avoir fait environ une fois par semaine ou plus.
- La grande majorité des parents consultent Internet (84 %) pour obtenir de l'information sur la santé et la sécurité des enfants, suivis de ceux qui consultent un médecin (20 %) ou des livres (18 %). L'incidence des parents qui se tournent vers un médecin pour obtenir de l'information est plus élevée parmi ceux qui ont un niveau de revenu moins élevé.
- Plus des deux tiers (72 %) des parents indiquent que l'information qu'ils trouvent sur les questions de santé et de sécurité répond à la plupart (60 %) ou à tous (12 %) leurs besoins. Les parents d'enfants de six ans ou moins sont plus susceptibles de trouver que l'information qu'ils recherchent répond à la plupart de leurs besoins comparativement à ceux qui ont des enfants âgés de 7 à 16 ans.
- Parmi les 20 % des parents qui n'ont pas cherché de l'information sur des questions de santé et de sécurité des enfants, environ la moitié (57 %) disent qu'ils ne savent pas ce qu'ils chercheraient ou qu'ils ne chercheraient rien. Ceux qui pouvaient anticiper les types d'informations spécifiques qu'ils chercheraient étaient plus portés à mentionner les informations médicales (18 %) suivies des informations sur l'immunisation (6 %). Internet (71 %) était nettement la source que ces parents étaient le plus portés à consulter, suivie des médecins (23 %).

### *Points de vue sur la santé et la sécurité des enfants*

- Trois quarts de tous les parents (74 %) sont fortement d'accord<sup>3</sup> qu'ils sont au courant des risques pour la santé et la sécurité dans l'environnement de leurs enfants.
- La majorité des parents sont fortement d'accord qu'ils cherchent habituellement de l'information sur la santé et la sécurité des enfants seulement lorsqu'ils ont un besoin spécifique (69 %) et la plupart de ces parents ont aussi tendance à mettre en pratique cette information une fois qu'ils l'ont trouvée (65 %). Les parents d'enfants de un à trois ans (78 % fortement d'accord) ont la plus forte propension à mettre l'information en pratique, ce qui est nettement supérieur au pourcentage obtenu pour les parents d'enfants de 13 à 16 ans (61 % fortement d'accord).
- Une forte majorité des parents sont fortement (59 %) ou assez (35 %) d'accord qu'ils savent où trouver de l'information sur la façon de protéger la santé et la sécurité de leurs enfants.
- La majorité des parents (56 % assez d'accord) hésitent à accepter *d'emblée* que le gouvernement canadien soit la source la plus fiable en matière d'information sur la santé et la sécurité des enfants, bien qu'environ un tiers des parents (31 %) sont fortement d'accord qu'il s'agit de la source la plus fiable.
- Environ un tiers (31 %) des parents sont fortement d'accord qu'ils attendent habituellement d'entendre parler d'une question de santé et de sécurité pour les enfants avant de chercher de l'information sur le sujet.
- La plupart des parents sont relativement proactifs lorsqu'il s'agit de se tenir au courant des dernières informations sur la santé et la sécurité des enfants. En tout, 25 % sont fortement d'accord et 46 % sont assez d'accord qu'ils cherchent régulièrement de l'information sur la santé et la sécurité des enfants afin de se tenir à jour. Environ un quart (29 %) ont affirmé qu'ils ne cherchent pas régulièrement de l'information pour se tenir à jour.
- La prolifération de différentes sources d'information sur la santé et la sécurité des enfants porte à confusion quant à quelles sources sont fiables, tel qu'indiqué par le fait que près d'un quart (23 %) des parents sont fortement d'accord et un autre 56 % sont assez d'accord que c'est le cas.

### *Notoriété et utilisation du site Web*

- Les parents qui ont cherché de l'information sur des questions de santé et de sécurité pour les enfants et qui ont utilisé Internet pour le faire sont les plus susceptibles de mentionner qu'ils utilisent un moteur de recherche comme Google ou Yahoo, à 44 %. Santé Canada a été mentionné par 20 % des parents. Aucun autre site n'a été mentionné par plus de trois pour cent des parents.

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<sup>3</sup> Fondé sur une échelle de 10 points où « 1 » signifie « Fortement en désaccord » et « 10 » signifie « Fortement d'accord », une évaluation de « 4 » à « 7 » pour « Assez d'accord et de « 1 » à « 3 » pour « En désaccord ».

- Environ un tiers (31 %) des parents d'enfants de 16 ans ou moins connaissent le site Web canadiensante.gc.ca. Les parents de moins de 35 ans sont plus au courant du site que les parents de 35 ans ou plus.
- Parmi ceux qui connaissent le site Web canadiensante.gc.ca, seulement la moitié (54 %) l'ont visité, soit une incidence totale d'utilisation de 17 %. Ceux qui ont visité le site canadiensante.gc.ca sont aussi plus susceptibles d'avoir visité le site Web de Santé Canada (30 % vs 17 %).

### *Connaissance des normes de santé et de sécurité*

Tous les parents sondés devaient évaluer leur niveau de connaissance de douze normes spécifiques sur la santé et la sécurité. Entre la moitié et les deux tiers des parents sondés ont affirmé qu'ils étaient très au courant<sup>4</sup> (c.-à-d. une évaluation de « huit sur dix » ou plus) de la plupart de ces normes.

- *Nutrition, obésité et activité physique* – les normes pour la nutrition, l'obésité et l'activité physique chez les enfants sont celles qui sont les plus connues des parents canadiens. Plus des deux tiers (66 %) ont affirmé que ces normes leur étaient très familières. Les parents d'enfants de 13 à 16 ans (70 %) ont tendance à mieux connaître les normes et les parents d'enfants de moins d'un an (55 %) sont les moins au courant.
- *Sièges d'auto* – les normes concernant la sécurité et l'installation de sièges d'auto pour enfants sont les deuxièmes plus connues des parents canadiens. Deux parents sur trois (66 %) ont indiqué que ces normes leur sont très familières. Puisque les sièges d'auto ont moins de pertinence pour les parents d'enfants plus âgés, ces normes sont moins familières pour les parents dont les enfants sont âgés de 13 à 16 ans (42 %) comparativement aux parents d'enfants de six ans ou moins (73% – 86%).
- *Sécurité dans l'eau et dans les piscines* – près des deux tiers (62 %) des parents ont affirmé que les normes liées à la sécurité dans l'eau et dans les piscines leur sont très familières; cependant, il y a d'importantes différences parmi les parents selon l'âge de leurs enfants et l'endroit où ils demeurent. En général, la sensibilisation des parents en matière de sécurité dans l'eau et dans les piscines augmente avec l'âge de leurs enfants (un faible pourcentage de 51 % de ceux avec des enfants de moins de un an jusqu'à un pourcentage élevé de 67 % pour ceux avec des enfants de sept à douze ans).
- *Médicaments pour enfants* – de même que la salubrité des aliments, six parents sur dix (60 %) ont indiqué que les normes liées à la santé et à la sécurité des médicaments pour enfants leur sont très familières. Les femmes et les parents d'enfants de moins de six ans ont tendance à mieux connaître ces normes.

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<sup>4</sup> À des fins d'interprétation, une note de « 8 » ou plus sur 10 est interprétée comme étant « très familières », une note de « 4 » à « 7 » comme étant « assez familières » et une note de « 1 » à « 3 » comme étant « très familières ».

- *Salubrité des aliments* – six parents sur dix (58 %) ont indiqué que les normes liées à la salubrité des aliments leur sont très familières. Les femmes sont plus susceptibles que les hommes à très bien connaître les normes liées à la salubrité des aliments et cela tient pour les parents dont le revenu du ménage est de moins de 40 000 \$.
- *Santé environnementale* – les parents sont passablement au courant des normes liées à la santé environnementale, une majorité des parents (54 %) affirmant que ces normes leur sont très familières. Les parents dont le revenu du ménage est de moins de 40 000 \$ sont moins susceptibles de bien connaître ces normes que ceux qui ont un revenu du ménage plus élevé.
- *Sécurité des véhicules, sécurité routière, nautique et ferroviaire* – pour une faible majorité de parents (50 %) les normes liées à la sécurité des véhicules, sécurité routière, nautique et ferroviaire leur sont très familières et, à l'autre extrémité, 13 % ne connaissent pas ces normes.
- *Intimidation* – environ la moitié des parents ont répondu que les normes en matière de santé et de sécurité des enfants liées à l'intimidation leur étaient très familières. Plus l'enfant est âgé, plus il est probable que les parents soient très au courant des normes liées à l'intimidation (un faible pourcentage de 25 % pour ceux dont les enfants sont âgés de moins d'un an jusqu'à un haut pourcentage de 62 % pour ceux dont les enfants sont âgés de 13 à 16 ans).
- *Lits d'enfants* – bien que les normes liées à la sécurité et à l'installation de lits d'enfants soient très familières pour seulement la moitié (49 %) des parents, il y a une nette différence quant au niveau des connaissances entre les parents d'enfants plus jeunes et les parents d'enfants plus âgés. Spécifiquement, les parents d'enfants de moins de quatre ans (68 %) ont affirmé que les normes liées aux lits d'enfants leur étaient très familières comparativement aux parents d'enfants de 13 à 16 ans (41 %).
- *Utilisation d'Internet* – moins de la moitié (48 %) de tous les parents indiquent qu'ils sont très bien informés au sujet des normes de santé et de sécurité liées à l'utilisation d'Internet par les enfants et les adolescents. Puisque les enfants plus âgés seraient plus susceptibles d'être des utilisateurs d'Internet, il n'est pas surprenant de constater qu'il est plus probable que les parents avec des enfants de 7 à 12 ans (54 %) et de 13 à 16 ans (56 %) soient beaucoup mieux informés au sujet de la sécurité sur Internet que les parents d'enfants de 1 à 3 ans (31 %) et de moins de un an (35 %).
- *Jouets* – comparativement aux autres domaines sondés, les parents sont moins bien informés au sujet des normes de santé et de sécurité en matière de jouets. Moins de la moitié de tous les parents (44 %) affirment que ces normes leur sont très familières. Les femmes et les parents d'enfants plus jeunes (un haut pourcentage de 53 % pour ceux dont les enfants ont moins d'un an comparativement à 38 % pour ceux dont les enfants ont de 13 à 16 ans) sont plus susceptibles d'être très bien informés au sujet des normes liées aux jouets.
- *Cyberintimidation* – la cyberintimidation est nettement le domaine où les parents sont moins bien informés en termes de normes de sécurité (36 % sont très au courant). La cyberintimidation semble préoccuper davantage les parents d'enfants plus âgés (un haut pourcentage de 43 % pour ceux dont les enfants sont âgés de 13 à 16 ans) puisque leurs enfants sont plus susceptibles d'utiliser Internet plus souvent.

### *Changement de comportement*

- Plus de la moitié (55 %) de tous les parents sondés ont affirmé avoir fait des changements dans leur comportement habituel ou leur façon d'agir au cours des 12 derniers mois dans le but de mieux protéger la santé et la sécurité de leurs enfants. Les parents plus jeunes (moins de 35 ans) étaient plus susceptibles d'avoir fait des changements comparativement aux parents de 35 ans ou plus.
- Parmi ceux qui avaient changé leur comportement, la majorité ont indiqué qu'ils étaient passés à l'action dans sept domaines spécifiques. S'assurer que les dossiers d'immunisation de leurs enfants étaient à jour (89 %) était l'activité que ces parents étaient le plus susceptibles d'avoir complétée. Les parents d'enfants de trois ans ou moins (95 %-97 %) étaient plus susceptibles d'avoir mis les dossiers d'immunisation de leurs enfants à jour comparativement aux parents d'enfants de 13 à 16 ans (85 %).
  - ✓ Des activités telles que vérifier si les harnais d'auto ont été installés correctement et parler à leurs enfants d'intimidation ou de cyberintimidation sont directement liés à l'âge de l'enfant.
- Les parents (45 %) qui n'avaient pas changé leur comportement au cours des 12 derniers mois se sont fait demander s'ils se souvenaient d'avoir entrepris certaines des sept actions spécifiques. Une fois aidés, la plupart de ces parents se sont souvenus d'avoir, de fait, déjà commencé à faire ces activités.
  - ✓ Les deux activités que les parents étaient le plus susceptibles d'avoir entreprises au cours des 12 derniers mois étaient d'avoir montré à leurs enfants l'importance de faire de l'activité physique tous les jours (87 %) et de s'assurer que les dossiers d'immunisation étaient à jour (88 %). Moins de la moitié des parents (45 %) ont essayé d'avoir une meilleure compréhension des risques liés aux allergies alimentaires et comment les prévenir.

Le coût de cette recherche se sont élevés à 74 991,75 \$

<p><i>Fournisseur : TNS Canadian Facts</i> <i>Numéro du contrat : HT372-100561/001/CY</i> <i>Date d'attribution du contrat : le 10 août 2010</i></p>
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# 1. BACKGROUND, OBJECTIVES AND METHODOLOGY

## 1.1 Research Purpose and Objectives

### 1.1.1 Background

Protecting the health and safety of Canadians and their families is a priority of the Government of Canada. Canadian parents are looking to the relevant departments of the federal government for specific information relating to the safety and health of their families. In turn, the government seeks to ensure that families have the information they need to make informed choices.

To support this priority, Health Canada has developed a marketing campaign to ensure awareness of, and access to, the wealth of expert information the Government of Canada has developed in the areas of children's health and safety. This campaign will be a multi-departmental initiative, with Health Canada as the lead, to ensure all priority issues within each department are effectively communicated in campaign products. Topics expected to be covered in the campaign are:

- Consumer product, food, medication, chemical and toy safety, as well as content that focuses on Healthy Environments and Consumer Safety (HECS) and Health Products and Food Branch (HPFB) content
- Food safety
- Injury prevention, physical activity, immunization and infectious disease prevention
- Cyber-safety, bullying prevention and emergency preparedness
- Vehicle and road safety, child restraints, boating safety and rail safety

### 1.1.2 Campaign Objectives

The overall objective of the campaign is to provide parents with access to streamlined, centralized information related to children's health and safety that will allow them to take simple actions to protect their family's health, safety, and overall well-being. More specific objectives of the campaign include:

- To increase Canadian parents' awareness of and access to information related to child health and safety.
- Share the Government's expertise in children's health and safety.
- Maximize the number of parents who use the campaign website for information.

- Increase the number of parents taking simple action to protect the health and safety of their children.

### 1.1.3 Research Objectives

Public opinion research was commissioned by Health Canada prior to embarking on the communications effort in order to gather some key baseline measures, partly in order to potentially track their movement as a result of the communications efforts. The objectives of the baseline survey addressed in this report, with regard to the safety and health of their children, was to assess parents':

- Current level of understanding, perceptions of risk, and concern.
- Informational needs, sources, and expectations.
- Behaviour toward improving understanding of risks and methods to mitigate risks.

## 1.2 Methodology and Specifications

TNS conducted a **nationally representative telephone survey of 1,008 Canadian parents (or guardians) of children age 16 or younger.**

### 1.2.1 Questionnaire Design

TNS drafted a survey questionnaire based on the study objectives. A draft questionnaire in English was submitted to the project authority for review and was finalized based on several iterations of comments and updates. The final questionnaire comprised about 25 mainly closed-ended questions. The questionnaire was professionally translated to French. English and French versions of the questionnaire can be found as Appendix.

### 1.2.2 Sampling

The sample was a regionally disproportionate random sample within each of five regions (Atlantic, Quebec, Ontario, Prairies, and B.C.). The achieved sample of completed interviews was determined based on a quota of approximately 200 per region. The final sample breakdown, before and after weighting, is presented below.

### 1.2.3 Pre-Testing

Once a final questionnaire was ready, a live pre-test with 20 completions (10 in English, 10 in French) was conducted. The results of the pre-test were summarized and presented to the client and the questionnaire revised accordingly.

## 1.2.4 Fieldwork

Fieldwork was conducted between October 4, 2010 and November 3, 2010. The overall response rate, calculated according to Government of Canada and MRIA policy was **31.6%**. The record of call is shown in Table 1-1.

**Table 1-1 Record of call**

<b>Total Telephone Sample Assigned</b>	<b>18,748</b>	
	<b>100%</b>	
<b>Total Telephone Sample Not Dialed</b>	<b>4</b>	
	<b>0%</b>	
<b>Total Telephone Sample Dialed</b>	<b>18,744</b>	
	<b>100%</b>	
<b>Base: Total Sample Dialed</b>	<b>100%</b>	
<b>Sample Excluded From Frame</b>	<b>3,178</b>	
	<b>17%</b>	
Not In Service		2,260
Non-Residential		200
Non-Business		0
FAX / Modem		629
Others		89
<b>Total In-Scope Telephone Sample</b>	<b>15,566</b>	
	<b>83%</b>	
<b>Base: Total In-Scope Sample</b>	<b>100%</b>	
<b>Unresolved In-Scope Sample</b>	<b>6,913</b>	
	<b>44%</b>	
Busy		44
No Answer		1,109
Answering Machine - Residential		1,778
Answering Machine - Business		0
Household Contacted - Not Convenient		135
Household Refusal		3,699
Household Language Problem		148
<b>In-Scope but Non-Responding</b>	<b>3,710</b>	
	<b>24%</b>	
Appointment / Callback		345
Refusals - Respondent		3,081
Refusals - Business		0
Respondent Never Available		172
Language Problem - Respondent		112
Language Problem - Business		0
Others		0

**Table 1-1 Record of call (cont'd.)**

<b>In-Scope and Responding</b>	<b>4,943</b>	
	<b>32%</b>	
Completed Interviews		1,008
Terminated		0
Disqualified Respondents		3,908
Quota Failure		1
All Others		26
<b>Response Rate</b>		<b>31.58%</b>
<b>Refusal Rate</b>		<b>78.35%</b>

## 1.2.5 Checking and Weighting

Prior to any data analysis, the data set was checked and cleaned to ensure that all responses were valid, logical, and accurate. The clean data set, comprising 1,008 cases, was then weighted to represent the Canadian population by age, gender and region. Tables 1-2 and 1-3 show the unweighted and weighted distributions of the final sample.

**Table 1-2 Unweighted sample, by region, gender, and age**

	Total Canadians					
	Total (1,008) #	Atlantic (202) #	Quebec (201) #	Ontario (202) #	Prairies (200) #	BC (203) #
Male 18 – 34	80	14	14	20	20	12
Male 35 – 54	256	53	66	45	45	46
Male 55 +	23	4	4	3	4	8
Female 18 - 34	194	30	30	42	46	30
Female 35 - 54	430	85	85	81	82	102
Female 55 +	25	2	2	11	2	5

**Table 1-3 Weighted to Canadian general population over age 18, by region, gender, and age**

	Total Canadians					
	Total (998) #	Atlantic (76) #	Quebec (213) #	Ontario (392) #	Prairies (192) #	BC (125) #
Male 18 - 34	48	2	11	20	9	6
Male 35 – 54	333	20	54	161	65	33
Male 55 +	56	4	15	17	11	9
Female 18 - 34	117	11	33	44	13	16
Female 35 – 54	390	37	83	135	81	54
Female 55 +	54	2	17	15	13	7

### 1.2.6 Margin of Error

For analyses conducted of the overall sample, the margin of error for percentages is at most  $\pm 3.0$  percentage points, 19 times out of 20. For analyses at the regional level, the corresponding maximum margin of error is  $\pm 7.2$  percentage points.

### 1.3 Interpretation of Results and Statistically Significant Differences

The comparative analyses reported here focus primarily on statistically significant results at the 0.05 significance level (95% confidence level). **Please note that the absence of reporting of any given comparison implies, not that the analysis was omitted, but that it revealed no significant differences from one group to another and that the results are similar to the overall analysis sample.**

### 1.4 Expenditures

The final cost of this contract was \$74,991.75

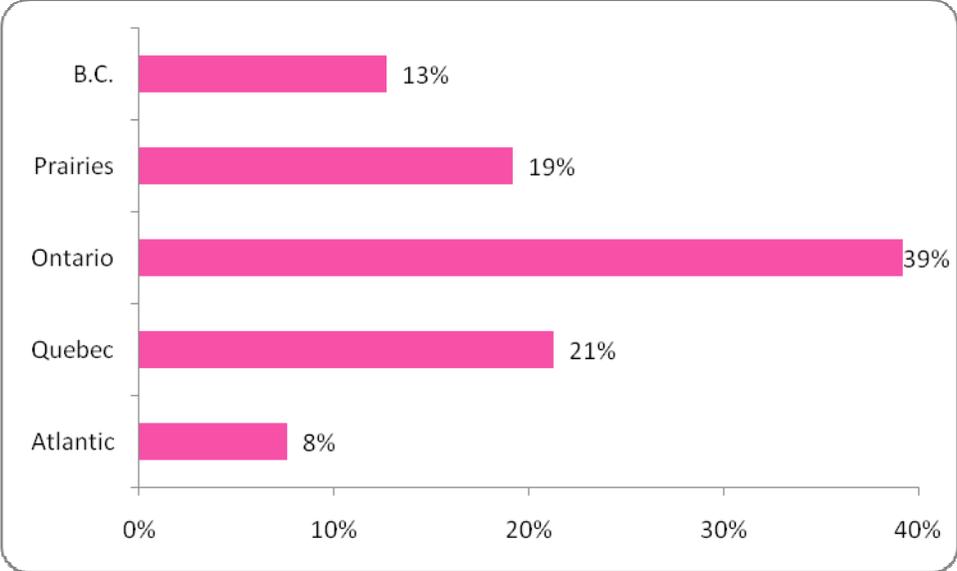
## 2. RESPONDENT PROFILE

This section describes the socio-demographic profile of the survey respondents.

### 2.1 Region

Without weights, the 1,008 Canadian parents surveyed are distributed evenly across regions, with almost exactly 20% in each region. This is expected, as we established balanced completion targets to ensure adequate observations for regional analysis. Prior to analysis, the data were weighted to achieve a proper representation of the population distribution in Canada by age, gender and region. The weighted distribution is shown in Exhibit 2-1. Ontario has the greatest representation at 39%, while approximately one-fifth represent Quebec (21%), followed by the Prairies (19%), British Columbia (13%), and the Atlantic (8%) provinces.

**Exhibit 2-1 Weighted Distribution of Respondents by Region**

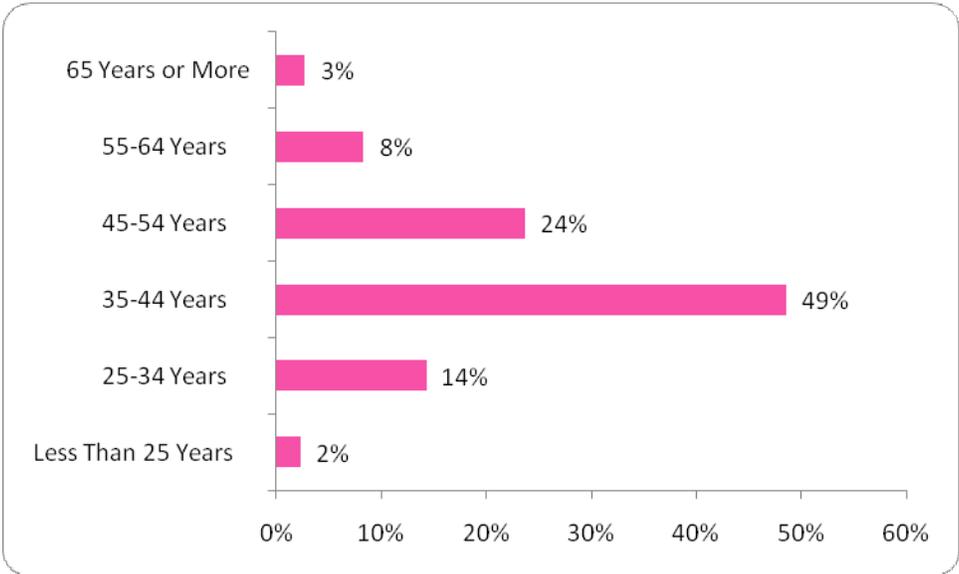


Base: All Respondents (n-1008)

## 2.2 Respondents' Ages

Almost half (49%) of Canadian parents surveyed were 35 to 44 years (49%) and about a quarter (24%) were 45 to 54 years. As Exhibit 2-2 also shows, there were significantly fewer parents in the following age categories: 25-34 year (14%), 55-to-64 (8%), 65 years or more (3%), and less than 25 years (2%). Those who are 65 or older are more likely to be a parent or guardian of children over the age of seven.

**Exhibit 2-2 Respondents' Ages**



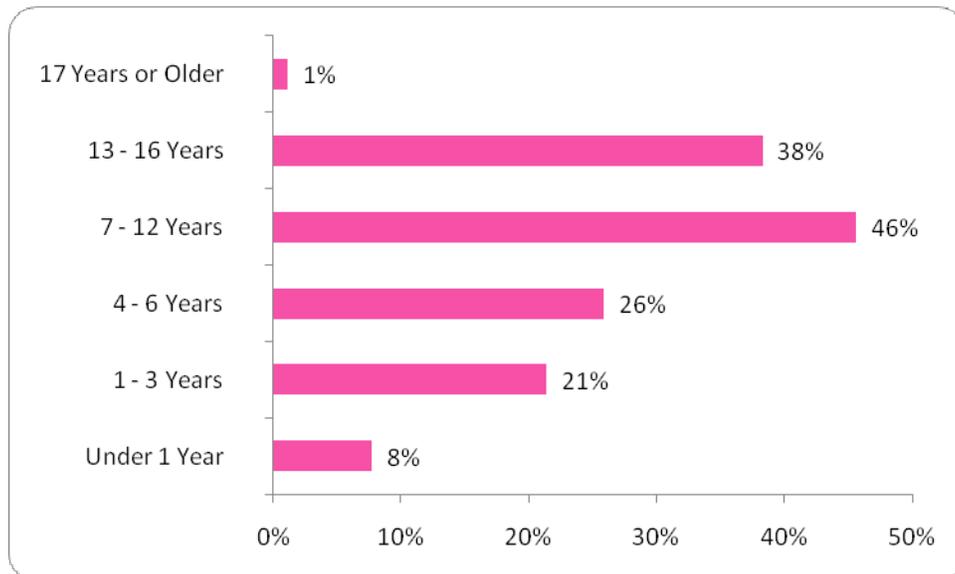
Q: In which of the following age groups do you fall? Base: All respondents (n=1,008)

### 2.3 Children's Ages

Given the focus of the research is on the health and safety of children, the survey was limited to households with at least one child 16 years of age or younger. Exhibit 2-3 shows the percentages of households with children in each of several age categories. Percentages can add to more than 100 because households may have children in more than one age category.

Households with children 13 to 16 years (38%) and seven to 12 years (46%) were the most common. Roughly one in four households have one or more children aged four to six years (26%) or one to three years (21%). Furthermore, 8% have a child less than one year of age. While the survey data includes some parents of children aged 17 or older, it should be noted that these parents also have children aged 16 or younger.

**Exhibit 2-3 Children's Ages**

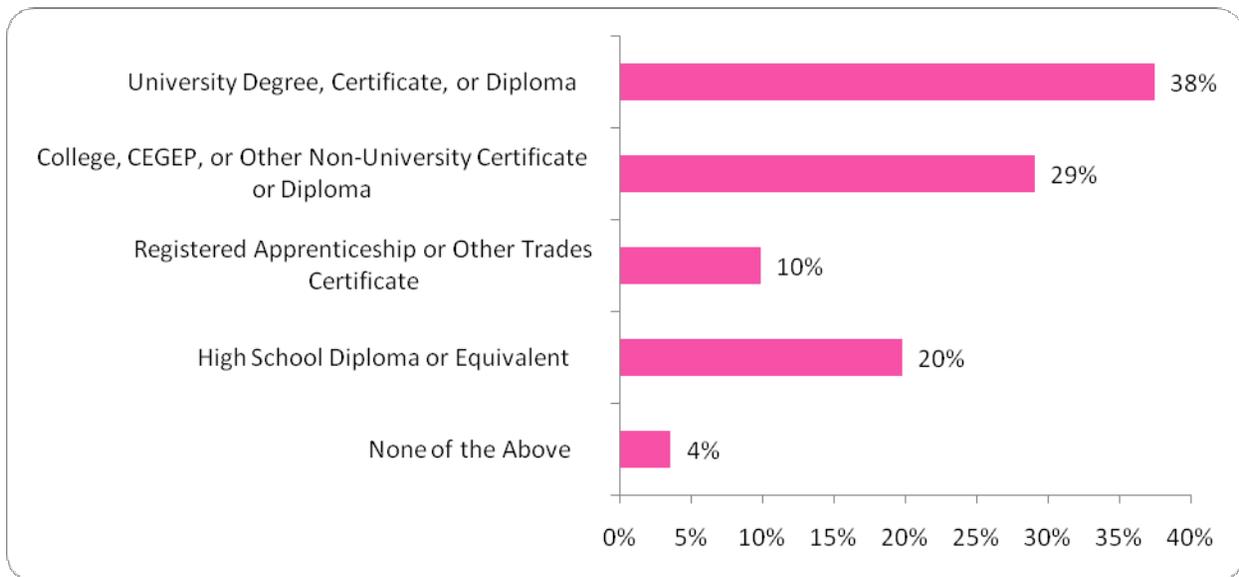


Q: Do you have children in any of the following age groups living in your household? Base: All respondents (n=1,008)

## 2.4 Level of Education

Over three out of every four respondents have attained some postsecondary education. As shown in Exhibit 2-4, almost one in three Canadian parents of children 16 years old or younger (38%) have a university degree, certificate, or diploma. Another 29% have some post-secondary education in the form of a college, CEGEP, or other non-university certificate or diploma; and a further 10% have a registered apprenticeship or other trades certificate. Among the rest, 20% have a high-school diploma or equivalent and four percent did not fall into any of the categories (these respondents did not select one of the defined categories).

**Exhibit 2-4 Level of Education**

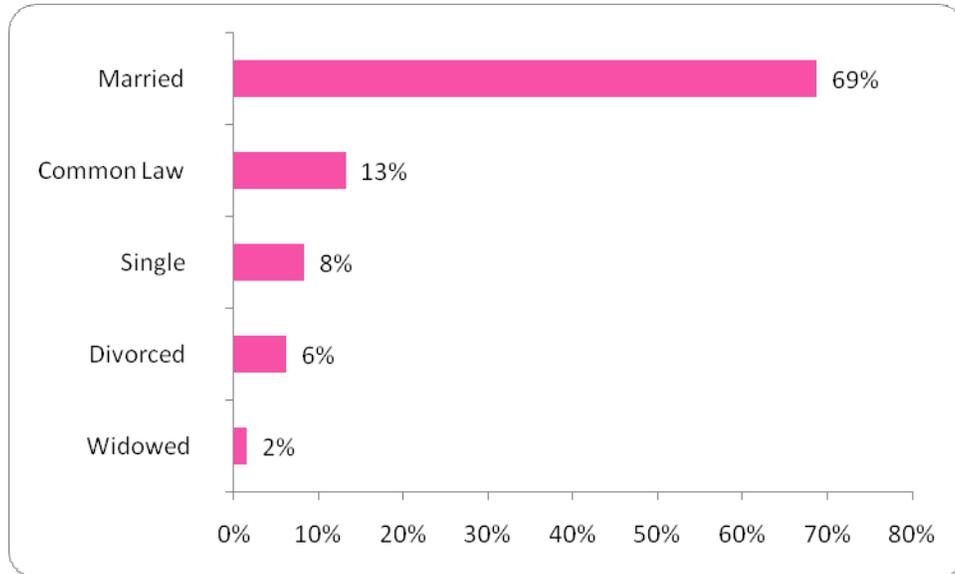


Q: Which of the following diplomas or degrees have you completed? Base: All respondents (n=1,008)

## 2.5 Marital Status

As would be expected in a survey requiring the presence in the household of children 16 years old or younger, a strong majority of the Canadian parents surveyed (82%) are either married or in a common-law relationship. As seen in Exhibit 2-5, a further eight percent are single, six percent divorced, and two percent widowed.

### Exhibit 2-5 Marital Status



Q: What is your marital status? Base: All respondents (n=1,008)

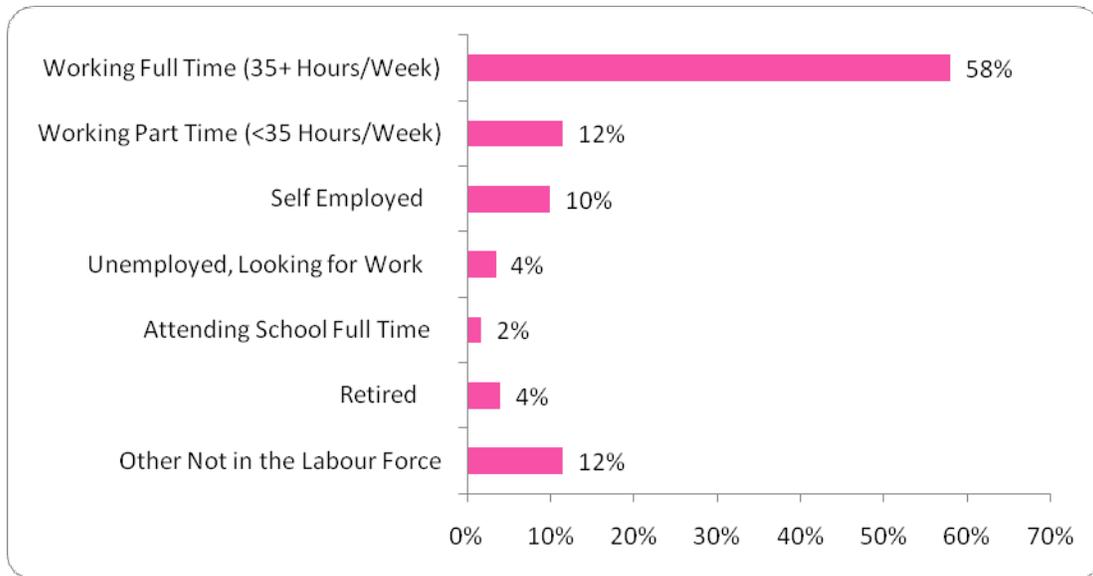
## 2.6 Language Spoken at Home

Among Canadian parents surveyed, 69% speak English, 20% French, while 11% speak something other than the two official languages at home most often.

## 2.7 Employment Status

Over half (58%) of the parents surveyed are working full time. As seen in Exhibit 2-6, approximately one in ten are out of the labour force (12%), working part time (12%), self employed (10%) or retired (4%). The rest either are unemployed and looking for work (4%), or are attending school full time (2%).

### Exhibit 2-6 Employment Status



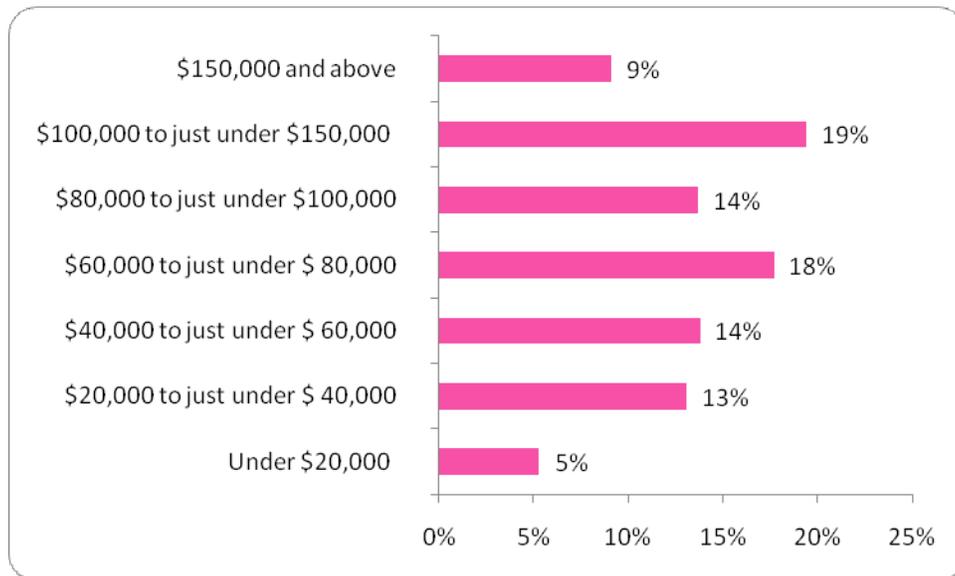
Q: Which of the following categories best describes your current employment status? Are you...

Base: All respondents (n=1,008)

## 2.8 Household Income

As seen in Exhibit 2-7, the survey data shows quite an even distribution across five income categories ranging from \$20,000 to \$150,000 (varying from 13% to 19%). Canadian parents who have a household income of less than \$20,000 make up five percent of those surveyed, while those who earn a household income of over \$150,000 annually represent only nine percent of those surveyed.

### Exhibit 2-7 Household Income



Q: Which of the following categories best describes your total household income? That is, the total income of all persons in your household combined, before taxes?

Base: All respondents (n=1,008)



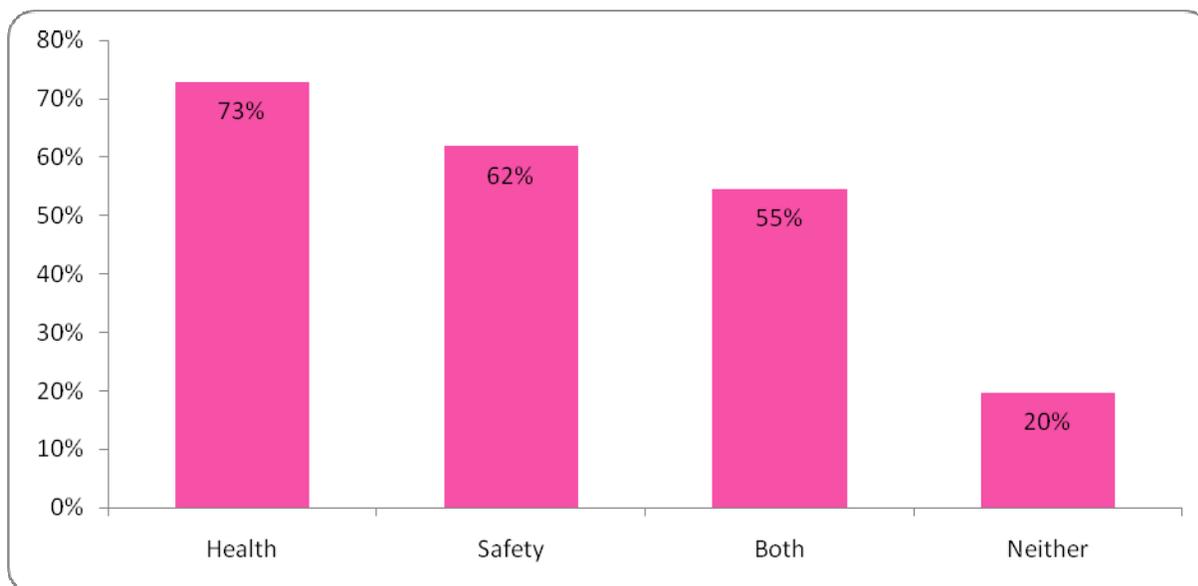
### 3. INFORMATION ACCESS AND SOURCES

Canadian parents surveyed were asked a series of questions about information on children's safety and health. The questions addressed types of information sought, frequency of seeking information, sources of the information, whether it met their needs, and intentions regarding searches for information and likely sources in the future. These results are presented in detail in the following section.

#### 3.1 Looked for Information

Nearly three-quarters of Canadian parents (73%) have looked for information about health issues related to their children and slightly less (62%) about safety issues. Just over half (55%) have looked for both kinds of information. Results are shown in Exhibit 3-1.

**Exhibit 3-1 Type of Information Sought**



Q: Have you ever looked for information about...a) Health issues related to your children b) Safety issues related to your children?

Base: All respondents (n=1,008)

**Parents of younger children tend to be more active searchers and researchers of information on children's health and safety.** Parents with children aged one to three years are most likely to have looked for this type of information, with more than eight in ten (85%) looking for health information, 76% for safety information, and 70% for both. Those with children 13 to 16 years old are least likely to claim they have looked for information: 68% looked for health information, 55% for safety information, and 47% both.

**The higher the level of educational attainment, the more likely parents are to seek information on children's health and safety.** Respondents with a university education were significantly more likely to look for such information (85% health, 72% safety,

and 67% both), compared to those with trade school or college education (71% for child health, 57% for child safety, and 50% for both) or with a high-school education (60% for child health, 56% for child safety, and 46% for both). Details on the incidence of parents seeking children’s health and safety information by children’s ages and by respondents’ levels of education appear in Table 3-1 below.

**Table 3-1 Information Sought, by Children’s Ages and Respondent’s Education**

	Total	Ages of Children					Education		
		<1	1-3	4-6	7-12	13-16	High School	Trade School/ College	Univer- sity
Base (actual)	1,008	105	261	267	408	352	210	385	376
<b>Information Sought:</b>									
Health	73%	73%	85%	80%	77%	<b>68%</b>	60%	71%	<b>85%</b>
Safety	62%	70%	76%	70%	63%	<b>55%</b>	56%	57%	<b>72%</b>
Both	55%	62%	70%	65%	58%	<b>47%</b>	46%	50%	<b>67%</b>
Neither	20%	19%	9%	15%	17%	<b>24%</b>	30%	22%	<b>10%</b>

**Higher income parents are more likely to seek out information on the health and safety of children.** As Table 3-2 shows, parents who have a household income of \$80,000 or higher are more likely to seek information related to their child’s health (86% for those with \$80-\$100,000 and 82% for those with \$100,000 or more), child safety (65% and 67%) or both (63% and 62%), compared to those who earn less than \$40,000 (55% for child health, 52% for child safety and 39% for both).

**Women are more likely than men to seek information on children’s health (79% vs. 65%), child safety (67% vs. 56%) as well as both health and safety information (62% vs. 45%).**

**Parents who visited the Healthy Canadians website ([healthycanadians.gc.ca](http://healthycanadians.gc.ca)) are far more likely to seek information on children’s health than those who did not.** Among those who visited the website, 89% sought health information, 77% sought safety information, and 70% sought both. These numbers compare with only 70%, 59%, and 51%, respectively, among parents who did not visit the website.

Further details of the responses by household income, gender, and having visited the Healthy Canadians website appear in Table 3-2.

**Table 3-2 Information Sought, by Household Income, Gender, and Visited Healthy Canadians Website**

	Total	Household Income				Gender		Visited Healthy Canadians Website	
		<\$40K	\$40-\$80K	\$80-\$100K	\$100K +	Male	Female	Yes	No
Base (actual)	1,008	184	344	150	261	359	649	181	827
<b>Information Sought:</b>									
Health	73%	<b>55%</b>	72%	86%	82%	<b>65%</b>	79%	89%	<b>70%</b>
Safety	62%	<b>52%</b>	60%	65%	67%	<b>56%</b>	67%	77%	<b>59%</b>
Both	55%	<b>39%</b>	54%	63%	62%	<b>45%</b>	62%	70%	<b>51%</b>
Neither	20%	<b>32%</b>	22%	12%	13%	<b>24%</b>	16%	5%	<b>23%</b>

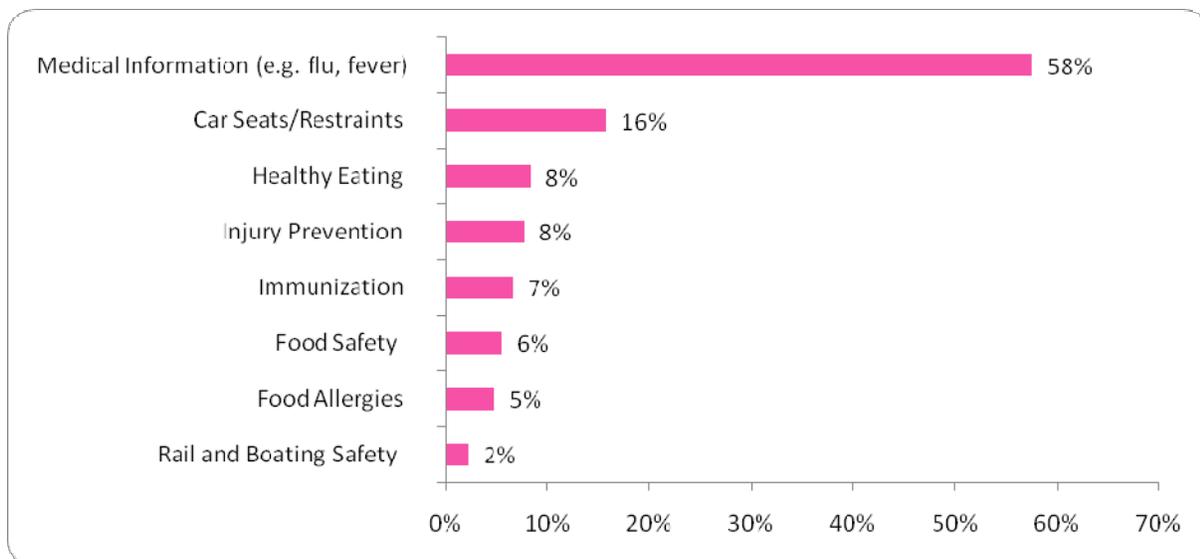
### 3.2 Types of Information Looked For

Parents who looked for information about child health or safety issues mentioned 40 different specific types of information they had looked for. **By far the most frequently cited type of information sought is medical** (58%), such as information on the flu or fever. This is followed by information on car seats or restraints (16%).

Those with **household incomes of \$100,000 or higher** (67%) are significantly more likely to have stated they have looked for medical information compared to parents who earn less than \$80,000 annually (50% for those with a household income of less than \$40,000 and 53% for those earning between \$40,000-\$79,999). Parents **35 to 54 years old** (62%) are also more likely to seek medical information compared to those under 35 years (52%) and those over 55 years (40%).

Exhibit 3-2 shows the types of information sought cited by at least five percent of respondents.

### Exhibit 3-2 Types of Information Sought, Most Frequent Reports



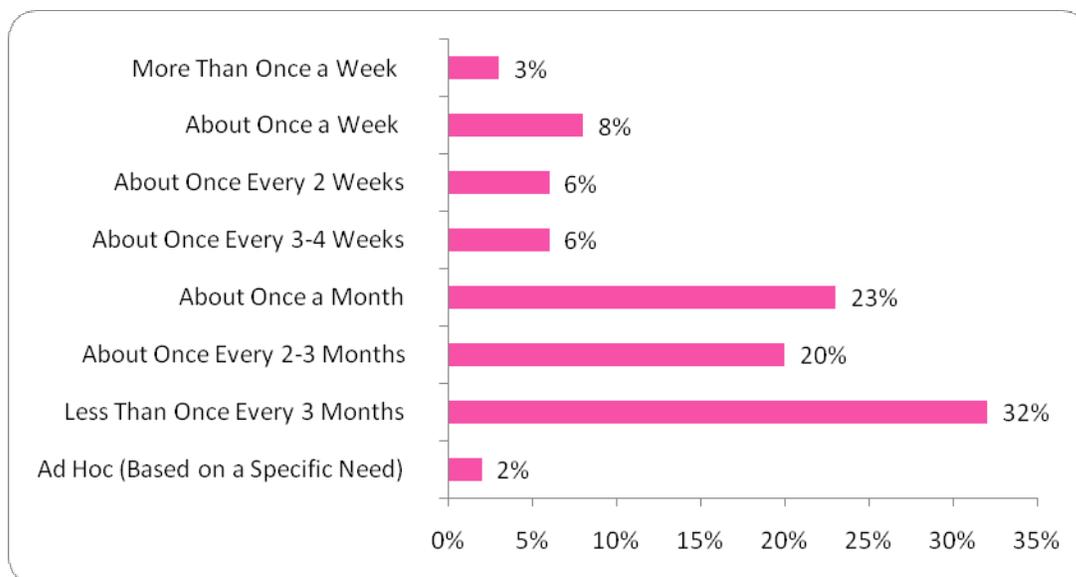
Q: What types of children’s health and safety information have you looked for in the past?

Base: Respondents who looked for information about health or safety issues related to their children (n=820)

### 3.3 Frequency of Looking for Information

Parents who looked for information about health or safety issues related to their children were also asked how often they typically look for such information. Eleven percent claimed to do so about once a week or more, while over half do so once every two or three months or less (52%). Exhibit 3-3 shows the results in greater detail.

### Exhibit 3-3 Frequency of Seeking Information



Q: On average, how often would you say you typically look for information on any topic related to children’s health and safety?

Base: Respondents who looked for information about health or safety issues related to their children (n=820)

### 3.4 Information Sources Currently Used

Parents that look for information about children's health or safety reported 26 different sources they currently use to find such information. **The vast majority consult the Internet (84%),** followed by a doctor or physician (20%) or books (18%). The following list shows the sources of information cited by at least five percent of the parents who looked for information.

- The Internet, 84%
- Doctor/Physician, 20%
- Books, 18%
- Magazines, 9%
- Friends or Relatives, 7%
- Other Government (City, Municipal, Provincial), 6%
- Newspapers, 5%

**The incidence of looking to a doctor or physician for information is higher among those with a high school education.** Of those with a high school education, 31% consult a doctor or physician. This incidence declines to 21% for those with a university education and 14% for those who have a trade school or college diploma.

### 3.5 Source Used Most Often

The 470 parents who looked to more than one source for information about child health or safety issues were asked to identify the source they use most often. Among the 13 sources cited, the most frequently occurring are:

- The Internet, 49%.
- CLSC (Local Community Service Centre), 12%.
- Doctor/Physician, 10%
- Books, 7%

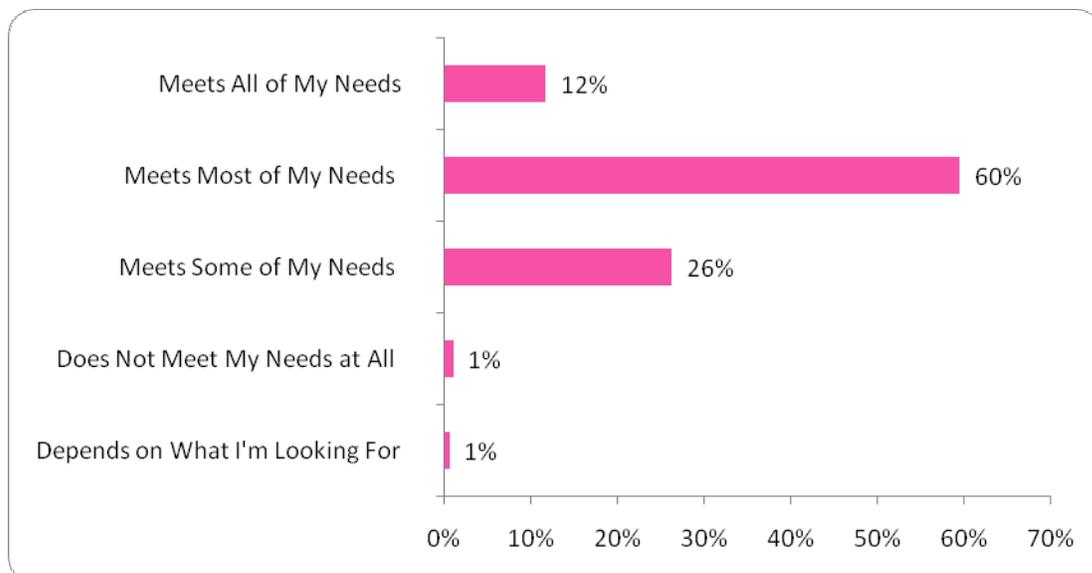
Parents with household incomes of \$80,000 or higher (56% for parents with income of \$80,000-\$99,999 and 58% for those with incomes of \$100,000 or more) are more likely to have stated that the Internet is their most important source compared to those with incomes less than \$80,000 (44% for those with income of less than \$40,000 and 45% for those with income between \$40,000 and \$79,999).

### 3.6 How Well Information Meets Needs

Parents who looked for information about child health or safety issues also indicated how well the information they find meets their needs. **Almost three-quarter (72%) of parents say the information meets most (60%) or all (12%) of their needs.** Exhibit 3-4 displays the overall percentage distribution of responses to this question.

**Parents with young children are more likely to feel the information they find meets most of their needs.** Parents of children less than one year feel the information meets most of their needs (74%) compared to those with children seven to 16 years old (59%-55%).

#### Exhibit 3-4 How Well Information Meets Needs



Q: In general, how well does the information you find on children's health and safety meet your needs?

Base: Respondents who looked for information about health or safety issues related to their children (n=820)

Furthermore, the age of the parent is a factor in determining whether the information meets their needs or not. Those under 35 years are far less likely (15%) to say the information meets only some of their needs, compared to those over 55 years, among whom 49% say it meets some of their needs.

### 3.7 Types and Sources of Information Sought in Future

One in five (20%) parents have not looked for information about child health or safety issues. These parents were asked about the specific types of information they might look for in the future. Over half (57%) say they do not know what they would look for or would not look for anything, but among those parents who were able to anticipate the specific types of information they would seek out, most mentioned medical information (18%) with information

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on immunization coming in second (6%). Other specific types of information mentioned include:

- Food Safety, 4%
- Healthy Eating, 4%
- Food Allergies, 4%
- Injury Prevention, 3%

In addition, the same respondents also indicated the sources they might use when looking for information in the future. In this case, only five percent say they do not know and only five percent say they would consult no source. The specific sources mentioned most frequently are:

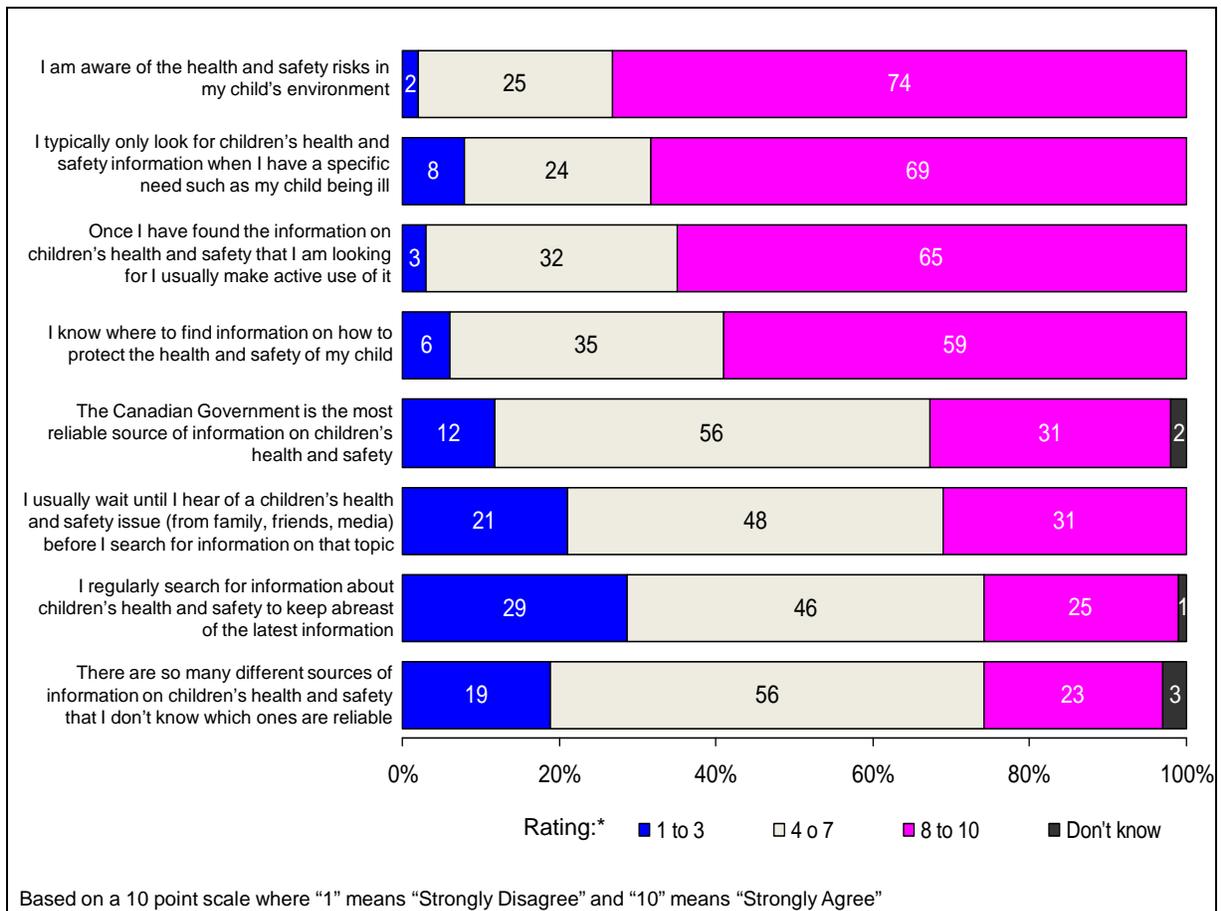
- The Internet, 71%
- Doctor/Physician, 23%
- Books, 8%
- Friends or Relatives, 6%
- Other Government (City, Municipal, Provincial), 4%
- Health Canada, 4%



## 4. VIEWS ON CHILDREN'S HEALTH AND SAFETY

Parents of children 16 years of age or younger were asked if they agreed or disagreed with a series of eight statements concerning children's health and safety.<sup>5</sup> Their views and behaviours with respect to child health and safety issues are presented in Exhibit 4-1.

**Exhibit 4-1: Views on Children's Health and Safety**



Q: Please tell me how much you agree or disagree with each statement.

Base: Half sample asked four statements and the other half sample asked remaining four statements. Sample size per statement (n=492 or n=516)

<sup>5</sup> This battery of questions was split between Canadian parents surveyed, approximately half those surveyed (n=492) were asked about the first four statements and the other half (n=516) about the second set of four statements.

#### 4.1 Awareness, Search Habits and Use of Children’s Health and Safety Information

As can be seen in Exhibit 4-1, about three quarters of all parents (74%) strongly agree<sup>6</sup> that they are aware of the health and safety risks in their child’s environment. Parents in Quebec (90%) are more likely than those in other regions (low of 66% in the Prairies to 75% in BC) to have claimed to be aware of the health and safety risks in their child’s environment.

The majority of parents strongly agree that they typically look for children’s health and safety information only when they have a specific need (69%) and most of these parents also tend to actively use this information once they have found it (65%). Compared to parents in BC (61%) and the Prairies (64%), those in Ontario and Quebec (72% each) are more likely to strongly agree that they only look for children’s health and safety information when they have a specific need. In addition, this is also true for those who are married or common-law (72% strongly agree) compared to those who are not married (55% strongly agree). Parents of children one to three years old (78% strongly agree) have the highest propensity to make active use of found information, which is significantly higher than those with children 13 to 16 years old (61% strongly agree). Younger parents (18-34 years) tend to be the most active users of the children’s health and safety information they find (74% strongly agree) – this compares to 63% for parents 35 years of age and older.

Most parents are relatively proactive when it comes to keeping current about the latest children’s health and safety information. In total, 25% strongly agree and 46% somewhat agree that they regularly search for information about children’s health and safety to keep abreast of the latest information. About three in ten (29%) claimed that they do not conduct regular research to stay current. Those with household incomes of less than \$40,000 (36%) are more likely than those in the \$80,000 to \$99,999 (19%) and \$100,000 or higher (15%) income brackets to strongly agree that they regularly search for information about children’s health and safety to keep abreast of the latest information. Parents of children 13-16 years (19% strongly agree) are the least likely to regularly search for information, notably lower than for parents with children less than one years old (32%) and one to three years old (31%).

About one third (31%) of parents strongly agree that they usually wait until they hear about a children’s health and safety issue before searching for information on the topic. About one in five (21%) are proactive in looking ahead (they disagree that they wait to hear about the issue before searching). Parents in the Atlantic provinces (43%), the Prairies (37%), and BC (36%) are more likely than those in other regions (26% in Quebec, 27% in

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<sup>6</sup> For interpretive purposes, a rating of “8” or higher out of 10 is interpreted as “strongly agree”, a rating of “4” to “7” as “somewhat agree” and “1” to “3” as “disagree”.

Ontario) to strongly agree that they usually wait to hear about an issue before conducting a search.

## 4.2 Sources of Information on Children's Health and Safety

Overall, most parents feel confident that they are able to find information about how to protect the health and safety of their children (59% strongly agree and 35% somewhat agree). Married or common-law parents (56%) are less likely to have strongly agreed that they are able to find this type of information compared to non-married parents (72%). On the other hand, parents in Quebec (75% strongly agree) are the most likely to have claimed they know where to find information on protecting the health and safety of their children – this compares to a low of 48% for those in the Atlantic provinces to 59% in Ontario.

The proliferation of different sources of information on children's health and safety leads to confusion as to which ones are reliable, as shown by the fact that almost one-quarter (23%) of parents strongly agree and a further 56% somewhat agree that this is the case. Parents 18-34 years of age are more likely to have strongly agreed (34% vs. 21% for parents 34-54 years old and 19% for parents 55 year or older) that they are confused as to the reliability of information due to multiple sources of information.

The majority of parents (56% somewhat agree) are reluctant to *wholeheartedly* accept that the Canadian Government is the **most** reliable source of children's health and safety information, although about one third (31%) strongly agree this is the case. Only about one in ten (12%) outright disagree that the Canadian Government is the most reliable source of information on children's health and safety.

The following differences among parents exist with respect to the Canadian Government being the most reliable source of information on children's health and safety:

- Those in Quebec and the Atlantic provinces (39% for both) are more likely to strongly agree that Canadian Government is the most reliable source of information when compared to parents in BC and the Prairies (24% for both).
- Parents with a household income of less than \$40,000 (40%) are the most likely to strongly agree that the Canadian Government is the most reliable source of information – this compares to 27% for those earning \$80,000-\$99,999.
- Parents who have visited the [healthycanadians.gc.ca](http://healthycanadians.gc.ca) website (52%) are overwhelmingly more likely to view the Canadian Government as the most reliable source of information compared to those who have not visited the website (26%).

## 5. AWARENESS AND USE OF WEBSITES

### 5.1 Websites Used

Canadian parents who looked for information about child health or safety issues and used the Internet to do so (n=693) identified 32 websites or types of websites that they typically visit to find this information. The most frequent mention is a search engine, such as Google or Yahoo, at 44%; females are much more likely (51%) than males (34%) to use a search engine. **Health Canada is cited by 20% of Canadian parents surveyed.** No other site is mentioned by more than four percent of parents.

### 5.2 Awareness of Healthy Canadians Website

The survey asked parents whether they had seen, read, or heard about the Government of Canada website, [healthycanadians.gc.ca](http://healthycanadians.gc.ca). Including those who say they visited this site in response to the previous question, **we see that about one in three (31%) Canadian parents of children 16 or under is aware of the website.** There is no significant difference in the level of awareness based on the age of the parents.

### 5.3 Visiting Healthy Canadians Website

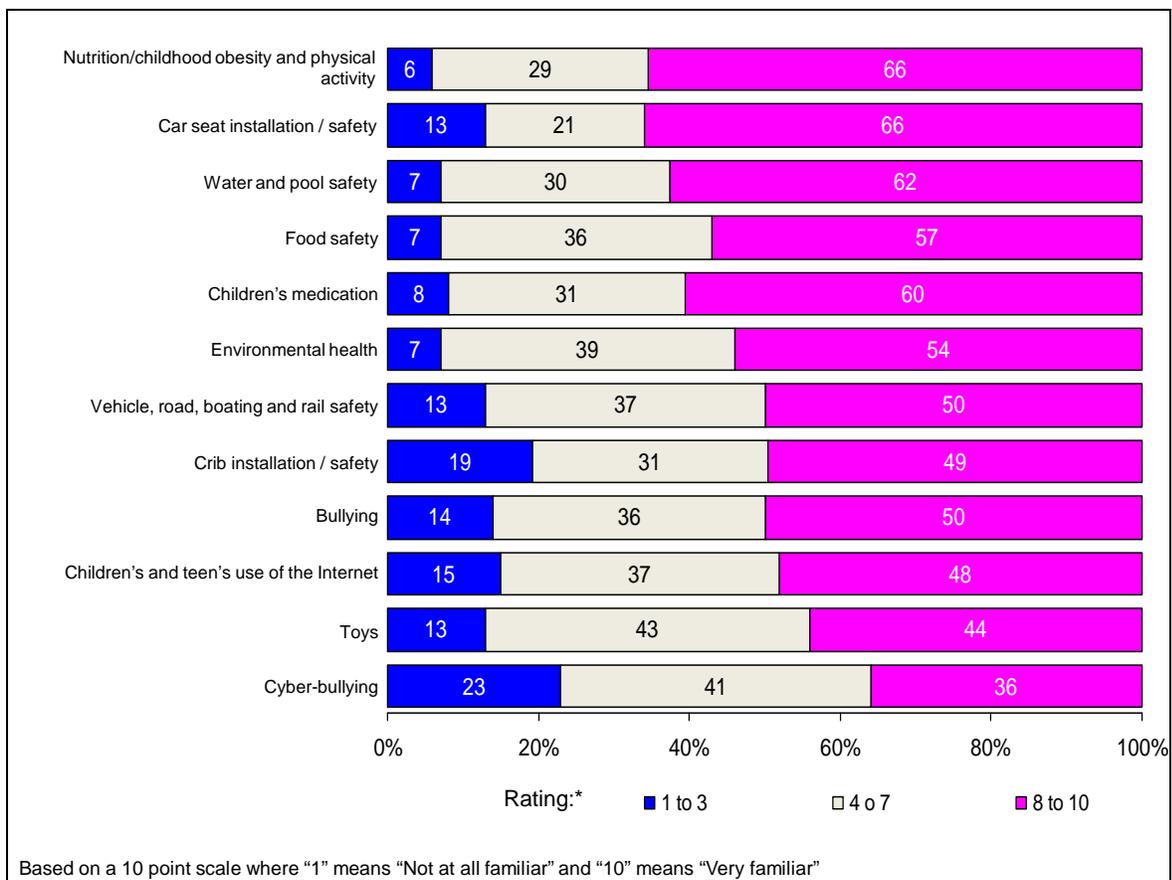
**Of the parents surveyed who have seen, read, or heard about the Government of Canada website, [healthycanadians.gc.ca](http://healthycanadians.gc.ca) (n=320), only half (54%) visited it, for a total usage incidence of 17%.** Not unexpectedly, parents who have visited the [healthycanadians.gc.ca](http://healthycanadians.gc.ca) website are also more likely to have visited the Health Canada website (30% vs. 17%).

## 6. FAMILIARITY WITH HEALTH AND SAFETY STANDARDS

Canadian parents surveyed were asked about how familiar they are with Canadian health and safety standards for children with respect to twelve different topics.

Exhibit 6-1 below provides a graphical comparison of level of familiarity with all of the health and safety standards tested. As can be seen, in general, roughly half to two-thirds of parents surveyed claimed to be very familiar<sup>7</sup> (i.e. a rating of “eight out of ten” or higher) with most of the standards tested. The proportion of parents who indicated a strong level of familiarity with standards range from a low of only 32% with respect to cyber-bullying to 66% for nutrition, obesity and physical activity, and also car seat installation/safety.

**Exhibit 6-1: Familiarity with Health and Safety Standards**



Q: How familiar would you say you are with Canadian health and safety standards for children that relate to each of the following. Base: All respondents (n=1,008)

<sup>7</sup> For interpretive purposes, a rating of “8” or higher out of 10 is interpreted as “very familiar”, a rating of “4” to “7” as “somewhat familiar” and “1” to “3” as “Not familiar”.

## **6.1 Nutrition, Obesity, and Physical Activity**

Of all the areas mentioned, standards for nutrition, obesity, and physical activity among children are the best known to Canadian parents, with two-thirds (66%) claiming to be very familiar with these standards.

The age of the child plays a factor with the parents' familiarity of the subject; the older the child the more familiar the parents are with the standards. Familiarity is lowest among parents with children less than a year old (55% very familiar). In contrast, 70% of those with children seven to 12 years old and 13 to 16 years old stated they are very familiar with standards for nutrition, obesity, and physical activity.

Finally, married and common-law parents (63%) are less likely to be very familiar with standards for nutrition, obesity, and physical activity compared to non married parents (79%).

## **6.2 Car Seats**

Two out of every three (66%) Canadian parents indicated they are very familiar with standards about the safety and installation of car seats for children.

As car seats tend to be less relevant to parents with older children, those with children 13 to 16 years old are significantly less familiar with these standards; just over half (52%) of these parents are very familiar with car seat standards compared to 86% of parents with children one to three years, 84% of parents with children four to six years and 73% of parents with children less than a year old. Given the association between the ages of children and parents, it is not surprising to find that the younger the parent the greater the likelihood they are very familiar with car seat standards (79% of parents less than 35 years, falling to 65% for parents 35-54 years old and 54% for those over 55 years of age).

## **6.3 Water and Pool Safety**

Overall, close to two thirds (62%) of parents claimed to be very familiar with standards for water and pool safety; however, some important differences exist among parents based on the age of their children and where they live. In general, parents' familiarity with water and pool safety standards rises with the age of their children. Parents with children less than one year old (51%) are the least likely to be very familiar with these standards – this compares to 63% for parents with children one to three years old, 66% for those with children aged four to six years, and 67% for parents with children seven to 12 years old. Parents 55 years or over (70%) were more likely to state that they are very familiar with pool and safety standards compared to those less than 35 years of age (56%). This finding is to be expected given that older parents tend to have older children.

Familiarity with standards for water and pool safety is notably lower in the Prairies than elsewhere in Canada. Less than half (49%) of parents in the Prairies are very familiar with water and pool safety standards compared to 62% of parents in British Columbia, 63% in the Atlantic provinces, 64% in Ontario, and 73% in Quebec.

#### **6.4 Food Safety**

Standards for the safety of children's food are among the most familiar to the Canadian parents. About six in ten parents (58%) reported that they are very familiar with food safety standards. Parents with household incomes of less than \$40,000 (67% compared to 47% for those earning \$80,000 to \$99,999) are less likely to be very familiar with food safety.

**There is strong evidence that Canadian parents surveyed from the Prairie region have less familiarity with food safety standards.** Only 46% of parents from the Prairies said they are very familiar with these standards compared to 61% of parents in British Columbia and 67% of those in Quebec.

#### **6.5 Children's Medication**

Similar to food safety, six in ten (60%) parents claimed to be very familiar with the health and safety standards for children's medication, while eight percent admitted they are not familiar with these standards. The following differences among parents with respect to the level of familiarity with children's medication standards have been observed:

- Women (65%) are more likely than men (55%) to have indicated they are very familiar with the health and safety standards of children's medication.
- Parents of children one to three years old (69%) and seven to 12 years old (67%) are more likely to be very familiar with these standards than parents of children less than one year old (54%).
- Parents residing in the Atlantic provinces (67%) are the most likely to be familiar with children's medication health and safety standards, especially in comparison to those in the Prairies (57%) and BC (56%).

#### **6.6 Environmental Health**

Canadian parents are moderately familiar with standards for environmental health, with a majority (54%) rating themselves as very familiar with these standards. There are no significant differences in the level of familiarity based on parents' income, education, gender, or other characteristics.

## **6.7 Vehicle, Road, Boating, and Rail Safety**

Half of parents (50%) are very familiar with standards regarding standards for vehicle, road, boating, and rail safety, and at the other extreme, 13% are not familiar with these standards. While the age of the children, gender or household income of the parents does not influence the degree of familiarity with vehicle, road, boating and rail safety standards, the region they reside in does. Those living in Quebec (59%) are significantly more likely to claim to be very familiar with these standards compared to those in BC (45%) and Ontario (48%). Parents 55 years or older (62%) are also more likely to be very familiar with standards regarding these standards compared to those 18-34 and 35-54 years of age (49% for both). The proportion of non married parents (58%) who are very familiar with the standards is higher than for married or common-law parents (49%).

## **6.8 Cribs**

Although less than half (49%) of parents are very familiar with standards regarding the safety and installation of cribs there is a distinct difference in the level of familiarity between parents of younger and older children. Specifically, 74% of parents with children one to three years and 68% of parents with children less than a year old claimed to be very familiar with standards for cribs compared to only 41% for parents with children 13-16 years of age. Not surprisingly, parents less than 35 years old (63%), who also tend to have younger children, are significantly more likely to be very familiar with crib safety standards (vs. 47% for parents 35-54 years old and 43% for those 55 years or over). Parents residing in Quebec (63%) are more likely than those in the Prairies (42%) and Ontario (45%) to be very familiar with crib standards.

## **6.9 Bullying**

About half of parents said they are very familiar with standards for children's health and safety related to bullying. However, the older the child the higher the likelihood that parents are very familiar with standards related to bullying. For example, familiarity is lowest among parents of children less than one year old (25%) but increases steadily by the child's age to a high of 62% among parents of children 13-16 years old. As bullying is normally more likely to take place among older children, it is not unexpected that older parents (who tend to have older children) are more likely to be very familiar with standards related to bullying; 58% of parents 55 years or older claim to be very familiar compared to only 35% of those less than 35 years of age.

About six out of ten (61%) parents residing in the Atlantic provinces indicated they are very familiar with bullying standards, which is higher than in other regions, most notably Quebec where only 45% of parents claimed to be very familiar with these standards. Finally, married and common-law parents (47%) are less likely to be very familiar with standards on bullying compared to those who are not married (64%).

## **6.10 Use of the Internet**

Less than half (48%) of all parents indicate they are very familiar with health and safety standards pertaining to use of the Internet by children and teens. As older children would be more likely to be users of the Internet it is not that surprising to find that parents with children seven to 12 years (54%) and 13-16 years (56%) are more likely than parents of children one to three years (31%) or less than one year (35%) to be very familiar with Internet safety. Younger parents, those less than 35 years (40%), are less likely to be very familiar with Internet safety compared to older parents (49% for parents 35-54 years and 57% for parents 55 years or older).

## **6.11 Toys**

Relative to the other areas tested, familiarity with the health and safety standards for toys is low with less than half of all parents (44%) claiming to be very familiar with the associated standards. The following differences among parents exist with respect to the level of familiarity related to health and safety standards for toys:

- Women are more likely (48%) than men (38%) to be very familiar with toy standards.
- A higher proportion of parents in Quebec (57%) claim to be very familiar with toy health and safety standards compared to those in the Prairies (36%) and Ontario (40%).
- In general, and not surprisingly, parents of younger children are more likely to be very familiar with the standards for toys than parents of older children. For example, 53% of parents with children one to three years old claim to be very familiar with these standards – this falls to only 38% of parents with children 13-16 years of age.
- Parents in the less than \$40,000 (50%) and \$40,000 to \$79,999 (50%) income brackets are more likely to be very familiar with toy health and safety standards than those with incomes \$100,000 or more (34%).

## **6.12 Cyber-Bullying**

Cyber-bullying is clearly the area that parents are least familiar with in terms of safety standards, as demonstrated by the fact that just over one in three (36%) believe they are very familiar with these standards. Cyber-bullying seems of greater concern to parents of older children, as their children are more likely to be using the Internet more frequently. Of parents with children 13 to 16 years old, 43% indicate they are very familiar with cyber bullying safety standards compared with only 22% for parents with children one to three years old and 26% for those with children less than one year old.



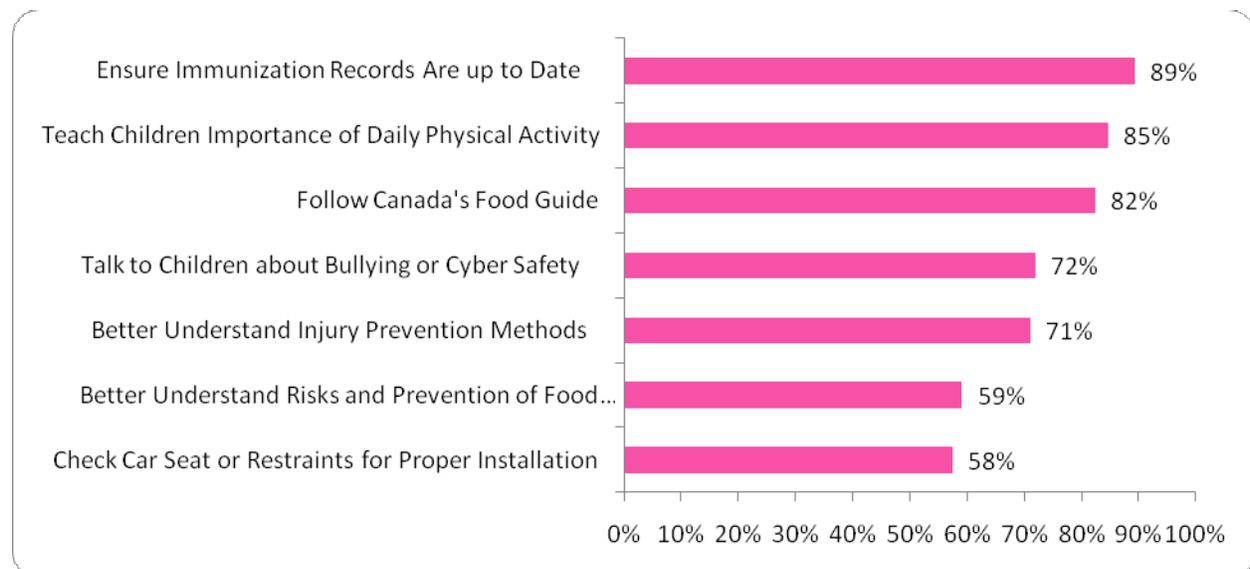
## 7. BEHAVIOUR CHANGE

All parents were asked whether, in the past twelve months, they made any changes in their usual behaviour or actions in an attempt to further protect the health and safety of their children. **Over half (55%) said they did.** This is particularly the case with younger parents, as 62% of those less than 35 years of age say they did, compared to 54% of those 35-54 years and 56% for those 55 years or older.

### 7.1 Parents who made behavioural changes in the past 12 months

The parents who made changes to their behaviour were then asked if they had made changes related to seven specific issues regarding child health and safety in the past twelve months. As Exhibit 7-1 shows, a majority of these parents indicated they undertook all of these actions. Ensuring their children's immunization records are up to date (89%) was the activity that these parents were most likely to have completed. Parents of younger children, i.e. those aged one to three years (97%) and those less than one year (95%), are more likely to have updated their children's immunization records compared to those with children 13-16 year old (85%).

**Exhibit 7-1 Percentage claiming to undertake activities, among those who indicated they changed their behaviour in past 12 months**



Q. I am going to read you a list of actions related to children's health and safety. In the past 12 months, which of the following have you personally undertaken?

Base: Respondents who had changed usual behaviour or actions (n=563)

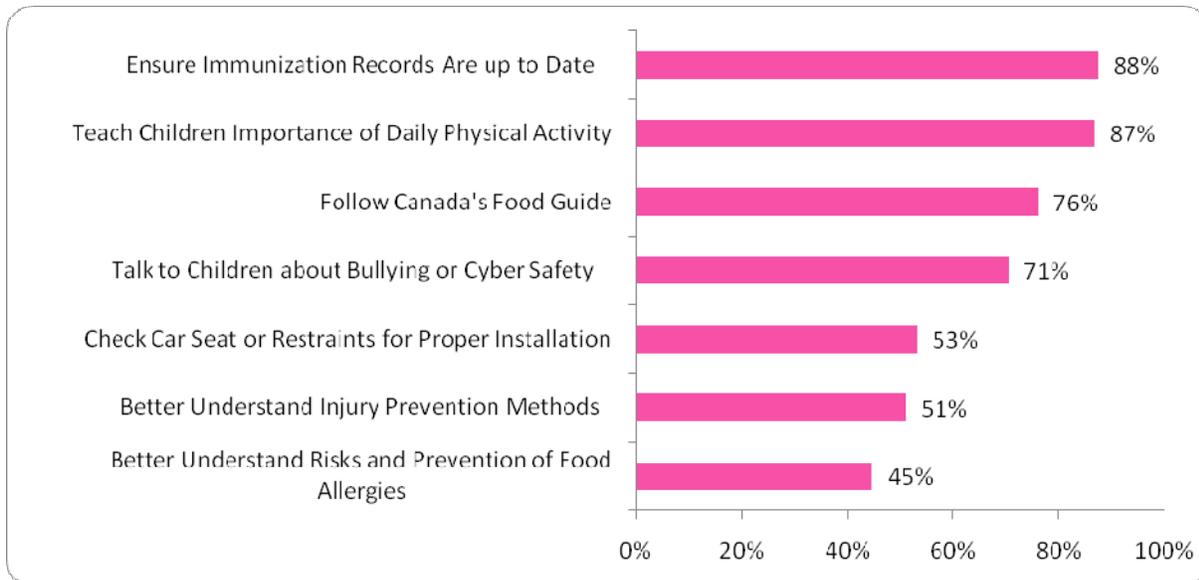
The incidence of parents undertaking some of the other activities is also directly related to the age of their children. For example, virtually all parents of children less than one year (97%) and one to three years (97%) checked car seat restraints for proper

installation compared to only 28% of parents of 13-16 year old children. Conversely, parents of 13-16 year old children (94%) and seven to 12 year old children (91%) were much more likely to talk to their children about bullying or cyber-bullying relative to those with younger children. Finally, a higher proportion of parents with children 13-16 years (93%) and seven to 12 years (95%) have taught their children about the importance of physical activity in comparison to parents of young children (e.g. 47% for parents of children less than one year of age).

## 7.2 Parents who did not make behavioural changes in the past 12 months

About 43% of parents said they did not make any changes to their behaviour in the past 12 months. These parents were provided with a list of seven specific actions and asked if they recalled undertaking any of them. As Exhibit 7-2 shows, when prompted, most of the parents who said they did not make any changes to their behaviours in the past 12 months recall that they, in fact, were already undertaking these activities.

**Exhibit 7-2 Percentage claiming to undertake activities, for those who did not change their behaviour in past 12 months**



Here is a list of some typical actions that parents may take to protect the health and safety of their children, do you recall doing any of these in the past 12 months?

Base: Respondents who had not changed usual behaviour or actions (n=443)

The two activities that parents were most likely to have undertaken in the past 12 months were teaching their children about the importance of daily physical activity (87%) and ensuring that immunization records are up to date (88%). Parents of older children were the most likely to focus on the importance of daily physical activity (i.e. 96% of parents with 13-

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16 year old children, 85% of parents with children four to six years old and 88% of those with children seven to 13 years).

Less than half of the parents (45%) tried to gain a better understanding of the risks on how to prevent food allergies; however, parents of children less than a year old (67%) were much more likely to have undertaken this activity compared to parents of older children (e.g. a low of 40% for parents of children seven to twelve years to 41% for parents of children 13-16 years).



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## 8. CONCLUSIONS AND IMPLICATIONS

### 8.1 Responses Depend on Age

One finding permeates the analyses of the several aspects of children's health and safety covered by the survey. Respondents' awareness, attitudes, and behaviour vary considerably depending on the age of their children. Parents generally pay less attention to health and safety issues that pertain mainly to children outside the age-range of their own children.

The following section summarizes the key findings of this study by the age of the respondents' children.

#### **Parents with children less than one year old ...**

- are the most likely to feel the information they find meets most of their needs (74%),
- demonstrate the lowest familiarity with standards for nutrition, obesity, and physical activity (55% very familiar),
- are the least likely to be very familiar with standards for water and pool safety (51%),
- are least familiar with Canadian health and safety standards regarding bullying (25%), and
- were much more likely to have tried to gain a better understanding of the risks on how to prevent food allergies compared to parents of older children (81%).

In addition, virtually all parents of children less than one year have updated their children's immunization records (95%) and checked car seat restraints for proper installation (97%).

#### **Parents with children one to three years old ...**

- are most likely to have actively searched and researched information on children's health and safety, with more than eight in ten (85%) looking for health information, 76% for safety information, and 70% for both,
- are the most likely to be very familiar with children's medication standards (69%), and
- are the least likely to be very familiar with Canadian health and safety standards related to Internet safety (31%) and cyber-bullying (22%).

Also, virtually all parents of children one to three years have updated their children's immunization records (97%) and checked car seat restraints for proper installation (97%).

### **Parents with children four to six years old ...**

- are among the most likely to strongly agree that the Canadian Government is the most reliable source for children's health and safety information (38%),
- are among the most likely to be familiar with car seat standards (84%), and
- are among the least likely to be familiar with standards for cyber-bullying (27%).

### **Parents with children seven to 12 years old ...**

- are among the most likely to strongly agree that the Canadian Government is the most reliable source of information on children's health and safety (37%),
- are among the most familiar with water and pool safety standards (67%),
- are the most likely to be very familiar with children's medication standards (67%),
- are the most likely to be very familiar with standards pertaining to use of the Internet (54%),
- were among the most likely to talk to their children about bullying or cyber-bullying (91%), and
- are among the most likely to have taught their children about the importance of physical activity (95%).

### **Parents with children 13 to 16 years old ...**

- are least likely to claim they have looked for information: 68% looked for health information, 55% for safety information, and 47% both,
- are the least likely to regularly search for information (19% strongly agree),
- are the least likely to strongly agree that the Canadian Government is the most reliable source for information on children's health and safety (29%),
- are among the most familiarity with standards for nutrition, obesity, and physical activity (70% very familiar),
- are significantly less familiar with standards for car seats than parents with younger children (52%),
- are among the lowest level of familiarity with medication standards for children (60%),
- are the most likely to be familiar with standards pertaining to use of the Internet by children and teens (56%),
- demonstrate the lowest familiarity with the health and safety standards for toys (38%),
- are the most likely to be familiar with both bullying (62%) and cyber bullying (43%) safety standards. These parents were also the most likely to talk to their children about bullying or cyber-bullying (94%),
- are least likely to have kept immunization records updated (85%), and are more likely than parents of younger children to have taught their children about the importance of physical activity (93%).

## 8.2 Most Parents Seek Information

Only one in five Canadian parents surveyed did **not** look for information concerning either health or safety of their children. **The greatest effort to find information occurs among parents of young children that are between one to three years old.** Parents with more education and higher income are more likely to seek information, as are women. Conversely, lower income parents, and men, appear to be less likely to undertake this activity.

Most people seek medical information and look for information fairly infrequently, once every two to three months or less often. The Internet is by far the most popular source consulted. Overall, three in five Canadian parents say the information they find meets most of their needs. This figure is close to three in four among Canadian parents with children under a year old, but declines among families with older children, to fewer than three in five for those with children over seven years old. However, there is also a significant minority, which is considerably higher among lower income parents, who depend on non-Internet information sources, primarily physicians and their clinics.

People who did not look for information indicate they do not know what they would look for in future, or would not look at all. The survey did not directly address reasons for not looking for such information, but answers to several questions about their attitudes and behaviour with respect to health and safety information shed some light on this issue.

**Implications:** In designing and developing communications strategy, there is a clear segmentation between younger and older parents. The issues of concern are different, and their tendency to seek out information is different. Therefore they may respond to different messaging.

While the media strategy should obviously focus on on-line channels, a secondary media approach will be necessary, particularly to reach lower income parents. In many instances lower income parents' level of familiarity with many of the children's health and safety issues raised in this survey is lower than average – meaning they may require greater education in the information. Physicians' offices and clinics represent an important media vehicle in this regard.

## 8.3 Most Parents Seem Confident

Canadian parents agree quite strongly that they know where to find information on how to protect the health and safety of their children and are aware of the health and safety risks in their children's environment. They tend not to have strong opinions about whether the Canadian government is the most reliable source of information on children's health and safety, nor does the number of sources of such information make them feel uncertain about which sources are reliable.

Parents tend not to search regularly to keep abreast of the latest information. They are slightly more likely to wait until they hear of a particular issue before researching it, but are far more likely to wait until they have a specific need, such as their child being ill, before they take action. They also indicate strongly that, once they find the information they are looking for, they usually make active use of it.

#### **8.4 Parents Prefer Search Engines to Specific Sites**

Just under half of the Canadian parents who used the Internet to look for information used a search engine such as Google or Yahoo, with only one in five reporting that they use Health Canada's website. Only one in three Canadian parents surveyed was aware of the Healthy Canadians website and, of those who have seen, read, or heard about it, only half visited it.

#### **8.5 Familiarity with Standards Varies**

Familiarity with standards pertaining to various areas of children's health and safety is generally not very high and varies by type. Listed from most familiar to least familiar, the areas are:

- Nutrition, childhood obesity, and physical activity.
- Car seat installation and safety.
- Water and pool safety.
- Children's medication.
- Food safety.
- Environmental health.
- Vehicle, road, boating, and rail safety.
- Bullying.
- Crib installation and safety.
- Children's and teens' use of the Internet.
- Toys.
- Cyber-bullying.

These levels of familiarity vary considerably within each subject area, based on other factors, most notably the ages of the children in the home.

#### **8.6 Behaviour with Respect to Health and Safety**

A majority of parents (either through their own recollection or when prompted) claimed to have undertaken within the past 12 months the seven activities tested that relate

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to children's health and safety. Ensuring immunization records are up to date represents the activity parents are most likely to have undertaken, followed by stressing the importance of physical activity, and eating well (i.e. following Canada's Food Guide). Many of the activities are age specific in that the likelihood of undertaking them depends on how old the children are.

**Appendix 1 – Questionnaire**

**Children's Health and Safety Baseline Survey**

Good evening, my name is \_\_\_\_\_ and I am calling from TNS Canadian Facts, a market research company. We are calling on behalf of Health Canada, which is conducting research with Canadians on the topic of health and safety. Please be assured that we are not trying to sell you anything. Your responses to questions will only be reported in aggregate form, and this information will be protected under the provisions of the Privacy Act. This survey is registered with the National Survey Registration System.

QS1: S,

QT

Are you or is any member of your household employed by or work in any of the following:

READ LIST.

AL

Market research

Marketing or public relations

Health Canada

INSTRUCTION:

IF YES TO ANY OF THE ABOVE - THANK AND  
TERMINATE

QS2: S,

QT

Are you, or is anyone in your household the parent or  
guardian of children in any of the following age groups  
living in your household?

IF SOMEONE ELSE ASK TO SPEAK TO THAT PERSON  
AND RE-READ INTRO.

READ LIST. SELECT ALL THAT APPLY.

AL

Under 1 year

1 - 3 years

4 - 6 years

7 - 12 years

13 - 16 years

(DO NOT READ) 17 YEARS OR OLDER

(DO NOT READ) NO CHILDREN AT HOME

(DO NOT READ) REFUSE

INSTRUCTION:

IF "17 YEARS OR OLDER", "NO CHILDREN AT HOME"  
OR "REFUSED" THANK AND TERMINATE. OTHERS,  
CONTINUE.

QS3: S, Now I would like to ask you some questions about children's  
health and safety.

QT Have you ever looked for information about...?

READ LIST.

AL Yes

No

(DO NOT READ) DON'T KNOW

a) Health issues related to your children

b) Safety issues related to your children

INSTRUCTION:

IF BOTH S3a) AND S3b) = 2 (NO) GO TO Q6

Q1: S,

QT

What types of children's health and safety information have you looked for in the past?

DO NOT READ LIST. SELECT ALL THAT APPLY.

AL

PHYSICAL ACTIVITY

CHILDHOOD OBESITY

HEALTHY EATING

IMMUNIZATION

HEALTHY PREGNANCY

SAFE SLEEP

BULLYING

EMERGENCY PREPAREDNESS

FOOD SAFETY

INJURY PREVENTION

TOYS

CAR SEATS/RESTRAINTS

RAIL AND BOATING SAFETY

MEDICAL INFORMATION (E.G. FLU, FEVER, ETC)

FOOD ALLERGIES

CYBER SAFETY

OTHER (SPECIFY): \_\_\_\_\_

DON'T KNOW

Q2: S,

QT

On average, how often would you say you typically look for information on any topic related to children's health and safety?

READ LIST. SELECT ONE ONLY.

AL

More than once a week

About once a week

About once every 2 weeks

About once every 3-4 weeks

About once a month

About once every 2-3 months

Less than once every 3 months

(DO NOT READ) AD-HOC (BASED ON A SPECIFIC NEED)

(DO NOT READ) NEVER

(DO NOT READ) DON'T KNOW

Q3: S,

QT

What sources do you currently use to find information about children's health and safety?

DO NOT READ LIST. RECORD ALL THAT APPLY.  
PROBE...ANY OTHERS?

AL

MAGAZINES

THE INTERNET

NEWSPAPERS

TELEVISION PROGRAMS

RADIO

DOCTOR/PHYSICIAN

PHARMACIST

HEALTH CANADA

OTHER GOVERNMENT (CITY, MUNICIPAL, PROVINCIAL)

BOOKS

COMMUNITY CENTRE

FRIENDS OR RELATIVES

OTHER (SPECIFY): \_\_\_\_\_

DON'T KNOW

INSTRUCTION:

IF "DON'T KNOW" AT Q3 SKIP TO Q5. OTHERS,  
CONTINUE.

INSTRUCTION:

ASK Q4 IF MORE THAN ONE RESPONSE PROVIDED IN Q3 ELSE SKIP TO Q5. ONLY RESPONSES PROVIDED IN Q3 TO APPEAR IN LIST FOR Q4.

UNDERLINE "most often" IN Q4 QT.

Q4: S,

QT

Which source would you say you turn to most often when you are looking for information about children's health and safety?

READ LIST. SELECT ONE ONLY.

AL

Magazines

The Internet

Newspapers

Television programs

Radio

Doctor/physician

Pharmacist

Health Canada

Other government (city, municipal, provincial)

Books

Community centre

Friends or relatives

Other

Q5: S,

QT

In general, how well does the information you find on children's health and safety meet your needs?

AL

Does not meet my needs at all

Meets some of my needs

Meets most of my needs

Meets all of my needs

(DO NOT READ) IT DEPENDS ON WHAT I'M LOOKING FOR

(DO NOT READ) DON'T KNOW

INSTRUCTION:

ASK Q6 AND Q7 ONLY IF S3a) AND S3b) = NO 'ALL OTHERS GO TO Q8

Q6: S,

QT

What types of children's health and safety information do you think you would look for in the future?

DO NOT READ LIST. SELECT ALL THAT APPLY.

AL

- PHYSICAL ACTIVITY
- CHILDHOOD OBESITY
- HEALTHY EATING
- IMMUNIZATION
- HEALTHY PREGNANCY
- SAFE SLEEP
- BULLYING
- EMERGENCY PREPAREDNESS
- FOOD SAFETY
- INJURY PREVENTION
- TOYS
- CAR SEATS/RESTRAINTS
- RAIL AND BOATING SAFETY
- MEDICAL INFORMATION (E.G. FLU, FEVER, ETC)
- FOOD ALLERGIES
- CYBER SAFETY
- OTHER (SPECIFY): \_\_\_\_\_
- DON'T KNOW

Q7: S,

QT

What sources would you use to find information about children's health and safety?

DO NOT READ LIST. RECORD ALL THAT APPLY.  
PROBE...ANY OTHERS?

AL

MAGAZINES

THE INTERNET

NEWSPAPERS

TELEVISION PROGRAMS

RADIO

DOCTOR/PHYSICIAN

PHARMACIST

HEALTH CANADA

OTHER GOVERNMENT (CITY, MUNICIPAL, PROVINCIAL)

BOOKS

COMMUNITY CENTRE

FRIENDS OR RELATIVES

OTHER (SPECIFY): \_\_\_\_\_

DON'T KNOW

SPLIT SAMPLE, HALF OF RESPONDENTS ANSWER  
ITEMS 1-4 AND OTHER HALF ANSWER ITEMS 5-8

INSTRUCTION:

ROTATE Q9MT.

Q8 REMOVED

Q9: S,

QT

I am now going to read you a few statements about children's health and safety. Based on a 10 point scale where "1" means you "Strongly Disagree" and "10" means you "Strongly Agree", please tell me how much you agree or disagree with each statement.

READ STATEMENT, THEN SCALE.

AL

1 = Strongly Disagree

2

3

4

5

6

7

8

9

10 = Strongly Agree

(DO NOT READ) DON'T KNOW

I know where to find information on how to protect the health and safety of my child

I am aware of the health and safety risks in my child's environment

The Canadian Government is the most reliable source of information on children's health and safety

There are so many different sources of information on children's health and safety that I don't know which ones are reliable

I regularly search for information about children's health and safety to keep abreast of the latest information

I usually wait until I hear of a children's health and safety issue (from family, friends, media) before I search for information on that topic

I typically only look for children's health and safety information when I have a specific need such as my child being ill

Once I have found the information on children's health and safety that I am looking for I usually make active use of it

**INSTRUCTION:**

**IF S3a) AND S3B) = 2 (NO), SKIP Q12. ASK Q12 ONLY IF Q3 = THE INTERNET.**

**Q10 AND Q11 REMOVED**

Q12: S,

QT What websites do you visit to find information about children's health and safety?

DO NOT READ LIST. RECORD ALL THAT APPLY.

AL

HEALTH CANADA

HEALTHYCANADIANS.GC.CA

PUBLIC HEALTH AGENCY OF CANADA

MEDBROADCAST.COM

MAYOCLINIC.COM

NEW ENGLAND JOURNAL OF MEDICINE

CANADIAN HEALTH NETWORK

WEBMD

WIKIPEDIA

EMEDICINEHEALTH.COM

MEDICINENET.COM

LOCAL MUNICIPAL GOVERNMENT

SEARCH ENGINE (E.G. GOOGLE, YAHOO, ETC.)

SMARTRISK.CA

PREVENTABLE.CA

CARINGFORKIDS.CPS.CA

PARENTSFORHEALTH.CA

BABYCENTER.CA

OTHER (SPECIFY): \_\_\_\_\_

DON'T KNOW

INSTRUCTION:

SKIP Q13 IF Q11 = 2 OR Q12=2  
(healthycanadians.gc.ca).

UNDERLINE "healthycanadians.gc.ca" IN Q13 QT.

Q13: S,

QT

Have you ever seen, read or heard about the Government  
of Canada website, healthycanadians.gc.ca?

AL

YES

NO

DON'T REMEMBER

INSTRUCTION:

SKIP Q14 IF Q13=NO OR DON'T KNOW.

UNDERLINE "healthycanadians.gc.ca" IN Q14 QT.

Q14: S,

QT Have you ever visited the Government of Canada website, [healthycanadians.gc.ca](http://healthycanadians.gc.ca), to look for information about children's health and safety?

AL YES

NO

DON'T REMEMBER

INSTRUCTION:

ROTATE Q15MT.

Q15: S,

QT On a scale from 1 to 10, where 1 means "Not at all familiar" and 10 means "Very familiar", how familiar would you say you are with Canadian health and safety standards for children that relate to each of the following.

READ ITEMS, THEN SCALE.

AL 1 = Not At All Familiar

2

3

4

5

6

7

8

9

10 = Very Familiar

Toys

Children's medication

Car seats installation / safety

Crib installation / safety

Cyber-Bullying (i.e. intimidation via email, instant messaging, chat rooms, etc)

Bullying

Food safety

Children's and teen's use of the Internet

Nutrition / Childhood obesity and physical activity

Vehicle, road, boating and rail safety

Water and pool safety

Environmental health (i.e. dangers in the home and environment including environmental contaminants, exposure to UV rays, etc.)

Q16: S,

QT

Have you, within the past 12 months, made any changes in your usual behaviour or actions in an attempt to further protect the health and safety of your children?

AL

YES

NO

IF NO AT Q16 SKIP TO Q18

INSTRUCTION:

ROTATE Q17MT.

UNDERLINE "in the past 12 months" IN Q17 QT.

Q17: S,

QT

I am going to read you a list of actions related to children's health and safety? In the past 12 months, which of the following have you ever personally undertaken? If the action mentioned is not applicable to your children due to their age, please let me know.

READ LIST. SELECT ALL THAT APPLY

AL

YES

NO

NOT APPLICABLE

Teach your child(ren) the importance of daily physical activity

Ensure that your child(ren)'s immunization record is up to date

Gain a better understanding of the risks on how to prevent food allergies

Follow the recommendation of Canada's Food Guide about nutrition and healthy eating

Gain a better understanding of injury prevention methods

Check your child(ren)s car seat or restraints to ensure they are properly installed

Talk to your children about bullying or cyber safety

INSTRUCTION:

SKIP Q18 IF Q16 = YES

ROTATE Q18MT. UNDERLINE "past 12 months" IN Q18 QT.

Q18: S,

QT

Here is a list of some typical actions that parents may take to protect the health and safety of their children, do you recall doing any of these in the past 12 months? READ LIST. SELECT ALL THAT APPLY

READ LIST. SELECT ALL THAT APPLY.

AL

YES

NO

Teach your child(ren) the importance of daily physical activity

Ensure that your child(ren)'s immunization record is up to date

Gain a better understanding of the risks on how to prevent food allergies

Follow the recommendation of Canada's Food Guide about nutrition and healthy eating

Gain a better understanding of injury prevention methods

Check your child(rens) car seat or restraints to ensure they are properly installed

Talk to your children about bullying or cyber safety

Demographics

To conclude the survey, I would like to obtain some information from you to classify our results. Please rest assured your responses will remain confidential at all times and will never be reported on an individual basis.

Q19: S,  
QT

In which of the following age groups do you fall?

READ LIST.

AL

Less than 18 years

18-24 years

25-34 years

35-44 years

45-54 years

55-64 years

65 years or more

(DO NOT READ) REFUSED

Q20: S,  
QT

What is your marital status?

READ LIST. SELECT ONE ONLY.

AL

Married

Common law

Single

Divorced

Widowed

(DO NOT READ) OTHER

(DO NOT READ) REFUSED

Q21: S,

QT

Which of the following diplomas or degrees have you completed?

READ LIST.

AL

High School diploma or equivalent

Registered Apprenticeship or other trades certificate or diploma

College, CEGEP or other non-university certificate or diploma

University degree, certificate or diploma

None of the above

(DO NOT READ) REFUSED

Q22: S,

QT

Which of the following categories best describes your total household income? That is, the total income of all persons in your household combined, before taxes?

READ LIST.

AL

Under \$20,000

\$20,000 to just under \$ 40,000

\$40,000 to just under \$ 60,000

\$60,000 to just under \$ 80,000

\$80,000 to just under \$100,000

\$100,000 to just under \$150,000

\$150,000 and above

Q23: S,

QT

Which of the following categories best describes your current employment status? Are you...

READ LIST. SELECT ONE ONLY.

AL

Working full-time, that is, 35 or more hours per week

Working part-time, that is, less than 35 hours per week

Self-employed

Unemployed, but looking for work

A student attending school full-time

Retired

Not in the workforce (e.g. FULL-TIME HOMEMAKER,  
UNEMPLOYED, NOT WORKING FOR WORK)

(DO NOT READ) OTHER

(DO NOT READ) REFUSED

Q24: S,

QT

What language do you speak at home most often?

DO NOT READ LIST. SELECT ONE ONLY.

AL

ENGLISH

FRENCH

CHINESE

CANTONESE

PANJABI (PUNJABI)

SPANISH

ITALIAN

ARABIC

MANDARIN

GERMAN

TAGALOG (PILIPINO, FILIPINO)

VIETNAMESE

Q25: S,

QT RECORD GENDER:

AL MALE

FEMALE

Q26: S,

QT RECORD REGION:

AL BC

PRAIRIES

ONTARIO

QUEBEC

ATLANTIC

Thank you for taking the time to complete this important survey.

## Sondage de base sur la santé et la sécurité des enfants

Bonsoir. Mon nom est \_\_\_\_\_ et je vous appelle de TNS Canadian Facts, une compagnie d'études de marché. Nous vous appelons de la part de Santé Canada, qui effectue une recherche auprès des Canadiens et Canadiennes sur la santé et la sécurité des enfants.

QS0: S,  
QT

Puis-je parler à un parent ou à une personne qui a la charge d'un enfant de 16 ans ou moins?

AL

Oui

Pas d'enfant dans le ménage

AUTRES RÉSULTATS D'APPEL

INSTRUCTION: THANK AND TERMINATE (DISQUALIFY) IF NO CHILDREN IN HOUSEHOLD.

### REFAITES L'INTRODUCTION AU BESOIN

Le sondage prendra environ 10 minutes de votre temps. Vos réponses aux questions ne seront rapportées qu'une fois regroupées et cette information sera protégée conformément à la Loi sur la protection des renseignements personnels. Soyez assuré(e) que nous n'essayons pas de vous vendre quoi que ce soit. Ce sondage est enregistré auprès du système national d'enregistrement des sondages.

QS1: S,  
QT

Est-ce que vous-même, ou un membre de votre ménage, travaillez dans l'un des domaines suivants :

LISEZ LA LISTE.

AL

Les études de marché

Le marketing ou les relations publiques

Santé Canada

INSTRUCTION:  
IF YES TO ANY OF THE ABOVE - REMERCIEZ ET TERMINEZ

QS2: S,  
QT

Avez-vous des enfants dans les groupes d'âge suivants  
qui habitent dans votre ménage?

LISEZ LA LISTE. SÉLECTIONNEZ TOUT CE QUI  
S'APPLIQUE.

AL

Moins de 1 an

1 à 3 ans

4 à 6 ans

7 à 12 ans

13 à 16 ans

(NE LISEZ PAS) 17 ANS OU PLUS

(NE LISEZ PAS) AUCUN ENFANT À LA MAISON

(NE LISEZ PAS) REFUSE

INSTRUCTION:  
IF "17 YEARS OR OLDER", "NO CHILDREN AT HOME" OR  
"REFUSED" THANK AND TERMINATE. OTHERS, CONTINUE.

QS3: S,  
QT

Avez-vous déjà cherché de l'information sur des...?

LISEZ LA LISTE.

AL

Oui

Non

(NE LISEZ PAS) NE SAIT PAS

- a) Questions de santé se rapportant à vos enfants
- b) Questions de sécurité se rapportant à vos enfants

INSTRUCTION:  
IF BOTH S3a) AND S3b) = 2 (NO) GO TO Q6

Q1: S,  
QT

Quels types de renseignements avez-vous déjà cherchés au sujet de la santé et la sécurité des enfants?

NE LISEZ PAS LA LISTE. SÉLECTIONNEZ TOUT CE QUI S'APPLIQUE.

AL

ACTIVITÉ PHYSIQUE  
OBÉSITÉ CHEZ LES ENFANTS  
ALIMENTATION SAINÉ  
IMMUNISATION  
GROSSESSE EN SANTÉ  
HABITUDES SÉCURITAIRES LORS DU SOMMEIL DE JEUNES ENFANTS  
INTIMIDATION À L'ÉCOLE  
DEGRÉ DE PRÉPARATION EN CAS D'URGENCE  
SALUBRITÉ DES ALIMENTS  
PRÉVENTION DES BLESSURES  
JOUETS  
SIÈGES/DISPOSITIFS DE PROTECTION POUR AUTOS  
SÉCURITÉ FERROVIAIRE ET MARITIME  
INFORMATION MÉDICALE (EX. GRIPPE, FIÈVRE, ETC.)  
ALLERGIES ALIMENTAIRES  
CYBERSÉCURITÉ  
AUTRE (PRÉCISEZ) : \_\_\_\_\_  
NE SAIT PAS

Q2: S,  
QT

En moyenne, à quelle fréquence diriez-vous que vous cherchez habituellement de l'information sur un sujet concernant la santé et la sécurité des enfants?

LISEZ LA LISTE. SÉLECTIONNEZ UNE SEULE RÉPONSE.

AL

Plus d'une fois par semaine  
Environ une fois par semaine  
Environ une fois toutes les 2 semaines  
Environ une fois toutes les 3 ou 4 semaines

Environ une fois par mois  
Environ une fois tous les 2 ou 3 mois  
Moins d'une fois tous les 3 mois  
(NE LISEZ PAS) AD HOC (FONDÉ SUR UN BESOIN SPÉCIFIQUE)  
(NE LISEZ PAS) JAMAIS  
(NE LISEZ PAS) NE SAIT PAS

Q3: S,  
QT

Quelles sources utilisez-vous actuellement pour trouver de l'information sur la santé et la sécurité des enfants?

NE LISEZ PAS LA LISTE. INSCRIVEZ TOUT CE QUI S'APPLIQUE. SONDEZ...Y EN A-T-IL D'AUTRES?

AL

MAGAZINES  
INTERNET  
JOURNAUX  
ÉMISSIONS DE TÉLÉVISION  
RADIO  
MÉDECIN  
PHARMACIEN  
SANTÉ CANADA  
AUTRE SOURCE DU GOUVERNEMENT (MUNICIPAL, PROVINCIAL)  
LIVRES  
CENTRE COMMUNAUTAIRE  
PARENTS OU AMIS  
AUTRE (PRÉCISEZ) :  
\_\_\_\_\_  
NE SAIT PAS

INSTRUCTION:  
IF "DON'T KNOW" AT Q3 SKIP TO Q5. OTHERS, CONTINUE.

INSTRUCTION:

ASK Q4 IF MORE THAN ONE RESPONSE PROVIDED IN Q3  
ELSE SKIP TO Q5. ONLY RESPONSES PROVIDED IN Q3 TO  
APPEAR IN LIST FOR Q4.

UNDERLINE « le plus souvent » IN Q4 QT.

Q4: S,  
QT

Vers quelle source vous tournez-vous le plus souvent  
lorsque vous cherchez de l'information sur la santé et la sécurité  
des enfants?

LISEZ LA LISTE. SÉLECTIONNEZ UNE SEULE  
RÉPONSE.

AL

Des magazines  
Internet  
Des journaux  
Des émissions de télévision  
La radio  
Un médecin  
Un pharmacien  
Santé Canada  
Une autre source du gouvernement (municipal, provincial)  
Des livres  
Un centre communautaire  
Des parents ou amis  
Une autre source

Q5: S,  
QT

En général, dans quelle mesure l'information que vous  
cherchez sur la santé et la sécurité des enfants répond-elle à  
vos besoins?

AL

Ne répond pas du tout à mes besoins  
Répond à certains de mes besoins  
Répond à la plupart de mes besoins  
Répond à tous mes besoins  
(NE LISEZ PAS) CELA DÉPEND DE CE QUE JE  
CHERCHE

(NE LISEZ PAS) NE SAIT PAS

INSTRUCTION:

ASK Q6 AND Q7 ONLY IF S3a) AND S3b) = NO 'ALL OTHERS  
GO TO Q8

Q6: S,  
QT

Quels types d'information concernant la santé et la  
sécurité des enfants pensez-vous que vous seriez susceptible  
de chercher à l'avenir?

NE LISEZ PAS LA LISTE. SÉLECTIONNEZ TOUT CE  
QUI S'APPLIQUE.

AL

ACTIVITÉ PHYSIQUE  
OBÉSITÉ CHEZ LES ENFANTS  
ALIMENTATION SAINÉ  
IMMUNISATION  
GROSSESSE EN SANTÉ  
HABITUDES SÉCURITAIRES LORS DU SOMMEIL DE  
JEUNES ENFANTS  
INTIMIDATION À L'ÉCOLE  
DEGRÉ DE PRÉPARATION EN CAS D'URGENCE  
SALUBRITÉ DES ALIMENTS  
PRÉVENTION DES BLESSURES  
JOUETS  
SIÈGES/DISPOSITIFS DE PROTECTION POUR AUTOS  
SÉCURITÉ FERROVIAIRE ET MARITIME  
INFORMATION MÉDICALE (EX. GRIPPE, FIÈVRE, ETC.)  
ALLERGIES ALIMENTAIRES  
CYBERSÉCURITÉ  
AUTRE (PRÉCISEZ) : \_\_\_\_\_  
NE SAIT PAS

Q7: S,

QT Quelles sources d'information utiliseriez-vous pour trouver de l'information sur la santé et la sécurité des enfants?

NE LISEZ PAS LA LISTE. INSCRIVEZ TOUT CE QUI S'APPLIQUE. SONDEZ...Y EN A-T-IL D'AUTRES?

AL

MAGAZINES  
INTERNET  
JOURNAUX  
ÉMISSIONS DE TÉLÉVISION  
RADIO  
MÉDECIN  
PHARMACIEN  
SANTÉ CANADA  
AUTRE SOURCE DU GOUVERNEMENT (MUNICIPAL,  
PROVINCIAL)  
LIVRES  
CENTRE COMMUNAUTAIRE  
PARENTS OU AMIS  
AUTRE (PRÉCISEZ) :  
\_\_\_\_\_  
NE SAIT PAS

SPLIT SAMPLE, HALF OF RESPONDENTS ANSWER ITEMS 1-4 AND OTHER HALF ANSWER ITEMS 5-8

INSTRUCTION:  
ROTATE Q9MT.

Q9: S,  
QT

Je vais maintenant vous lire quelques énoncés qui portent sur la santé et la sécurité des enfants. À l'aide d'une échelle de 10 points, où « 1 » signifie que vous êtes « Fortement en désaccord » et « 10 » signifie que vous êtes « Fortement d'accord », veuillez me dire dans quelle mesure vous êtes d'accord ou en désaccord avec chacun des énoncés suivants.

LISEZ L'ÉNONCÉ, ENSUITE L'ÉCHELLE.

AL

1 = Fortement en désaccord  
2

3  
4  
5  
6  
7  
8  
9

10 = Fortement d'accord

(NE LISEZ PAS) NE SAIT PAS

Je sais où trouver de l'information sur la façon de protéger la santé et la sécurité de mon enfant

Je suis conscient(e) des risques de santé et de sécurité dans l'environnement de mon enfant

Le gouvernement canadien est la source d'information la plus fiable en matière de santé et de sécurité des enfants

Il y a tellement de sources d'information différentes concernant la santé et la sécurité des enfants que je ne sais pas lesquelles sont fiables

Je cherche régulièrement de l'information sur la santé et la sécurité des enfants afin de me tenir à jour des dernières informations

J'attends habituellement d'entendre parler d'une question de santé et de sécurité qui se rapporte aux enfants (de la part de parents, d'amis, des médias) avant de chercher de l'information sur ce sujet

Je cherche habituellement de l'information sur la santé et la sécurité des enfants uniquement lorsque j'ai un besoin spécifique, par exemple si mon enfant est malade

Une fois que j'ai trouvé l'information sur la santé et la sécurité des enfants que je cherche, je la mets habituellement en pratique

INSTRUCTION:

IF S3a) AND S3B) = 2 (NO), SKIP Q12. ASK Q12 ONLY IF Q3 = THE INTERNET.

Q12: S,

QT                    Quels sont les sites Web que vous visitez pour obtenir de l'information sur la santé et la sécurité des enfants?

NE LISEZ PAS LA LISTE. INSCRIVEZ TOUT CE QUI S'APPLIQUE.

AL

SANTÉ CANADA  
CANADIENSESANTÉ.GC.CA  
AGENCE DE LA SANTÉ PUBLIQUE DU CANADA  
MEDBROADCAST.COM  
MAYOCLINIC.COM  
NEW ENGLAND JOURNAL OF MEDICINE  
LE RÉSEAU CANADIEN POUR LA SANTÉ  
WEBMD  
WIKIPEDIA  
EMEDICINEHEALTH.COM  
MEDICINENET.COM  
GOUVERNEMENT MUNICIPAL LOCAL  
MOTEUR DE RECHERCHE (EX. GOOGLE, YAHOO,  
ETC.)  
SMARTRISK.CA  
PREVENTABLE.CA  
CARINGFORKIDS.CPS.CA  
PARENTSFORHEALTH.CA  
BABYCENTER.CA  
AUTRE (PRÉCISEZ) : \_\_\_\_\_  
NE SAIT PAS

INSTRUCTION:

SKIP Q13 IF Q11 = 2 OR Q12=2 (canadiensensante.gc.ca).

UNDERLINE « canadiensensante.gc.ca » IN Q13 QT.

Q13: S,

QT

Avez-vous déjà vu, lu ou entendu parler du site Web du gouvernement du Canada nommé canadiensensante.gc.ca?

AL

OUI  
NON

NE SE SOUVIENT PAS

INSTRUCTION:  
SKIP Q14 IF Q13=NO OR DON'T KNOW.

UNDERLINE « canadiensante.gc.ca » IN Q14 QT.

Q14: S,  
QT

Avez-vous déjà visité le site Web,  
canadiensante.gc.ca, du gouvernement du Canada, pour  
obtenir de l'information sur la santé et la sécurité des enfants?

AL

OUI

NON

NE SE SOUVIENT PAS

INSTRUCTION:  
ROTATE Q15MT.

Q15: S,  
QT

Sur une échelle de 1 à 10, où 1 signifie «Ne me sont pas  
du tout familières » et 10 signifie « Me sont très familières »,  
dans quelle mesure diriez-vous que chacune de ces normes  
canadiennes de santé et de sécurité en ce qui a trait aux enfants  
vous sont familières?

LISEZ LES ÉNONCÉS, ENSUITE L'ÉCHELLE.

AL

1 = Ne me sont pas du tout familières

2

3

4

5

6

7

8

9

10 = Me sont très familières

Les jouets  
Les médicaments pour enfants  
L'installation/la sécurité des sièges d'auto  
L'installation/la sécurité des lits d'enfants  
La cyberintimidation (c.-à-d. l'intimidation via les courriels, messages instantanés, salons de clavardage, etc.)  
L'intimidation à l'école  
La salubrité des aliments  
L'utilisation d'Internet par les enfants et adolescents  
La nutrition/L'obésité et l'activité physique chez les enfants  
La sécurité des véhicules automobiles, sécurité routière, ferroviaire et maritime  
La sécurité aquatique et la sécurité dans les piscines  
La santé environnementale (c.-à-d. les dangers dans la maison et l'environnement, y compris les contaminants environnementaux, l'exposition aux rayons UV, etc.)

Q16: S,  
QT

Au cours des 12 derniers mois, avez-vous apporté des changements à votre comportement ou à vos actions habituels afin de mieux protéger la santé et la sécurité de vos enfants?

AL

OUI  
NON

IF NO AT Q16 SKIP TO Q18

INSTRUCTION:  
ROTATE Q17MT.

UNDERLINE "Au cours des 12 derniers mois" IN Q17 QT.

Q17: S,

QT Je vais vous lire une liste d'actions qui se rapportent à la santé et à la sécurité des enfants. Au cours des 12 derniers mois, lesquelles des actions suivantes vous est-il arrivé d'entreprendre personnellement ? Si l'action mentionnée ne s'applique pas à vos enfants à cause de leur âge, veuillez me le faire savoir.

LISEZ LA LISTE. SÉLECTIONNEZ TOUT CE QUI S'APPLIQUE.

AL OUI  
NON  
NE S'APPLIQUE PAS

Avez montré à votre ou vos enfants l'importance de faire de l'activité physique tous les jours  
Vous êtes assuré(e) que le carnet d'immunisation de votre ou vos enfants était à jour  
Êtes mieux informé(e) des risques que comportent les allergies alimentaires et comment les prévenir  
Suivez les recommandations contenues dans le Guide alimentaire canadien sur la nutrition et une alimentation saine  
Êtes mieux informé(e) des méthodes de prévention des blessures  
Avez vérifié le siège d'auto ou les dispositifs de protection pour autos de votre ou de vos enfants afin de vous assurer qu'ils avaient été correctement installés  
Avez parlé à votre ou vos enfants d'intimidation ou de cybersécurité

INSTRUCTION:

SKIP Q18 IF Q16 = YES

ONLY 'YES' RESPONSES TO Q17 WILL BE ASKED IN Q18.  
IF ALL RESPONSES IN Q17 = 'NO', SKIP TO Q19.

ROTATE Q18MT. UNDERLINE "12 derniers mois" IN Q18 QT.

Q18: S,

QT Voici une liste d'actions types que les parents peuvent entreprendre pour protéger la santé et la sécurité de leurs enfants. Vous souvenez-vous d'avoir fait l'une des choses suivantes au cours des 12 derniers mois?

LISEZ LA LISTE. SÉLECTIONNEZ TOUT CE QUI S'APPLIQUE.

AL OUI  
NON

Avez montré à votre ou vos enfants l'importance de faire de l'activité physique tous les jours  
Vous êtes assuré(e) que le carnet d'immunisation de votre ou vos enfants était à jour  
Êtes mieux informé(e) des risques que comportent les allergies alimentaires et comment les prévenir  
Suivez les recommandations contenues dans le Guide alimentaire canadien sur la nutrition et une alimentation saine  
Êtes mieux informé(e) des méthodes de prévention des blessures  
Avez vérifié le siège d'auto ou les dispositifs de protection pour autos de votre ou de vos enfants afin de vous assurer qu'ils avaient été correctement installés  
Avez parlé à votre ou vos enfants d'intimidation ou de cybersécurité

Démographiques

Avant de mettre fin au sondage, j'aimerais obtenir certaines informations qui nous aideront à classifier nos résultats. Soyez assuré(e) que vos réponses demeureront confidentielles en tout temps et qu'elles ne seront jamais rapportées individuellement.

Q19: S,

QT Dans lequel des groupes d'âge suivants vous situez-vous?

LISEZ LA LISTE.

AL Moins de 18 ans

18 à 24 ans  
25 à 34 ans  
35 à 44 ans  
45 à 54 ans  
55 à 64 ans  
65 ans ou plus  
(NE LISEZ PAS) REFUSE

Q20: S,  
QT

Quel est votre état matrimonial?

LISEZ LA LISTE. SÉLECTIONNEZ UNE SEULE RÉPONSE.

AL

Marié(e)  
En union de fait  
Célibataire  
Divorcé(e)  
Veuf/veuve  
(NE LISEZ PAS) AUTRE  
(NE LISEZ PAS) REFUSE

Q21: S,  
QT

Lesquels des diplômes ou certificats suivants avez-vous obtenus?

LISEZ LA LISTE.

AL

Diplôme d'études secondaires ou l'équivalent  
Apprentissage enregistré ou autre certificat ou diplôme lié à un métier  
Cégep, collège ou autre certificat ou diplôme non universitaire  
Certificat ou diplôme universitaire  
Aucune de ces réponses  
(NE LISEZ PAS) REFUSE

Q22: S,

QT Laquelle des catégories suivantes décrit le mieux le revenu total de votre ménage, c'est-à-dire le revenu combiné de toutes les personnes de votre ménage, avant impôts?

LISEZ LA LISTE.

AL Moins de 20 000 \$  
20 000 \$ à moins de 40 000 \$  
40 000 \$ à moins de 60 000 \$  
60 000 \$ à moins de 80 000 \$  
80 000 \$ à moins de 100 000 \$  
100 000 \$ à moins de 150 000 \$  
150 000 \$ et plus

Q23: S,  
QT

Laquelle des catégories suivantes décrit le mieux votre situation d'emploi actuelle? Est-ce que vous...?

LISEZ LA LISTE. SÉLECTIONNEZ UNE SEULE RÉPONSE.

AL Travaillez à temps plein, c'est-à-dire 35 heures par semaine ou plus  
Travaillez à temps partiel, c'est-à-dire moins de 35 heures par semaine  
Travaillez à votre propre compte  
N'avez pas d'emploi mais cherchez du travail  
Êtes aux études à temps plein  
Êtes retraité(e)  
N'êtes pas sur le marché du travail (ex. PERSONNE À LA MAISON À TEMPS PLEIN, SANS EMPLOI, SANS EMPLOI RÉMUNÉRÉ)  
(NE LISEZ PAS) AUTRE  
(NE LISEZ PAS) REFUSE

Q24: S,  
QT

Quelle langue parlez-vous le plus souvent à la maison?

NE LISEZ PAS LA LISTE. SÉLECTIONNEZ UNE SEULE RÉPONSE.

AL	ANGLAIS FRANÇAIS CHINOIS CANTONNAIS PUNJABI ESPAGNOL ITALIEN ARABE MANDARIN ALLEMAND TAGALOG (DES PHILIPPINES) VIETNAMIEN
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Q25: S, QT	INSCRIVEZ LE SEXE :
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AL	MASCULIN FÉMININ
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Q26: S, QT	INSCRIVEZ LA RÉGION :
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AL	LA COLOMBIE-BRITANNIQUE LES PRAIRIES L'ONTARIO LE QUÉBEC LES PROVINCES ATLANTIQUES
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Merci d'avoir pris le temps de répondre à cet important sondage.