

Original Research

## Investigation of Child Development Students' Awareness of Home Accidents and Safety Precautions for 0–6-Year-Old Children: A Qualitative Research

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### Abstract

**Objectives:** The aim of this study was to examine the awareness of undergraduate Child Development students regarding home accidents that children aged 0-6 may experience, as well as the safety measures that can be taken to prevent them.

**Materials and Methods:** A qualitative descriptive research design was employed, with a sample of 33 undergraduate students selected through criterion sampling. The data were collected through semi-structured interviews and analyzed thematically using qualitative data analysis software.

**Results:** In this study, five main themes were identified as Risk Perception, Interventions and Precautions, Level of Knowledge, Training and Awareness Needs, Experience and Observation. Additionally, seven sub-themes related to main themes and, 30 codes were determined. The findings indicate that participants' awareness of home accidents is mainly influenced by their perception of risk and preventive actions. In contrast their awareness about personal experiences or the need for training is limited.

**Conclusion:** Literature suggests that increasing the awareness of Child Development undergraduate students about preventable home accidents can contribute to strengthening protective and preventive approaches to children's safety. Accordingly, it is recommended to implement initiatives to raise awareness about home accidents, develop targeted educational programs for parents, and integrate curriculum-based courses for university students on home accidents and preventive strategies.

**Keywords:** home accidents, safety precautions, awareness, child development students, 0-6 years old children

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## **Introduction**

The World Health Organization (WHO, 2008) defines accidents as incidents that occur suddenly, unexpectedly, against human will and cause physical and mental damage. An average of 830,000 children dies every year due to preventable accidents. Especially home accidents, which are frequently encountered in childhood, are largely preventable and are an important health problem for young children (Bryant et al., 2023). Home accidents such as falls, poisoning, foreign body aspiration are often cause serious injuries and even deaths (Alves et al., 2020; Alves et al., 2024; Al Rumhi et al., 2020). Considering the ongoing physical and cognitive development process, their inability to anticipate situations that may pose an accident, and their tendency to learn through exploration and curiosity children are at high risk of home accidents (Demirköse et al., 2021). Research indicates that many factors such as socioeconomic status, gender and age of the child can affect the frequency and severity of home accidents (Osborne et al., 2016; Ribeiro et al., 2019). Among these factors the child's age has the biggest impact on frequency and severity of home accidents in children. Accordingly, children under the age of 4 are more exposed to home accidents (Maaloul et al., 2019), and 41.3% of children aged 0-6 are exposed to home accidents (Yılmaz Kurt et al., 2022).

In the prevention of home accidents, taking safety measures at home appears helpful (Buowari & Ikpa, 2023; Erdem, 2020). In fact, 90% of injuries caused by accidents are predictable and providing training to parents, especially mothers who play a key role in childcare, has a great impact on preventing such injuries (Fathi et al., 2016). However, usually families are not sufficient in determining the risk factors for accidents and do not receive any training on this issue (Akın et al., 2020; Kayıran et al., 2022). Therefore, it is important for professionals to raise awareness and inform families about home accidents. Among these professionals, Child Development Specialists can raise awareness about home accidents. Child development specialists receive theoretical and practical training on cognitive, language, social-emotional, physical and self-care development (Bağcı & Aslan Bağcı, 2018; Bölükbaş, et al., 2010). Considering their competencies in preparing and implementing developmental assessment, follow-up and support programs, for children and their families, child development specialists not only have an opportunity to get to know the child and family but also the child's living space which is important to determine home accidents. Therefore, as healthcare professionals, Child development specialists, can contribute to child safety programs by collaborating with local governments and non-governmental organizations to reduce home accidents at the social level. They can also play a role in raising awareness about risky situations

and ways of prevention (McDonald et al., 2018; Woods, 2006). Previous studies have examined parents' particularly mothers' perceptions, attitudes, knowledge, and characteristics regarding home accidents during early childhood (Aral et al., 2020; Bayram et al., 2019; Üçüncü et al., 2019; Üstoğlu et al., 2018). In addition, research has explored the effectiveness of parent-focused programs in preventing home accidents (Aysu et al., 2023; Abbassinia et al., 2019; Mytton et al., 2014). However, to our knowledge, there are no studies that specifically examine this topic among students enrolled in child development programs.

The aim of the current study is to explore the awareness of undergraduate Child Development students regarding home accidents that may affect children aged 0–6 and the safety measures that can be taken to prevent them. Although not all interview questions in this study were directly structured around the Health Belief Model (HBM), the model, along with findings from previous research, was used as a conceptual framework in the formulation of certain questions through a deductive approach. Previous studies align with key constructs of the HBM (Ritchie et al., 2021), which emphasizes that individuals' health-related behaviors are influenced by their perceived susceptibility to a risk, the perceived severity of its consequences, perceived benefits of taking preventive action, and perceived barriers to doing so. In this context, parental awareness and preventive behaviors can be interpreted through the lens of the HBM, as parents' decisions to implement safety measures at home are likely shaped by their beliefs about the risks and outcomes associated with home accidents. Integrating these findings with the HBM provides a theoretical framework for understanding how educational and awareness-raising interventions may influence behavior and reduce preventable injuries at home.

Developed by Rosenstock (1974) to explain how individuals perceive health risks and engage in preventive behaviors, HBM has been used as a resource to investigate the awareness of undergraduate students regarding home accidents and safety measures for children aged 0-6 years. The model's core structures, such as perceived susceptibility, perceived severity, perceived benefits, and cues to action, provided a theoretical background for understanding how students assess risks and make decisions regarding child safety in the home environment. Although the study did not aim to directly test the HBM, the application of this model offers a relevant perspective for interpreting students' attitudes and preventive tendencies. The first version of the HBM includes four basic components to explain individuals' health-related behaviors: Perceived susceptibility, perceived seriousness, perceived benefits and perceived barriers (Croyle et al., 2005). The model was then extended with additional components such as cues to action and self-efficacy (Glanz et al., 2008). This model helps us to understand

students' levels of awareness as well as the potential for awareness to translate into behavior.

It is important for undergraduate Child Development students, who will play an active role in children's education and safety in the future, to develop awareness of preventable risks such as home accidents. Assessing their level of awareness regarding home accidents and safety measures can provide valuable guidance for restructuring educational curricula, designing preventive education programs, and informing government and private agencies to raise awareness. To our knowledge, there is no other study focusing on awareness of child development undergraduate students on home accidents up to this date. Thus, this study, have a great potential to highlight an important gap in the literature. In this regard, participants' awareness of home accidents was evaluated in the light of the following questions:

- What are the participants' views on common areas, causes, and risk factors of home accidents?
- How do participants perceive risky age groups, activities, and first intervention methods for home accidents?
- What is the participants' awareness of preventive measures and necessary physical arrangements for home accidents?
- How knowledgeable are the participants about toy selection, relevant institutions, and resources for preventing home accidents?

### **Materials and Methods**

This study employs a qualitative descriptive approach to examine the awareness of Child Development students regarding home accidents and safety measures for children aged 0–6 years. This model is a quite practical and functional approach that allows researchers to seek answers about specific events or experiences, in comparison to other qualitative research designs (Turale, 2020). Furthermore, when reporting the study, we adhered to the Standards for Reporting Qualitative Research (SRQR) proposed by O'Brien et al. (2014).

#### **Study Group**

The participants included in the study group were determined by the criterion sampling method, which is one of the non-random sampling methods. The criteria of the participants being a student in the department of Child Development and studying in formal education were taken into consideration. According to Büyüköztürk et al. (2015), criterion sampling method is defined as sampling units that meet the criteria determined for the sample. The study group was determined as 33 participants based on voluntary participation from 1st, 2nd, 3rd and 4th grade

students studying in the Child Development program in the 2023-2024 academic year. 10 students aged 19 and under, 7 students aged 20, 8 students aged 21, and 8 students aged 22 and over participated in the study. According to the grade level, 7 were in the first, 11 in the second, 9 in the third, and 6 in the fourth grade. Although the grade levels were taken into consideration to ensure the homogeneity of the group, there were difficulties to include senior students due to conflict with their internship schedule. Also, participation to the study was lower compared to other grades since it was based on a voluntary participation. In addition, although there is no clear approach for determining the sample size in qualitative research, while determining the number of participants in the study, the diversity of the information obtained in the interviews was taken into account. As Morgan (2022) mentions, the search for documents was terminated when it was understood that analyzing more data would not help to develop a new theme. In other words, the interviews were terminated when repetition began to occur in the statements regarding the questions asked about home accidents and when sufficient saturation was reached in the data obtained. Participants stated that they did not receive any training on first aid or home accidents. Only 5 students had read publications on this subject. When asked about home accidents in childhood, 28 students stated that they had such an experience (Appendix 1).

### **Data Collection Tool**

A semi-structured interview form prepared by the researchers and sample items are presented in Appendix 2 was used as a data collection tool. The form mainly was prepared by benefiting from the HBM, which is considered in the theoretical basis of the study. Also, the variables addressed in similar studies on home accidents in the literature was used as a guide to prepare the interview form (e.g. Al Mushaikh et al., 2022; Morrongiello et al., 2021). The questions in the interview form were elaborated accordingly and the form was harmonized with both the theoretical framework and empirical findings in the literature. After the form was prepared, expert opinions were taken from two lecturers working in the Department of Child Development to test whether it was suitable in terms of comprehensibility and applicability., Some of the questions were eliminated and the interview form was revised after taking expert opinions. The revised form for content validity was applied to two participants as a pilot interview and the form was given its final form by making linguistic and semantic corrections in accordance with the notes and suggestions received during the interview. The final version of the form consists of two parts. In the first part, there are questions to determine the participants' age, grade level, whether they have received training on home accidents before, whether they have read publications on home accidents, and whether they had an accident in

their childhood. In the second part of the form, there are 11 questions about the home accidents that children aged 0-6 may encounter and the safety measures that can be taken against these accidents.

### **Data Collection and Analysis Process**

Ethics committee approval was obtained from Toros University Scientific Research and Publication Ethics Committee with Meeting Date: 26.01.2024 and Decision No: 12. To ensure validity and reliability in the study, face-to-face interviews were conducted by three researchers between February and April 2024 with different participants at the appropriate time and place. Detailed information was given to the participants before the interviews and their consent was obtained. After this consent, the interviews were audio-recorded. Each interview lasted an average of 15 minutes and audio-records were supported by notes kept by the researchers. In accordance with the principle of reflexivity, the researchers maintain objectivity by being aware of their own prejudices throughout the process and pay strict attention to not to ask leading questions. After the interviews, a peer debriefing process was conducted between the three researchers in the research team to increase the validity of the themes obtained and the consistency of the interpretations. Finally, the views of each researcher on the analysis findings were mutually discussed and finalized by consensus.

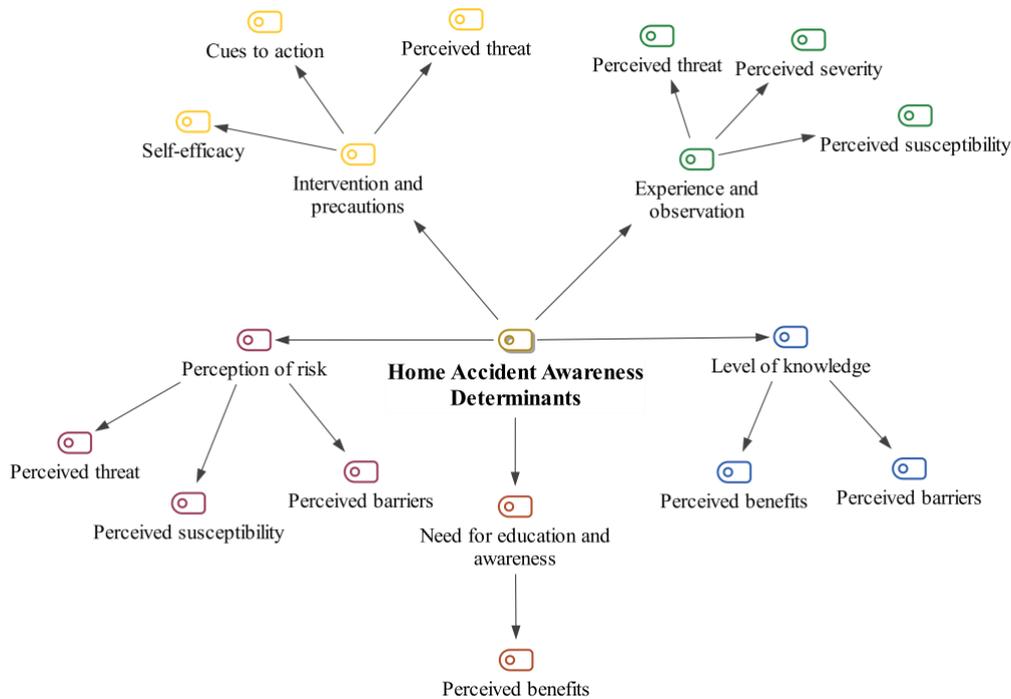
As a first stage, the voice recordings were transcribed into the table prepared in Microsoft Word program for each participant. The research data were analyzed in line with Braun and Clarke's (2006) thematic analysis approach by using MAXQDA qualitative data analysis software. In our study, a deductive approach was used in the development of themes, guided by both the theoretical framework and findings from previous research. HBM provided a conceptual foundation, but interview questions were prepared in a semi-structured format to allow for flexibility in participants' responses. Additionally, the themes were shaped by synthesizing the fundamental structures of the previous literature and model with the participants' responses. This approach made it possible to investigate participants' awareness and perceptions without being strictly bound to a single theoretical model. The aim was to preserve the depth and richness of the qualitative data. In the first stage, the interviews were transcribed and transferred to MAXQDA. To increase familiarity with the data, three researchers independently read the texts twice and recorded their preliminary impressions in writing. In the second stage, a comprehensive code system was created in MAXQDA by using predetermined themes in accordance with the theoretical framework and open codes obtained from the literature. The theme of *risk perception* includes whether participants perceive the

severity and consequences of accidents as threatening (*perceived threat*), the likelihood of encountering these risks (*perceived susceptibility*), and the difficulties and limitations encountered in reducing risks (*perceived barriers*). Intervention and precaution include the participants' perception of risks as threats that would lead to the need to take precautions (*perceived threat*), their views on internal and external stimuli for taking safety precautions (*cues to action*) and their views on their confidence in taking precautions (*self-efficacy*). In the knowledge level theme, the usefulness of a measure to prevent home accidents (*perceived benefit*) and the difficulty that an individual may experience in applying and understanding the measures (*perceived barriers*) are evaluated. The theme of the need for training and awareness represents the participants' views on the effectiveness of training and awareness activities (*perceived benefit*).

The data were coded independently by the first researcher in line with these codes, and then the codes were discussed with the second and third authors. In the third stage, the similarities among the codes were combined and potential theme groups were structured by associating them with existing themes. The “Code System” feature of MAXQDA was actively used at this stage. In the fourth stage, the validity of the codes across the entire data set was checked. The reflection of the themes on the data set was analyzed using MAXQDA's Code Matrix Browser and Retrieved Segments tools. At this stage, the “*Experience and observation*” theme, which was intensely present in the data but was not initially included, was added to the data set. In the fifth stage, after each theme and sub-theme was identified, the codes belonging to these themes and sub-themes were systematically generated and these structures were visualized using the MAXMaps feature in the “Visual Tools” tab of MAXQDA. The codes were structured based on a hierarchical code-subcode model and the related sub-themes and codes under the themes were reflected in the model. In the sixth stage, relationships were established with the research questions corresponding to each code model; explanations were elaborated by analyzing which questions overlapped with which themes and sub-themes. In this way, both the integrity of the thematic structure was preserved, and the clarity of the data having met the research questions secured. Accordingly, there was agreement in 702 coding and disagreement in 3 coding. Using the formula “Reliability = ((Agreement) / (Agreement + Disagreement)) × 100” suggested by Miles and Huberman (1994), reliability was calculated as 99.57%.

## Results

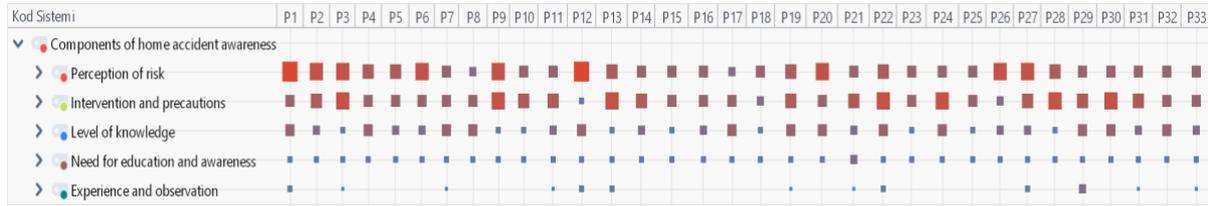
In this section, the findings obtained based on the participants' views on home accidents are presented with quotations. The data reflecting the awareness of the participants overlap with various sub-themes representing the basic building blocks of the model. The findings related to each theme are presented below together with the relevant sub-themes and participant statements.



**Figure 1.** Thematic Model of Participants' Views on Their Awareness of Home Accidents

Figure 1 presents the five main themes of 'risk perception', 'level of knowledge', 'interventions and precautions', 'training and awareness needs' and 'experience and observation', and seven sub-themes related to the main themes. Some sub-themes are related to more than one main theme and are therefore addressed again in different contexts. This was specifically chosen to reflect the multidimensional nature of the participants' statements and the interconnectivity between the themes. Under the main theme of Intervention and Precautions, participants expressed their opinions the measures that could be taken, placing particular emphasis on the threats they perceived. Likewise, within the theme of Experience and Observation, participants highlighted perceived threats while recounting various situations and events drawn from their personal experiences and observations. This emphasis revealed a coherent and meaningful sub-theme of perceived threats within both main themes. In addition,

the code matrix browser view of the themes related to the participants' awareness of home accidents is given in Figure 2.

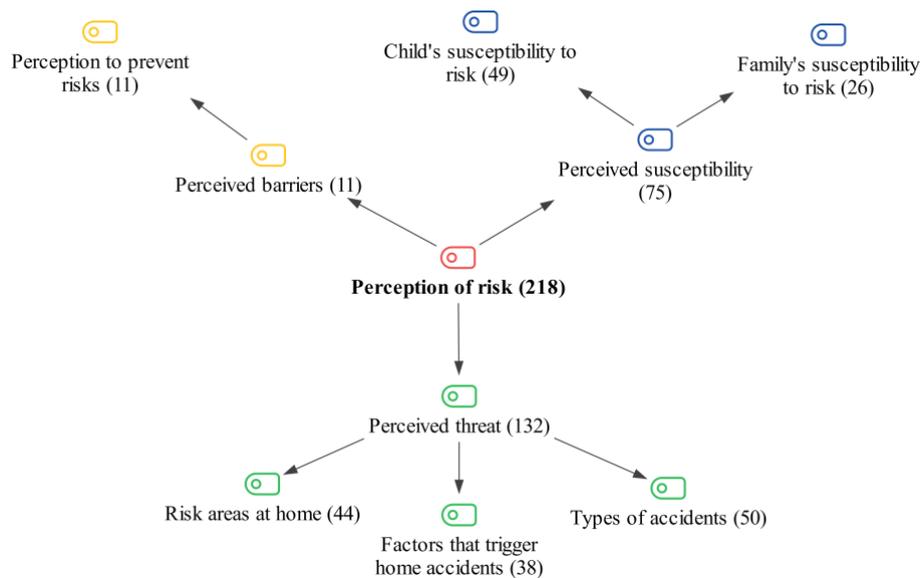


**Figure 2.** Code Matrix Browser View of the Themes Related to Awareness of Home Accidents

According to the data obtained from the code matrix browser shown in Figure 2, the theme of “Risk Perception” was heavily emphasized by all participants and was the most frequently coded theme. While the themes of “Interventions and Precautions” and “Level of Knowledge” were also commonly mentioned, the themes of “Need for Training and Awareness” and especially “Experience and Observation” were mentioned by a limited number of participants. This suggests that participants' awareness of home accidents is shaped more on risk perception and preventive behavior, but less on individual experiences or the need for training.

### Risk Perception

This theme, which expresses participants' perceptions of risks related to home accidents, consists of three sub-themes and six codes under them.



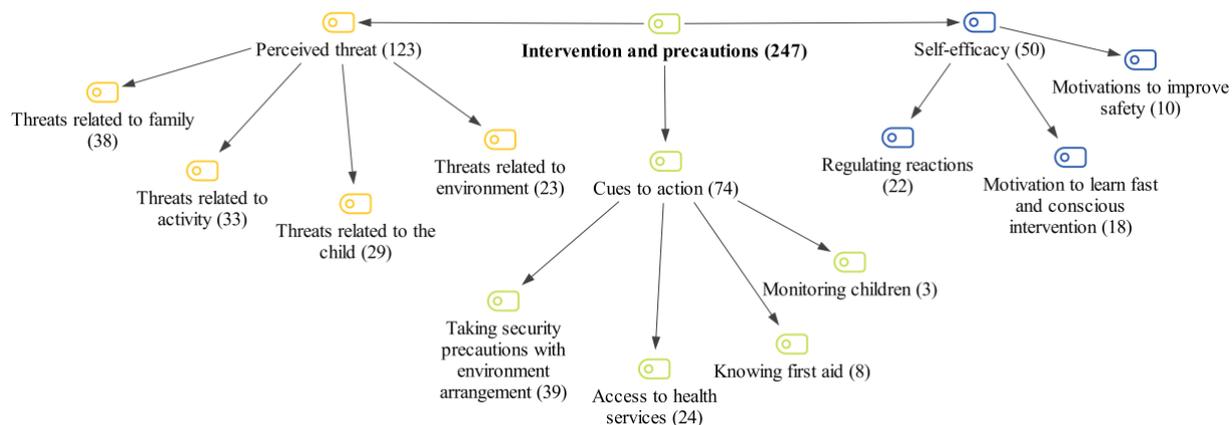
**Figure 3.** Codes Obtained Based on the Theme of Risk Perception and Sub-Themes

This model was created in accordance with the answers given to the interview questions to understand participants' views on the most common types of home accidents, parts of the house that home accidents take place, risk factors for home accidents, age groups at risk and possible reasons for certain age groups to get affected more from home accidents. As shown in Figure 3, when the participant views were analyzed thematically, three sub-themes were identified under the main theme of 'Risk Perception': Perceived threat, perceived susceptibility and perceived barriers. The codes identified were derived directly from participant statements and grouped according to thematic analysis. Under the perceived threat sub-theme, according to the participant views, the perception of threat regarding the types of home accidents, the areas where accidents occur, and the triggering factors are revealed. While most of the participants mentioned accidents such as falls (n=26), burns (n=26), poisoning (n=14) and cuts (n=13), they stated that these accidents usually occurred in the kitchen (n=27), living room (n=9), sitting room where family members often spend time (n=6) and bathroom (n=5). Risks related to the developmental characteristics of the child (n=29), attitudes or negligence of the family (n= 38) and inadequate environmental regulation (n=23) stand out as triggering factors in the realization of home accidents. Under the sub-theme of perceived susceptibility, participants' responses revealed their sensitivity to the vulnerability of children (n= 49) and family members (n= 26) to risks, and under the sub-theme of perceived barriers, participants' inhibiting or supportive beliefs about preventing home accidents were identified (n= 11). Participant 27 gave the following opinion on which part of the house home accidents occur more frequently and the risk factors:

P27: *“It can happen in the kitchen and study rooms. For example, you couldn't see a big wardrobe in a child's room, but in a study room, whether it is a bookshelf, the things on the table, or simply the handle of the kettle in the kitchen, these are risky. The child himself/herself is a factor, but the parent can prevent these.”*

### **Intervention and Precautions**

The “Intervention and Precautions” theme, which expresses participants' perceptions of interventions and precautions related to home accidents, consists of three sub-themes and 11 codes under them.



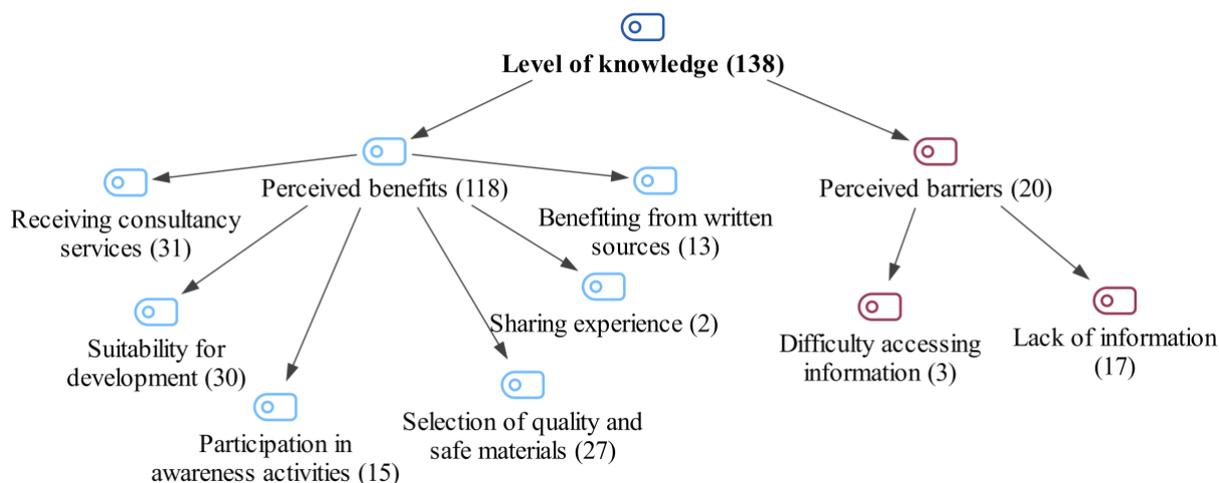
**Figure 4.** Codes Related to the Interventions and Precautions Theme and Subthemes

This model was created in accordance with the answers given to the questions asked to understand the participants' views on the causes of home accidents, risky activities in terms of having a home accident, the first interventions of family members in case of a home accident, and the measures to be taken and the arrangements to be made. As presented in Figure 4, when the participant views were analyzed thematically, three sub-themes identified under the main theme of 'Interventions and Precautions' were: perceived threat, cues to action and self-efficacy. The threats that the participants were aware of related to activity (n=33), family (n= 38), child (n=29) and environment (n=23) regarding home accidents were evaluated within the scope of perceived threat. The responses of monitoring children (n= 3), taking safety precautions with landscaping (n=39), knowing first aid (n=8) and applying to health services (n= 24) were considered in the context of clues to take action, and finally, learning fast and conscious intervention methods (n= 18), motivations to increase safety (n= 10) and regulation reactions (n=22) were the codes evaluated under the self-efficacy sub-theme. Participant 3 expressed the following opinion about the measures and arrangements that can be made to reduce home accidents:

P3: "Softeners can be used to prevent the child from bumping into tables and their edges. When boiling something hot, the child can be kept away from the kitchen. Because something may splash. Meanwhile, the father can take care of the child. Or other caregivers in the home can take care of the child. The mother can be in the kitchen while the child is sleeping. Measures can be taken according to the child."

### **Level of Knowledge**

This theme, which expresses participants' level of knowledge about home accidents, consists of two sub-themes and eight codes under them.



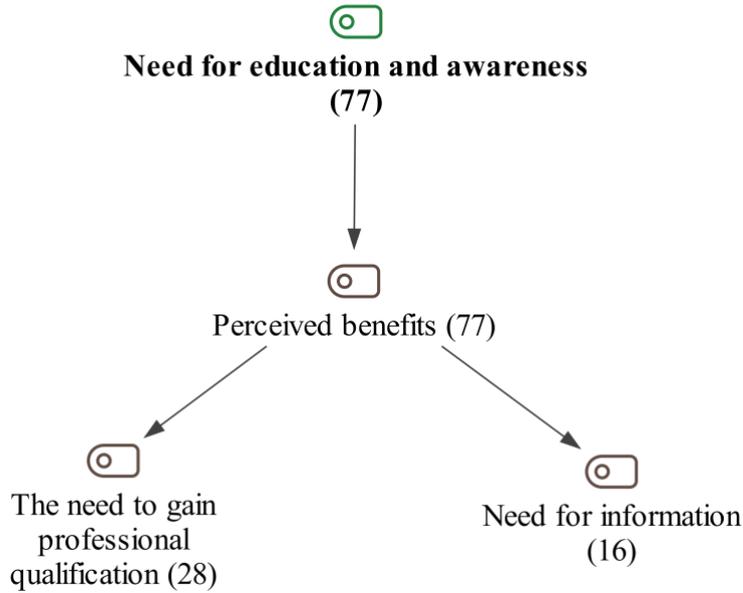
**Figure 5.** Codes Obtained Based on the Level of Knowledge Theme and Sub-theme

As presented in Figure 5, this model was created in accordance with the answers given to the questions asked to understand the participants' views on their awareness of the factors to be considered when choosing toys and their awareness of the institutions and resources that families can apply for the prevention of home accidents. When the participant views were analyzed thematically two sub-themes identified under the main theme of 'Level of Knowledge' were perceived benefits and perceived barriers. Participants' responses regarding the role of toys in the occurrence of home accidents and the factors to be considered in the selection of toys such as developmental suitability (n= 30), quality and safe material selection (n= 27) were associated with participation in awareness activities (n= 15), receiving consultancy services (n=31), benefiting from written sources (n=13) and sharing experience (2) and emerged in the perceived benefit sub-theme. Under the perceived barrier sub-theme, the codes of lack of information (n= 3) and difficulty in accessing information (n=17) experienced by families came to the fore. Participant 33 expressed awareness about the family's sources of information about home accidents with the following statement:

P33: *“They (families) can consult those who have expertise in first and emergency aid, those who have expertise in child development. They can also look on the internet, there are seminars and distance education, but they should take care to get it only from experts.”*

### **Need for Education and Awareness**

This theme, which aims to enhance participants' awareness of home accidents and their need for education, consists of one sub-theme and two codes under it.



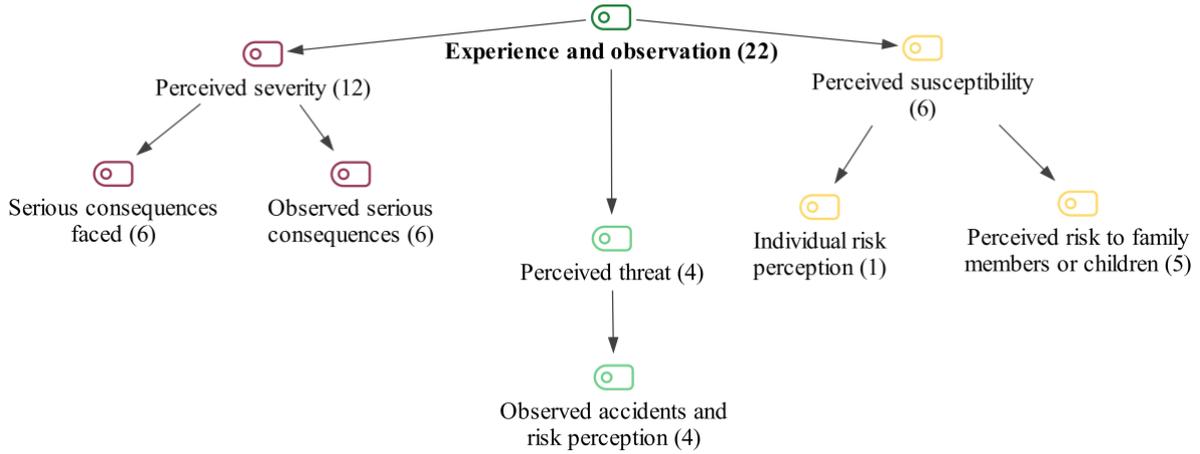
**Figure 6.** Codes Obtained According to Training and Awareness Needs Theme and Subtheme

As presented in Figure 6, it was created in line with the answers given to the questions asked to understand the views of the participants regarding their training and awareness. When the participant views were analyzed, it was seen that they can be evaluated within the framework of the sub-theme of perceived benefits under the main theme of “Need for Training and Awareness”. It is seen that the codes of prevention strategies, the need to gain information (n= 16) and the need to gain professional qualification (n=28) were revealed to express what the participants' training and awareness needs might be in terms of preventing or intervening in home accidents. Participant 7 expressed the need for awareness and training on home accidents with the following statement:

P7: “Our field is about children, and we need to give them confidence in every aspect. If we are aware of home accidents, we can help parents and people around us.”

### **Experience and Observation**

As a result of the personal experience and observation statements given in all questions, the theme of experience and observation was revealed with 5 codes under 3 sub-themes.



**Figure 7.** Codes Based on Experience and Observation Theme and Subtheme

As can be seen in Figure 7, the model was created in line with the answers given by the participants to the questions asked during the interview to understand their statements regarding experience and observation. When the participant views were analyzed, the codes that emerged within the perceived threat sub-theme were personal or observed accidents and risk perception (n=4). Under the perceived susceptibility sub-theme, the codes of individual risk perception (n=1) and risk perception towards family members/children (n=5) were revealed. Finally, under the perceived seriousness sub-theme, the codes of observed (n= 6) and experienced (n=6) serious consequences emerged. Participant 29 expressed the following statement based on their observations while sharing views on possible home accidents:

P29: *“I know from my cousin, my cousin put his hand in the socket and got an electric shock or something like that, or unconscious harsh behaviors, such as not being aware of the height and suddenly throwing himself to the ground, these can happen.”*

### **Discussion and Conclusion**

In this qualitative study, it was aimed to examine the awareness of undergraduate Child Development students about home accidents that 0–6-year-old children may experience and safety precautions that can be taken. This study presents the findings on child development students’ perceptions regarding the most common areas in which home accidents occur, as well as the underlying causes and risk factors. It also evaluates their awareness of risky age groups, developmentally appropriate activities for children and routines, and the selection of safe and high-quality toys. Furthermore, the study explores participants’ knowledge of first aid practices, accident prevention measures, and appropriate physical arrangements within the home environment. Finally, it assesses their awareness of relevant institutions and available resources

related to the prevention of home accidents. A code system was created for the data obtained and according to the first research findings, it was revealed that the theme “*Risk Perception*” was the most frequently mentioned theme by all participants. This was followed by “*Interventions and Precautions*” and “*Level of Knowledge*” themes. “*Need for Training and Awareness*” and “*Experience and Observation*” themes were mentioned by a limited number of participants. This finding reveals that the participants' awareness of home accidents is primarily shaped within the framework of risk perception and preventive behaviors, while the level of awareness of individual experiences or training needs is more limited.

Participants most identified burns, crush injuries, poisoning, falls, collisions, and cuts as frequent home accidents among children aged 0–6. These findings were categorized under the theme of *risk perception*, specifically the sub-theme of *perceived threat*. Similar findings were found in the literature, and it was stated that the most common home accidents at early ages were cuts, bumps/falls, burns and poisoning (Özmen et al., 2007). Yıldırım and Kublay (2016) listed the most common home accidents in Türkiye as falls, burns, cuts, poisoning, drowning foreign body obstruction and stated that injuries caused by firearms can also be classified as home accidents. In line with our research findings and the literature, it is understood that the participants have a high level of awareness about the types of home accidents that may occur. Thus, the participants have an idea about recognizing and classifying possible home accidents. In addition, the participants stated that home accidents occur most frequently in the living room, kitchen, balcony, lounge, children's room, bathroom and corridor. Participants also emphasized that children experience these accidents in areas where they spend more time, play or are more likely to be alone. In accordance with this, the kitchen, where knives and hot utensils are frequently used, the bathroom due to its slippery floor (Sarohan, 2017), any place in the house where there is a risk of falling (Alptekin, 2004), the living room due to insufficient space or lack of the child's own room, and kitchens that become attractive for children due to role plays and abundant materials (İnce, 2018) have been reported as places where home accidents frequently occur. As a matter of fact, when our research findings are examined, it is seen that the participants have a high level of awareness in identifying the places where home accidents occur, which are stated to have risk factors in the literature. This situation shows that the participants have a structure that coincides with the literature in recognizing and evaluating in-home risk areas.

According to the participants' views, the factors that trigger home accidents were discussed under the sub-theme of *perceived susceptibility*. While lack of knowledge and lack

of adequate precautions by family members come to the forefront, it was stated that environmental factors such as unsafe furniture, windows, floors and electrical installations also play a crucial role in the occurrence of accidents. It was also emphasized that the level of sensitivity of children and families to these risks is a critical factor in preventing accidents. However, collision and fall accidents were also reported due to physical and behavioral characteristics of children such as short height which may lead to accidents while reaching various objects. In addition, home accidents were reported to be more common in the 0-6 age group. While these risks can be explained by curiosity, putting objects in the mouth and the independence gained with the start of walking in younger age groups, they are associated with increased mobility, desire for independence and frequent play of mobile games in older age groups (WHO, 2008). In the literature, it is reported that most home accidents and injuries occur in children aged 1-3 years (Agran et al., 2001; Ertem et al., 2001; İnce, 2018). Considering the milestones of child development at that age group; inadequate development of visual-motor and sound discrimination skills, increased curiosity and desire for learning and exploring, and motor and reflective discrimination skills that are still under the development process may contribute to home accidents (Altuntaş et al., 2013; Çetintaş et al., 2022; İnanç et al., 2008). The Centers for Disease Control and Prevention (2021), in a special report, states that “unintentional” accidents such as home accidents occur mostly during childhood and that home accidents in the 0-1 age group are the third leading cause of death worldwide. In line with our findings, literature, shows that the age at which children are exposed to home accidents can be determined by students in the department of child development. So, it can be considered that the level of knowledge of the participants about child development is effective.

In the *perceived barrier's* sub-theme, family-related factors were discussed, and characteristics such as parents not being a good model for their children, over-permissive parenting attitudes, inconsistency and inability to consider the suitability of environmental arrangements for children were evaluated in this category. As a matter of fact, the young age of parents, low education level of family members (Yalaki et al., 2010; İnanç et al., 2008), inability to intervene adequately due to insufficient first aid knowledge (Yeniyapı & Tokur Kesgin, 2023), and lack of family education on home accidents (İnce, 2018) are seen as risk factors for child accidents. When the participant responses are evaluated in the light of the existing literature, it is seen that the *perceived threats*, the sensitivity levels of the child and family towards home accidents, and the perceived barriers largely overlap with the findings emphasized in the literature. This situation reveals that the risk perception of the participants

regarding home accidents and their attitudes towards these risks are in parallel with similar studies in the literature.

Another theme was determined as the *Intervention and Precautions* theme. In this framework, the findings related to the activities with the highest probability of accidents at home were evaluated under the *perceived threat* sub-theme. Participants expressed the activities of children that increase the risk of home accidents as being active/running, playing games, exploration and curiosity behaviors, not being in the correct position during meals. Participants also expressed the risky activities for the family as, leaving the child unattended, buying toys that are not suitable for the child and leaving the child alone during sleep. Studies have shown that children are more likely to have accidents at home when they are not immobile and move quickly (Yeniyapı & Tokur Kesgin, 2023) and that parental neglect increases the likelihood of accidents at home four times (Doğan & Öztürk, 2021). Alptekin et al. (2008) explains that home accidents occur due to children frequently jumping, falling and slipping in the home environment. The fact that the most frequently perceived threat category in the *Intervention and Precautions* theme was frequently expressed by the participants shows that the participants' threat perceptions are consistent with the findings in the literature. Participants revealed their awareness of the prevention of the above threats in the context of the sub-theme of *cues for acting*. It was observed that the participants expressed the following responses less frequently. Observing children, taking safety precautions with environmental organization, knowing first aid and contacting health services. Accordingly, it shows that the participants focused more on the threat perception towards home accidents; however, they did not have sufficient awareness about protective and intervention behaviors. However, when the participant statements such as learning fast and conscious intervention methods, motivation to increase safety and regulation of reactions are evaluated within the framework of the *self-efficacy* sub-theme, it shows that individuals not only have a passive risk perception in the face of home accidents but also tend to improve themselves in coping with these risks and intervening effectively. Findings related to the theme of *Intervention and Precautions*, when evaluated within the scope of HBM, reveal that participants' levels of “*perceived threat*” regarding home accidents are relatively high. However, it is observed that this awareness is not consistently reflected in protective and preventive behaviors. This situation may be related to factors such as “lack of education,” “difficulties in accessing reliable information sources,” and “lack of role models in family and educational environments,” which are experienced by participants as “perceived barriers.” When evaluated in the context of educational policies, it is noteworthy that theoretical

knowledge transfer regarding home accidents is provided to a certain extent, but practical learning processes that support the belief in “*self-efficacy*” and provide “*cues to action*” are insufficient. Although participants are aware of the potential benefits of protective behaviors, the lack of structured and application-based safety education may limit the transformation of this awareness into behavior. In this regard, integrating practical safety education, child safety simulations, and early intervention-focused modules into Child Development programs have the potential to support behavioral change by increasing individuals' belief in their capacity to intervene. Therefore, the study points not only to the need for individual awareness levels but also to the need for a structural review and development of child safety education programs.

Another theme revealed in the research was the theme of *Knowledge Level*. In this respect, within the framework of the *perceived benefit* sub-theme, the role of toys and participants' responses to the factors to be considered for toy selection were explained. The participants' emphasis on toy selection significantly overlaps with the study of Şekerci and İnal (2016). In the mentioned study, it was stated that toys that are not suitable for the child's age and developmental level, produced from unhealthy materials and left in an irregular manner pave the way for home accidents; on the other hand, it was emphasized that mothers who are sensitive about choosing the age-appropriate and safe toys have a higher awareness of protecting their children from accidents. In this regard, the participants' awareness of developmentally appropriate and, safe material preference along with conscious choices indicate their individual knowledge levels and their protective attitudes towards child safety. Also, within the framework of the sub-theme of *perceived benefit*, the knowledge levels of the participants regarding factors such as participation in awareness activities, benefiting from counseling services, using written resources and sharing experiences were evaluated. However, under the sub-theme of *perceived barriers* which is addressed under this main theme, the lack of information and difficulties in accessing information experienced by families were also emphasized. Similarly, in the literature, the importance of conducting awareness-raising activities (Santos et al., 2022), creating parent programs for home accidents, providing health literacy training (Demirköse et al., 2022; Kayıran et al., 2022) and organizing training activities on child safety (Çetintaş et al., 2022) has been emphasized. On the other hand, the home accidents awareness scale, which was planned to be developed specifically for mothers, was designed to draw attention to childhood injuries (Gülbetekin & Güdücü Tüfekçi, 2023). Although this situation reveals that perceived benefit is a strong source of motivation for individuals to engage in protective behaviors in the literature, its emergence together with the

theme of perceived barriers suggests that individuals face difficulties in the process of performing these behaviors.

In the *perceived benefit* sub-theme that emerged in the theme of *Training and Awareness Needs*, it was revealed that the participants evaluated their training, and awareness needs regarding home accidents at two stages: to maintain safe behaviors in daily life and to increase their professional competencies. Participants stated that families need access to reliable sources of information. Participants also expressed their desire to be aware of issues such as obtaining information, professional development, first aid training and guidance to families. In the literature, it has been emphasized that Child Development associate degree students should receive first aid training and participate in applied studies (Solmaz et al., 2024); the importance of protective and preventive education on home accidents (Al Rumhi et al., 2020) and the development of intervention programs for childhood home accidents (Moridi, 2021). Indeed, the National Core Education Program for Child Development (Council of Higher Education, 2025), which forms the basis of the courses of the Department of Child Development, emphasizes the importance of professional courses focusing on children, families and early intervention. In addition to courses such as Family Counseling and First Aid in CGL-UCEP, awareness-raising practices and courses can also be included in this program. In fact, all the results obtained are largely consistent with the findings mentioned above. In this context, it is important to note that the participants expressed their desire to include a course on home accidents in the curriculum to increase their awareness and knowledge about home accidents. Thus, it will be more possible to carry out professional activities related to home accidents in a professional manner.

Finally, the theme of *Experience and Observation* emerged in relation to all themes and helped us to understand the participants' awareness in more depth. The fact that the participants frequently provided examples based on their own experiences or the experiences of others in the interviews shows that they shaped their knowledge and awareness on this issue through their personal experiences. In this context, the *perceived threat* sub-theme is directly related to the accidents and risk perceptions of the participants. In other words, individuals perceive risks based not only on theoretical knowledge but also on the events they encounter in their own environment. The *perceived susceptibility* sub-theme is similarly shaped by the participants' individual risk perception and risk perception towards family members or children. Finally, the serious consequences observed under the *perceived severity* sub-theme indicate that the participants have a deep awareness of the potential effects of home accidents. Participants

reflected their perception that the serious accidents they observed or heard about can significantly affect the lives of individuals and families. This emphasizes the importance of a stronger awareness of the seriousness of accidents and the measures to be taken against these accidents.

In conclusion, this study reached important findings by analyzing the risk perceptions of Child Development undergraduate students related to home accidents, their awareness, knowledge, experiences and perceptions about intervention and prevention. It can be said that the participants have a high level of awareness of risk factors, but they face some difficulties in transforming this awareness into preventive behaviors in practice. One of the most basic barriers is seen as lack of education and information. Participants stated that they need training and awareness-raising to play a more active role in preventing home accidents. In addition, it can be said that the participants' experiences and observations have an impact on their perceptions of the seriousness of home accidents and are seen as an important source of motivation for them to develop protective behaviors. The findings reveal the need for more structured training programs and awareness-raising activities for Child Development students, who will assume an active role both as health professionals and in the education and safety of children to prevent home accidents. As a result, these activities will significantly contribute to the prevention of home accidents, which is seen as an important public health issue.

There are some limitations in our research in addition to all these findings. Firstly, students studying an undergraduate degree of Child Development were included in the study, and only voluntary students who met the criteria in the criterion sampling method were included in the study. In this respect, the generalizability of the research findings is limited. To overcome this difficulty in future studies, research sample should not be limited to Child Development undergraduate students; individuals from various groups such as students from different departments, educators and health professionals who will encounter children in working life should also be included in future studies. Secondly, in the data obtained through semi-structured interviews, participants may tend to give 'correct' answers about awareness, which may lead to the risk of social desirability bias. In future research, complementary data collection methods such as observation, case studies or anonymous questionnaires could be used.

### **Implications**

The study is thought to have an important value in its field due to its subject and scope. The critical developmental stages of the 0-6 age period and the home accidents that may occur in this period were evaluated by leading child development professionals in the field. The lack

of a similar study measuring the awareness of undergraduate child development students about home accidents in the literature reveals that this study can be an important indicator. In addition, the increasing frequency of childhood home accidents and the tragic consequences of home accidents lead the reader to think that child development specialists should be trained on this subject. In addition, the research findings emphasize the importance of including this topic in the curriculum as a course or training program.

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## Appendix 1

**Table 1.** Information about the Study Group

Variables	Groups	Number
Age	19 years and under	10
	20	7
	21	8
	22 years and older	8
Class level	1st	7
	2nd	11
	3rd	9
	4th	6
Status of receiving training on home accidents	Receiving training	0
	No training	33
Status of reading publications etc. on home accidents	Reader	5 (Article: 3, Journal: 1, Not specified: 1)
	Non-reader	28
<b>Issue: 28</b>		
Whether there was an accident in childhood	Accident survivor	<b>Type</b>
		Crushing/dislocation of the finger: 4
		Fracture of the arm (as a result of a fall): 3
		Burning 12
		Injury (caused by a fall): 7
		Poisoning: 1
		Jamming in the mooring: 1
		Injury with a sharp instrument: 1
		<b>Age at the time of the accident</b>
		2 years: 2
3 years: 2		
4 years old: 1		
5-6 years: 7		
7-8 years: 3		
9 years old: 1		
14 years old: 1		
Not specified: 11		
<b>No accidents</b>		<b>5</b>

## Appendix 2

### Examples of Semi-Structured Interview Questions

1. What do you think are the most common home accidents in children aged 0-6 years?
2. What are the risk factors for home accidents for children aged 0-6 years?
3. During which activities are children more likely to have home accidents?
4. What are the precautions that should be taken at home to reduce home accidents?
5. If the family wants to get information about the prevention of home accidents, which resources/institutions should they consult?