Kidsafe WA
Childhood Injury Bulletin

Child Accident Prevention Foundation of Australia
Western Australia

January 2026

Kidsafe WA
Kidsafe WA is the leading independent not-for-profit organisation dedicated to promoting safety and preventing childhood injuries and accidents in Western Australia. Injuries are the leading cause of death among Australian children and young people aged zero to seventeen, and many of these deaths and injuries can be prevented. Kidsafe WA works to educate and inform parents and children on staying safe at home, at play and on the road.

Perth Children's Hospital Injury Surveillance System
Perth Children's Hospital (PCH) is the only paediatric hospital in Western Australia and is the referral centre for paediatric illness and injury within the state. Each year approximately 68,000 children present to the PCH Emergency Department (ED). The PCH ED Injury Surveillance System is designed to capture data related to all children who present with an injury. This bulletin summarises toy/play equipment injuries occurring between July 2019 and June 2024.

Injuries from Toys and Play Equipment

A snapshot of injuries

- A total of **1,493** children presented to the PCH ED for a toy/play equipment related injury between July 2019 and June 2024.
- On average, **299** toy/play equipment related injuries present to the PCH ED each year.
- **Males** accounted for 59.3 percent (n=886) of all presentations.
- Younger children were at greater risk of injury, with **0 to 4 year olds** accounting for a large proportion (61.8%, n=922).
- Almost all injuries (99.7%, n=1,488) were deemed **unintentional**.
- Of the known causes, **falls** were the most common cause of injury, accounting for 56.4 percent (n=592). This was followed by **blunt force**, accounting for 40.3 percent (n=423) of injuries.
- Of the known locations, over half of the toy injuries occurred at **home** (56.7%, n=190) followed by **schools or residential institutions** (27.8%, n=93).
- Majority of the injury presentations were deemed **semi-urgent** (78.6%, n=1,173) and 17.5 percent (n=261) **urgent.**
- Almost all of the children were referred to the ED based on **self or relative concerns** (91.2%, n=1361).
- The majority of patients were **discharged** with treatment complete (89.7%, n=1,339).

Partner:

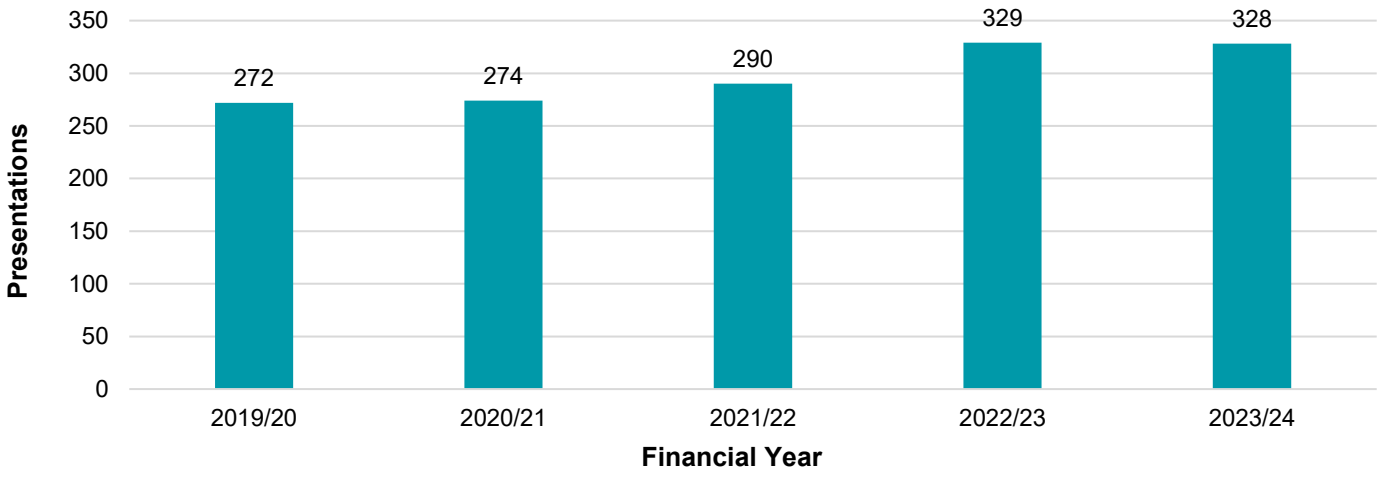
Government of **Western Australia**
Department of **Health**

Introduction

Toys and play equipment are an essential part of childhood and support the healthy development of children. However, these items may also present injury risks to children, particularly if a product is unsafe or unsuitable for a child's age. Potential injuries associated with toys and play equipment include choking, suffocation, ingestion, laceration, fractures, poisoning, vision or hearing impairment, and burns. These can be caused by toy components such as button batteries, beads, strings, balloons, and sharp points, as well as from features such as poor ventilation, small holes or loud sounds[1]. Children are more vulnerable to toy-related injuries due to their limited ability to assess and manage risks[2].

Between July 2019 to June 2024, a total of 1,493 children presented to PCH ED with an injury associated with toys/play equipment. Over the five-year period, toy/play equipment related injuries remained a small proportion of total injury presentations to PCH ED, increasing slightly from 1.4 percent (n=272) in 2019/20 to 1.7 percent in 2022/23 (n=329) (Figure 1).

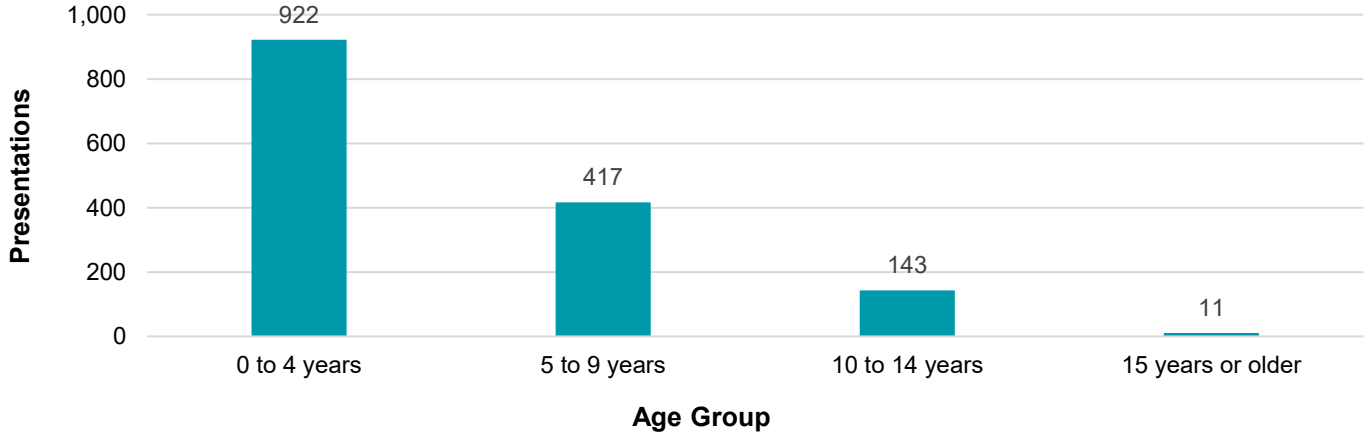
Figure 1: Toy and Play Equipment Injuries by Financial Year



Demographics

Over the five-year period, males accounted for over half of the toy/play equipment injuries to PCH ED (59.3%, n=886), while females accounted for the remaining presentations (40.7%, n=607). Children aged between zero and four years had the highest prevalence of toy injuries (61.8%, n=922) with the number of presentations decreasing with age (Figure 2). Younger children are at higher risk of injury due to increased mobility, curiosity about their surrounding environment, and limited ability to assess and manage risks[3]. This age group is also more likely to use toys and play equipment, while older children tend to participate more in sports or use items such as wheeled devices.

Figure 2: Toy and Play Equipment Injuries by Age Group



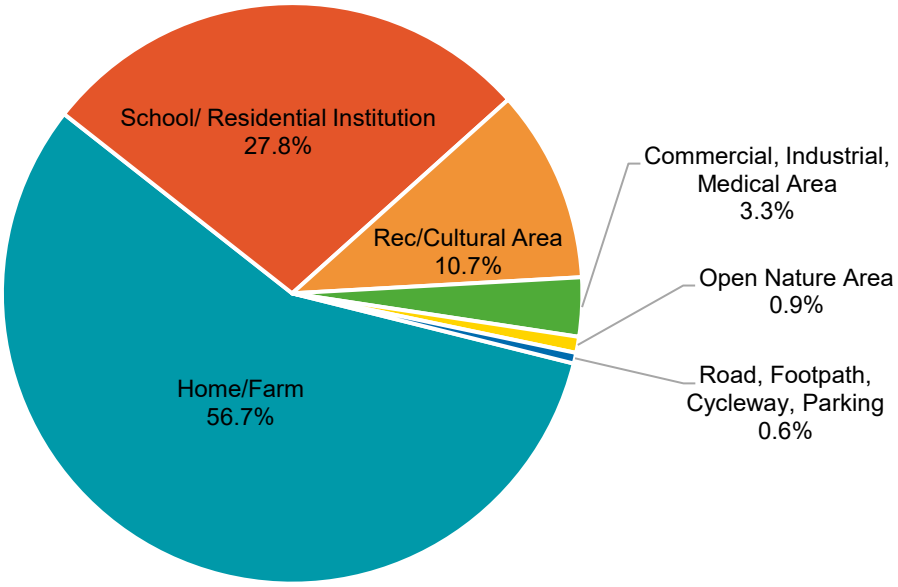
Injury

Each child that presents to PCH ED is assigned a triage category based on the level of medical urgency required. The majority of toy/play equipment injuries were triaged as semi-urgent (78.6%, n=,1173), followed by urgent (17.5%, n=261) and emergency (3.8%, n=56). The remaining presentations were triaged as resus or non-urgent. Almost all toy/play equipment injury presentations to PCH ED were deemed unintentional (99.7%, n=1,488).

Falls were the most common cause of injury (39.7%, n=592), with most occurring on the same level (44.9%, n=266) or from less than one meter (42.9%, n=254), with the remaining falls being from greater than one meter (12.1%, n=72). Other causes accounted for 29.9 percent (n=446) of injuries, including contact with machinery, burns/scalds, physical over exertion, other complication of health care, other threat to breathing, and other unidentified causes. Blunt force was the third leading cause of toy/play equipment injuries (28.3%, n=423), often involving toy parts such as toy gun bullets, cars, swords and building blocks, either self-inflicted or caused by others (e.g. friends or siblings). The remaining injuries were caused by cutting or piercing (2.1%, n=32).

Of the known injury locations, over half of toy/play equipment injuries occurred at home or on a farm (56.7%, n=190), followed by schools and residential institutions (27.8%, n=91) and recreational or cultural areas (10.7%, n=36). A smaller proportion of the injuries occurred in commercial, industrial, medical areas (3.3%, n=11), in open nature areas (1%, n=3), and on the road, footpath, cycleway, and parking (1%, n=2) (Figure 3).

Figure 3: Toy and Play Equipment Injuries by Location



Most presentations to PCH ED were based on the child or relative's concerns (91.2%, n=1,361), followed by referrals from general practitioners (4.8%, n=71), other hospitals (3.3%, n=50) and other sources (0.2%, n=2). The majority of patients were discharged with treatment complete (89.7%, n=1,339). A further eight percent (n=119) of presentations were admitted to hospital for additional treatment, and the remaining presentations either did not wait for treatment or were referred to another department or hospital.

Prevention

Toy and play equipment injuries can be significantly reduced by implementing a number of preventive strategies. In Australia, toys designed for children up to and including 36 months old must comply with the Australian mandatory standard. This regulates the design, construction materials, testing methods and labelling of toys. In addition, there are mandatory safety standards for other toys such as, but not limited to aquatic toys, projectile toys etc. The Australian Competition and Consumer Commission (ACCC) enforces these standards and manages recalls for products that do not meet mandatory safety requirements. To see the list of the mandatory safety standards visit www.productsafety.gov.au/business/search-mandatory-standards. Furthermore, parents/carers and retailers also play a critical role in reducing the risk of toy-related injuries for children.

The following measures can also assist with minimising the risk of toy/play equipment related injury:

- **Follow age recommendations:** Choose toys that are appropriate for a child's age and developmental stage. Toys that are marked as unsuitable for children under 3 years may have small parts which could be a choking hazard for small children.
- **Read labels and instructions:** Check toy labels and instructions to ensure products are non-toxic, non-flammable, and include the distributor's contact details.
- **Consider the design of the toy:** Avoid toys with explosive or projectile parts, loud sounds that may damage hearing, and long strings or ribbons, which should be less than 30 cm in length.
- **Inspect the quality of toys:** Choose well-constructed toys and avoid those that can break easily during normal play, as broken pieces may create choking or injury hazards.
- **Avoid toys with batteries and magnets:** Button batteries and high-powered magnets can be extremely dangerous if swallowed and may cause severe and lifelong injuries.
- **Maintain toys over time:** Check toys regularly, as they can deteriorate and become unsafe with use. Faulty toys should be removed from use and returned to retailers where appropriate.
- **Store toys safely:** Only allow children access to toys that do not require adult supervision. Store all other toys out of sight and reach and only provide them when proper supervision is available. Use toy boxes that prevent entrapment, ideally without lids or with lightweight, removable lids.

Kidsafe WA and the WA Consumer Product Advocacy Network continue to advocate for and raise awareness of the risk associated with button battery-related injuries. For more information visit: www.kidsafewa.com.au/professionals/wa-consumer-product-advocacy-network/.

References:

1. Kidsafe Tasmania. (n.d.). Toy Safety Fact Sheet. Available from: https://www.kidsafetas.com.au/uploads/file/Toys%20fact%20Sheet.pdf
2. AIHW. (2014). Hospitalised Injury in Children and Young People 2011-12. Available from: https://www.aihw.gov.au/reports/injury/hospitalised-injury-children-young-people-2011-12/contents/table-of-contents
3. AIHW. (2024). Injuries in Children and Adolescents 2021–22. Available from: https://www.aihw.gov.au/reports/injury/injuries-in-children-and-adolescents-2021-22/contents/causes-of-injury

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For further information please contact Kidsafe WA

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