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## **RE: OPTIONS TO ADDRESS THE SAFETY RISKS OF CORDED WINDOW COVERINGS**

Health Canada welcomes the opportunity to submit comments on the subject matter, in particular, to the questions of the consultation paper. The majority of the feedback provided below is detailed in the Regulatory Impact Analysis Statement that accompanied the final publication of the [Corded Window Covering Regulations](#). Health Canada would be happy to answer any further questions relating to our input.

### **Information about you**

Which of the following are you?

- Regulator

For importers or distributors of window coverings:

- N/A

For retailers, suppliers and installers of window coverings:

- N/A

### **Questions**

1. Do you agree that corded window coverings in New Zealand currently present a significant safety risk? Why/why not?

Based on the statistics presented in the consultation paper, the rate of child fatalities in New Zealand exceeds that of other jurisdictions that have imposed rules or regulations to address the risk of strangulation posed by corded window coverings. In Health Canada's view, the risk of injuries and fatalities posed by corded window coverings, a home décor product, is not justified when safe alternatives exist.

2. Do you believe that government intervention is suitable to address this problem? Why/why not?

In Canada, prior to the publication of the [Corded Window Coverings Regulations](#) (CWCR), Health Canada undertook various actions to help reduce the risk of strangulation by corded window coverings. Despite more than 25 years of public education, active industry engagement, concerted attempts to improve the standard, and the introduction of previous regulations in 2009 that incorporated the standard, fatalities and injuries continued to occur. Government intervention to improve the regulations with the requirements of the CWCR was needed to help eliminate the strangulation hazard and to help reduce the rate of fatal strangulations associated with corded window coverings.

3. Do you agree with the proposed objective? Why/why not?

“The Government’s primary objective is to reduce deaths and injuries caused by corded window coverings, to the extent that it is practical and cost effective to do so.”

Health Canada is of the view that this stated objective is not strong enough, with respect to the caveat “to the extent that it is practical and cost effective to do so”. The risk of injuries and fatalities posed by corded window coverings, a home décor product, is not justified when safe alternatives exist. The evidence of safe and affordable window coverings in the market that do not pose a risk of strangulation indicate that it is indeed practical.

4. Do you agree with the use of net benefit as the main criterion to determine suitability of the options? Why/why not?

Although there may be net costs (outweighing the financial benefits) that may be distributed among manufacturers, importers, retailers and consumers of window coverings, these costs can be considered justifiable to eliminate this hazard and help to prevent the deaths of young children.

5. What other criteria are important to consider?

In 2012, a Pilot Alignment Initiative in which Canada participated with Australia, the United States, and the European Commission (EC) released a consensus statement on corded window covering safety. This statement indicated that the highest level of protection from the strangulation hazard associated with window coverings was the elimination of accessible cords that could form a hazardous loop under any conditions.

Canada has moved forward with Regulations to meet this objective. The United States is in the process of introducing a mandatory rule that aligns with this objective.

The corded window covering industry in North America has responded with new product innovation to meet these requirements in the market.

It is fair to say that the window covering landscape is changing in many parts of the world; the technology exists to provide safe alternatives available to consumers.

6. Are there any options missing?

Health Canada has no other options to suggest beyond those identified in the Consultation Document.

7. Do you agree with the advantages and disadvantages of the options identified in the discussion paper?

Health Canada has no experience with Option 2 of the Consultation Document, but has experienced both the advantages and disadvantages that are described in Options 1, 3, and 4.

8. Do you have further information on the advantages and disadvantages of the options?

Canada has moved forward with Regulations similar to Option 4A, however, the Australian standard that is cited heavily relies on installation practices to address the strangulation hazard. The Canadian *Corded Window Coverings Regulations* specify requirements to help eliminate the strangulation hazard from all corded window coverings so that the products themselves will be inherently safer *without* relying on installation, alteration, additional safety devices, or consumer behaviour.

9. What other costs or benefits need to be taken into account?

For the Canadian *Corded Window Coverings Regulations* (CWCR), the identified benefits included the socio-economic value of saved lives and the reduced cost of product testing (relative to the testing requirements of the previous Regulations).

The annual incremental cost imposed by the CWCR is the sum of the yearly costs to make otherwise non-compliant units compliant. This includes component and assembly costs, and the one-time expenses of research & development and tooling costs. It is important to note that an analysis of costs should consider *incremental* costs (and not the total cost) of all manufacturing activities.

10. What other data could you make available, or are you aware of, that may be useful to inform this analysis?

Health Canada's [cost-benefit analysis](#) for the Corded Window Coverings Regulations incorporates data from the North American window blind manufacturing statistics available through Statistics Canada. Though this data is representative of the Canadian market and manufacturing, it may be informative to your analysis.

11. Do you think the Government should intervene through:

1. information and education to educate and encourage consumer behaviour (e.g. communication programmes, social media campaigns, etc.),
2. providing funding for household to install safety devices/replace existing corded window coverings with cordless options,
3. encouraging voluntary modification by businesses to reduce risks (e.g. selling safety devices or cordless designs, providing advice to consumers, etc.),
4. putting in place a mandatory standard targeting corded window coverings to be manufactured, sold and installed in the future, or
5. a combination of the above options? Which options?

In Canada, prior to the publication of the [Corded Window Coverings Regulations](#) (CWCR), Health Canada undertook various actions to help reduce the risk of strangulation by corded window coverings. Despite more than 25 years of public education, active industry engagement, concerted attempts to improve the standard, and the introduction of previous regulations in 2009 that incorporated the standard, fatalities and injuries continued to occur. Government intervention to improve the regulations with the requirements of the CWCR was needed to help eliminate the strangulation hazard and to help reduce the rate of fatal strangulations associated with corded window coverings.

Education measures alone do not eliminate the strangulation hazard associated with long accessible cords on window coverings.

Relying upon safety devices that require additional installation and regular active consumer intervention, or attempts to change consumer behaviour to ensure that a product is always used safely, have not proven to adequately protect children in Canada and is not an effective safety measure.

Voluntary industry measures did not adequately protect children from the risk of strangulation.

Therefore, Health Canada is of the view that the most appropriate intervention is for Government to enact regulations so that the product is inherently safer, shifting away from ineffective attempts at changing consumer interaction with this product category.

Outreach activities and education campaigns should continue to act as a complementary instrument for raising awareness and helping to mitigate the risk from consumer products already in people's homes.

12. If you selected option 4, 'putting in place a mandatory standard', do you think the mandatory standard should require:

- 4A. the installation of mandatory safety features, or

4B. prohibit window coverings with exposed cords?

Mandatory safety requirements that address the strangulation hazard should be put in place. To adequately mitigate the risk of strangulation, the pathway to injury needs to be disrupted: cords should either be inaccessible, or if there are accessible cords, then they should remain too short to wrap around a child's neck and loops should remain too small to pass over a child's head, when a force that a child can exert is applied to an accessible cord. For further information regarding these requirements that help to eliminate the risk of strangulation, see the attached "*Research on appropriate cord length, cord loop, and pull force.docx*" included with this submission.

13. Why do you think this option is best?

The recommendation that Health Canada has described in our response to Question 13 disrupts the pathway to injury; a compliant product will not pose a risk of strangulation. See "*Measuring performance and taking action CWCR 2020-02-04.pptx*" (Slides 12 through 15) included with this submission, which describes the pathway to injury and how adequate requirements can help to eliminate the strangulation hazard.

14. Do you agree that a regulatory solution would have a direct highly beneficial impact on young children and their families? Why/why not?

A regulatory solution has a direct benefit of child lives saved.

15. Do you agree that a regulatory solution would have an indirect beneficial impact on New Zealand communities as a whole in terms of wellbeing and safety? Why/why not?

A regulatory solution has a direct benefit of child lives saved, creating an overall safer community.

16. Do you agree that a solution to regulate corded window coverings would be the most efficient tool to obtain highly beneficial impacts? Why/why not?

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Therefore, Health Canada is of the view that the most appropriate intervention is for Government to enact regulations so that the product is inherently safer, shifting away from ineffective attempts at changing consumer interaction with this product category.

Outreach activities and education campaigns should continue to act as a complementary instrument for raising awareness and helping to mitigate the risk from consumer products already in people's homes.

For suppliers and distributors

\*As a Regulator, Health Canada has no comment on the following questions with the exception of Question 21 which we can speak to from experience in the Canadian market, as a result of the introduction of the *Corded Window Coverings Regulations*.

17. What would be the impact on the industry of a mandatory standard regulating the installation of safety features (option 4A)?

18. What costs would be incurred by your business if a mandatory standard was introduced regulating the installation of safety features (option 4A)? Can you provide monetary estimates of these costs?

19. What would be the impact on the industry of a mandatory standard requiring window coverings to be cordless (option 4B)?

20. What costs would be incurred by your business if a mandatory standard was introduced requiring window coverings to be cordless (option 4B)? Can you provide monetary estimates of these costs?

21. Are you aware of any technologies offering safer, affordable, and easier-to-use alternative operating systems for window coverings? If yes, what are these technologies and how are they safer?

Health Canada is aware of technologies and operating systems for corded window coverings that do not pose a risk of strangulation. The following list is not exhaustive:

- Cellular shades with no operating cords and inaccessible inner cords (manual lift, push-button control)
- Cord shrouds that shield cords
- Retractable mechanisms that include a wand, where the cord fully retracts into the headrail
- Tethered cord loops
- Crank mechanisms
- Horizontal blinds with no operating cords and inner cords that resist a pull force so that no hazardous loops are created
- Roman shades with magnets
- Telescoping wand controls (that enclose an operating cord)
- Motorized window blinds, including low-cost options
- Furthermore, designs that shift away from corded operating systems are safe alternatives, including: roller blinds with clutch mechanisms, indoor shutters, day/night shades, rotational wand control, curtains...

22. Would cordless window coverings be more expensive for the consumer than the current corded designs? Manual or motorised? Vertical or horizontal? Why? How much more expensive?

For consumers:

\*As a Regulator, Health Canada has no comment on the following questions.

23. Would you be willing to pay a higher price for cordless or corded window coverings that are safer for young children? Why/why not?

24. How much extra would you be willing to pay (percentage) for a compliant design that is safer for young children?