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Background Home is the most common place for non-fatal injuries in children less than 5 years of age. This is due to the time young children spend at home and their exposure to many potential home hazards. However, there are no locale-appropriate tools to assess injury hazards.

 $\begin{tabular}{ll} \textbf{Objective} & To & pilot & an in-home & all & injury & hazard & assessment & tool \\ and to & identify & potential & injury & hazards & in a low-income setting. \\ \end{tabular}$

Methods Two neighbourhoods were mapped, and families with at least one child between the ages of 12 and 59 months were identified. Using existing available home injury risk information, an in-home injury risk assessment tool was drafted and tailored to the local setting. Home injury assessments were done in June and July 2010 after obtaining informed consent.

Results Five hundred and three households were enrolled. Around 75.4% of mothers were educated through at least intermediate school (grade 12). The most common fall risk was stairs without a gate/barrier (50%). Uncovered pools of water presented a drowning risk in 22% of households. Stoves (56%) and matches (44%) were kept within reach of the child representing burns risk. Poisoning risks included cleaning supplies (34%), and medicines (15%) accessible to the child. First aid box with any one basic item was present in 70% of households.

Significance This was the first time that an in home all injury risk assessment tool can be tailored and applied in the context of low-income developing country. Risks for childhood falls, drowning, burns, and poisoning are present in low-income housing communities in Pakistan.

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PILOT STUDY ON HOME INJURY RISK ASSESSMENT IN TWO LOW-INCOME COMMUNITIES IN KARACHI, PAKISTAN

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