55

DOES PEDESTRIAN SAFETY VIDEO EDUCATION INFLUENCE CHILDREN'S PEDESTRIAN ROUTE SELECTION: RESULTS FROM A RANDOMISED CONTROLLED TRIAL

doi:10.1136/injuryprev-2012-040590w.55

<sup>1</sup>J Shen, <sup>2</sup>L Mcclure, <sup>1</sup>A Johnston, <sup>1</sup>D Schwebel. <sup>1</sup>Department of Psychology, University of Alabama at Birmingham, 1300 University Boulevard, Birmingham, Alabama, USA; <sup>2</sup>School of Public Health, University of Alabama at Birmingham, 1665 University Boulevard, Birmingham, Alabama, USA

**Background** Pedestrian injuries are a leading cause of paediatric injury. One aspect of pedestrian safety is selection of safe routes across roads. Children often select routes based on expedience but not safety.

**Aims** Test efficacy of video-based training on safe pedestrian route selection for children ages 7–8.

**Methods** As part of a larger study, 240 children were randomly assigned to one of four groups: video training, virtual reality (VR) training, streetside training, control. Videos included instructions on selecting safe crossing routes; other groups received training in different aspects of pedestrian safety (VR, streetside) or no training (control). All training groups received six 30-minute sessions.

A story task evaluated route selection skills before and after interventions. Children heard four brief vignettes accompanied by graphic representations of streetside locations, then selected preferred crossing routes from three options: distant crosswalk (safest), directly across street without crosswalk (less safe), diagonally across intersection (riskiest).

**Results** Among children trained by video, the percentage selecting the safest route in all scenarios increased 56% post-training. For VR, streetside training and control groups, comparable increases were 9%, 19%, -33%. One-way ANCOVA (IV: condition; DV: post-training score; covariates: age, pre-training scores) yielded significant results, F(3211)=3.46, p<0.05. Post-hocs confirmed video group (M=1.85) scored safer post-training than VR (M=2.13, p<0.01) or controls (M=2.06, p<0.05), plus trend with streetside training (M=2.01, p=0.09).

**Significance** Video education apparently teaches children safer pedestrian route selection than control groups. It is inexpensive and easy-to-implement, and warrants broad dissemination.

*Inj Prev* 2012;**18**(Suppl 1):A1-A246