

Cognitive Impairment-MCI) through a large driving simulator experiment.

Methods A full neurological and neuropsychological assessment was carried out and then a driving simulator experiment was applied. The driving tasks included driving in urban and rural road, at moderate and high traffic volumes, with and without distraction (conversation with passenger and conversation through mobile phone), while various unexpected incidents were scheduled to occur (sudden appearance of an animal on the roadway, or sudden appearance of a child chasing a ball or a car suddenly getting out of a parking position and getting in the road in urban area).

Results The sample scheme consisted of 140 participants of similar demographics: 31 healthy controls, 25 AD, 59 MCI, and 25 PD patients. The accident probability was analysed, by descriptive statistics at first and then appropriate mathematical models were developed. Results indicated that patients were more likely to crash the incident that unexpectedly happened. The accident risk of AD and MCI drivers was 30% higher than the control group. Finally, the negative impact of use of the mobile phone, regarding accident probability, was more significant on the patients.

Conclusions The patients had systematically higher accident probability than the cognitively intact individuals, in the majority of driving conditions. These results could have considerable practical importance as they provide useful information about the formulation of efficient countermeasures.

671 EPIDEMIOLOGICAL SURVEILLANCE OF DROWNING: A NATIONAL SURVEY IN FRANCE, 1 JUNE TO 30 SEPTEMBER 2015

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Background In France, national surveys on drowning have been contributing to the epidemiological surveillance of injuries for 15 years. The purposes of these surveys were to describe the characteristics and the risk factors of unintentional drowning, and to contribute to their prevention.

Methods A prospective survey was set up in France from the 1 June to 30 September 2015. Each drowning followed by hospitalisation or death was recorded. The data were collected by fire rescue and emergency services.

Results During the 4 months, 1,217 unintentional drownings were reported (on 2015/11/23), including 435 (36%) which resulted in death. Children under 6 represented 18% of the victims (219, including 29 deaths); adults over 45 accounted for 45% of the victims (550, including 260 deaths). The distribution by drowning place was the following: 233 in private swimming pools (68 deaths), 61 in public swimming pools (6 deaths), 156 in streams (115 deaths), 130 in lakes (65 deaths), 600 in sea water (166 deaths), and 37 in other places (15 deaths). In private swimming pools, children under 6 mainly drowned due to the lack of parental surveillance. In streams and lakes, drowning was more frequent among adults after a fall, or when engaging in solitary activities, or after having consumed alcohol. In sea water, many victims were tourists over 45 with a health problem.

Conclusions The number of drowning remained stable during the summer months since 2003, except for children under 6 in private swimming-pools, whose deaths declined from 30 in 2003 to 13 in 2015. These results illustrate the need to strengthen

prevention messages: careful surveillance of young children; learning how to swim as early as possible, since swimming is the most reported activity; not overestimating one's physical condition; swimming in supervised areas; inquiring about the state of the sea and the meteorological conditions. During the survey period, the media relayed prevention messages on TV and newspapers.

672 ACCEPTABILITY OF CHILD DROWNING PREVENTION INTERVENTIONS IN RURAL BANGLADESH

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Background Drowning accounts for 43% of childhood mortality among 1–4 years old in Bangladesh. The Saving of Lives from Drowning (SoLiD) project is being implemented in seven rural sub-districts of Bangladesh to assess the effectiveness of two child drowning prevention interventions – playpen and crèche. Nearly 78,000 children are receiving either playpen (plastic or wooden) or are enrolled in crèche or are receiving both. To our knowledge no study has explored the acceptability of crèche intervention for childhood drowning prevention. A previous study from Bangladesh has studied acceptability of metal playpen for childhood drowning prevention. The overall goal of this study is to explore and gain an in-depth understanding of the acceptability and perceptions of different stakeholders about crèche and playpen interventions.

Methods Qualitative research methods including 16 focus group discussions (FGDs) and 16 in-depth interviews (IDIs) will be conducted with parents of children who are receiving interventions, community-level workers who are involved in delivering these interventions and community leaders. Interview/FGD guide are developed for this. Grounded theory approach would be used for data collection and data analysis. Respondents will be recruited purposively. FGDs and IDIs will be audio-recorded, transcribed, translated, coded and thematically analysed.

Results Findings would explore stakeholder's perception and opinion about crèche and playpen; acceptability and utilisation; perceived advantages and disadvantages; challenges in using these interventions; and their relevance for child drowning prevention. Findings would also focus on stakeholder's recommendations for improving these interventions, and explore issues related to sustainability.

Conclusions This study is expected to provide inputs on the implementation and scale-up of playpen and crèche interventions for child drowning prevention in Bangladesh and other low- and middle-income countries.

673 BANGLADESH ANCHAL AND SWIMSAFE (BASS) CHILD DROWNING PREVENTION RESEARCH- A GRAND CHALLENGE

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Background Drowning is the leading cause of death among children under 18 after infancy in Bangladesh. The BASS program is a multi-intervention drowning prevention program in rural Bangladesh aimed at demonstrating sustainable, effective drowning interventions that can be scaled up to national scope.

Methods Community-based Participatory Research in a rural community under injury surveillance. The partners in the research were UBC, International Drowning Research Centre-Bangladesh of the CIPRB, TASC and RLSSA. The interventions included Anchals (community crèche), SwimSafe (survival swimming), First Responder/CPR and community engagement.

Results 3,200 primary and 10,000 secondary received targeted interventions.

40 Anchals operated 6 days/week from 9am-1pm for 1032 children age 9 mo-4 yrs with 854 siblings and 2640 adult family members. Growth monitoring and disability screening, review of immunisation and breastfeeding was achieved after support training. Children with deficits were identified and connected to health/social resources. The Anchal was deemed an important program by parents.

SwimSafe was provided for 1393 children 3-9 yrs. 73% met SwimSafe competency. There is lower completion and increased safety risk with children under 6 yrs. CPR was taught to 768 children 7-9 yrs of age by trained instructors. 96% of these children passed competency.

Conclusions Anchals, SwimSafe, CPR and Community Engagement for drowning prevention in rural Bangladesh is culturally acceptable. A lifecycle approach increased the likelihood of sustainability. Integrated growth monitoring and disability screening in Anchals adds value to beneficiaries and community. Swim training for children under the age of 6 yrs in SwimSafe is only recommended as part of a research protocol with risk management. Children 7-9 yrs can learn perform CPR. This program a model for LMIC drowning prevention.

674 REALITY TV – A WAY TO PREVENT DROWNINGS?

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Background In Finland there are 188 000 lakes, 42 000 km of coastline and 3000 beaches (200 supervised). Approximately 150 people drown in Finland every year. This is relatively more than e.g. in other Nordic countries. How to educate people in order to prevent drownings? The idea to create a reality TV show, on the subject of lifesaving, came from the media company AitoMedia. The Finnish Swimming Teaching and Lifesaving Federation (FSL) decided to co-operate with the production.

Objective Martina and the Lifeguards game show features ten female celebrities learning lifesaving skills in Thailand. The main instructor Anne Hiltunen represents FSL. The participants are eliminated one by one until there is just one competitor left. She is then declared the winner and a professional lifeguard. The show has its own website with information on water safety. The first season was broadcast in 2014 and the second season in 2015.

Results 32% of the Finns (1 537 000, 10 years and older) watched season 1 for at least 3 minutes. The first episode had 232 000 viewers (average 169 000 spectators per episode). The total views online were 994 944 (whole episodes 583 596, video

clips 411 348). Most of the viewers were female. The program was mentioned 184 times in 26 different media during season 1 (86% of the articles were neutral, 8% positive, 6% negative). There were no changes in the FSLs' lifeguard education course statistics. After the project, the media has been more active in promoting water safety articles (payback time).

Conclusions Compared to the FSL's annual water safety tour Wise on the Water in 2014 (24 places, 29 media) the media coverage of the TV show was very good. The awareness of lifeguard education and water safety issues was increased. New openings are needed for promoting water safety attitudes. Entertainment seems to be a way to reach especially young people. Measurement tools need to be improved for evaluating the effectiveness of the interventions.

675 BUILDING CAPACITY FOR INJURY RESEARCH: A CASE STUDY FROM UGANDA

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Background Despite the high burden of injuries, they have largely been overlooked in global health research. One of the reasons for this is that in many developing countries there is limited supply of trained human resources for addressing injury research. Uganda is one such country where two critical gaps in addressing the lifelong consequences of trauma, injuries and disability are the lack of trained human resources and the lack of data.

Objectives Through innovative model of sustainable development, the Johns Hopkins University-Makerere University Chronic Consequences of Trauma, Injuries and Disability in Uganda (JHU-MU Chronic TRIAD) program aims to strengthen research capacity on the long-term health and economic consequences of trauma, injuries and disability across the lifespan in Uganda.

Results Since 2012, the program has been working to 1) develop a core group of researchers focused on Chronic TRIAD at MU; 2) promote research around key national priorities for Chronic TRIAD; 3) establish a national forum on Chronic TRIAD; and 4) create a program for research on the lifelong impact of trauma, injuries and disability at MU School of Public Health (MakSPH). The program has had early success and for the first time there is new MPH track at the MakSPH that focuses on trauma, injuries and disability. Three cohorts have been enrolled in the 2-year TRIAD fellowship and the program is recruiting its fourth cohort of fellows. The program has offered training opportunities to students, faculty and staff at MU through short-term workshops, has established Uganda Injury Forum and has hosted two symposia to rise awareness and stimulate dialogue about the impact of TRIAD in Uganda.

Conclusions Through this program we hope to build local capacity that will be critical in bridging the gap and be a step toward addressing the burden of trauma, injuries, and disability in Uganda.