1997) and HIP scale (hyperactivity, impulsivity, attention). Respondents were 2nd and 3rd grade Zagreb high school students.
**Results** We have just finished the field work and still didn't analyse questionnaires. The results will be available in the next months.
**Conclusions** At the moment we can't give conclusions but the hypothesis is: Expressed masculine attitudes measured through 5 dimensions (Avoidance of Femininity, Self-Reliance, Aggression, Achievement/Status and Restrictive Emotionality) are significant predictors of risk for safety in the population of high school students aged 16 and 17 in the City of Zagreb.

## 936 PARENT'S EXPERIENCE WITH CHILD SAFETY RESTRAINT IN ROMANIA

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**Background** Child safety restrains are known as the most effective measures in protecting children from severe injuries and death while travelling in a car. Little is known about the Romanian rates of child safety restrains as the legal requirements are new and there is little enforcement.
**Methods** An observational study on child safety restraint use was conducted in Cluj-Napoca, Romania, between 2013 and 2014. Child restraint and parent surveys were conducted at 38 schools and kindergartens and 3 commercial areas, to explore the use of safety restraints. Drivers were asked about their knowledge and attitudes towards restraint legislation and safety behaviour. A total of 892 children were observed and 533 (69.4%) drivers approached responded to our survey.
**Results** Of the total number of observed children, 67.4% were travelling in some type of restraint. One third of the children were registered as being properly fitted (38.3%). More than two thirds of the drivers approached (n = 348, 68.4%) had knowledge about the existence of child safety restraint legislation. Among parents who did not use a child safety restraint, low use was attributed to lack of awareness and knowledge (49.4%) followed by being aware but choosing not to (27.9%), financial reasons (12.7%) and the seat being in the other car (10.1%). They were also asked to give examples of what would motivate them to use child restraints for their children and 26.6% indicated that a better law would increase the use, while 11.4% acknowledged that free availability will determine them to use restraints.
**Conclusions** Parent drivers could benefit from proper knowledge on the importance of and how to correctly use child safety restraints, as few children were properly restraint in our sample population. The majority of parents had some information on child safety restraint use and were aware that they are important, yet a large proportion of parents were not using restraints, therefore raising awareness actions are much needed.

## 937 PARENTAL EDUCATION AND CHILDHOOD INJURIES: SCOPING REVIEW PROTOCOL

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**Background** All around the world, injuries in childhood have an important impact on individual and population health. Childhood unintentional injuries are a leading cause of death globally among children and young people aged 0–17 years. The latest updates on the Global Burden of Diseases shows that injury is the fourth leading cause of deaths among children below 15 years of age. Child mortality due to injury is a public health problem internationally and in Europe. Socioeconomic position inequalities in childhood injuries are well known, but there is less information on how child mortality by injuries is socially patterned by parental education. There is a need to evaluate published evidence.
**Methods** Using Arksey and O'Malley's and Levac et al methodological frameworks for scoping review methodology as a guide, our scoping review of published literature begins by searching several databases: PubMed, Scopus, the Cochrane Library, the Cumulative Index to Nursing and Allied Health Literature (CINAHL), PsycInfo and the Educational Resources Information Centre (ERIC) and web of science. A possible research question will be: What is known from the existing literature about the effect of parental education on childhood injuries? The scoping review will consider all study designs including qualitative and quantitative methodologies. Bibliographic data and abstract content will be collected and analysed using a tool developed iteratively by the research team.
**Results** This study will provide a broad overview of the research literature specific to differences in socioeconomic inequalities in childhood injuries, measured by parental educational attainment. Potential gaps in the research on the possible effect of parental education on childhood injuries will be identified, and thus, the results will inform future research directions.
**Conclusions** The findings of this scoping review protocol will be used to determine the evidence coming from the research literature about the relationship and influence of parental education (mother and/or father education) in the frequency of childhood injuries. We will disseminate our findings through the presentation in the 12th World Safety Conference, as well as through articles published to generate key messages most relevant.

## 938 A JOURNEY FROM PEDESTRIAN SAFETY INTERVENTION TO FIRST INTERNATIONAL SAFE SCHOOL INITIATIVE ATTEMPT

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**Background** The 2nd Global United Nation Road Safety Week launched in 2013 with the theme on pedestrian safety. This was followed by the 3rd Global United Nation Road Safety Week in 2015 with the theme on children safety. In conjunction with these global campaigns run locally, a pedestrian safety intervention was launched for the safety of the school community comprising students, teachers, staffs and parents on May 11, 2013
**Methods** A pedestrian safety intervention was initiated to segregate the vulnerable road users (pedestrians) from the traffic by building a Covered Pedestrian Walkway (277 feet long x 7 feet width) by Safe Kids Malaysia Universiti Putra Malaysia with funding from Industries (FedEx and Global Alliance of NGOs on Road Safety). This initiative bridged the industries and community.

**Results** The first output is a research to implementation initiative by a Knowledge Transfer Program on pedestrian safety from Safe Kids Malaysia research output on pedestrian safety. The outcome is an attempt by the school institution to apply to be designated as the First International Safe School in Malaysia within the Safe Communities Framework in 2015. 1178 Children, 70 Teachers, 8 Staffs and 870 parents are using the pedestrian walkway and this has reduced their risk on road by removal of hazard.
**Conclusions** The dream impact we are exploring for this International Safe School movement leading towards First International Safe Community in Malaysia. We hope this will yield a reduction in traffic crashes and injuries involving child pedestrians in this community.

## 939 ACCIDENTAL INJURY PREVENTION IN COMPREHENSIVE SCHOOL IN FINLAND

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10.1136/injuryprev-2016-042156.939

**Background** All pupils participating in education are entitled to a safe learning environment. The Health Care Act (1326/2010) obliges comprehensive schools to monitor health and safety of school environments and well-being in learning communities every three years.
**Methods** Health and welfare promotion in schools and educational institutions has been monitored by the National Institute for Health and Welfare and the Board of Education since 2006. In 2013 data were collected nationally using a form addressed to headmasters of Finnish comprehensive schools (N = 2734). The response rate was 74% (N = 2022). The topics covered also accidental injuries at school, accidental injury prevention, and safety promotion.
**Results** Inspection of health and safety of school environments and well-being in learning communities provides valuable information about the safety situation in the schools and their surroundings. One in four schools (24%) reported either that they did not know whether an accidental injury risk assessment indoors had been part of the inspection or that these issues had not been considered in the inspection. About three in four schools (76%) had taken into account indoors risk locations for accidental injuries.

One in three schools (33%) did not know whether an accidental injury risk assessment outdoors had been included in the most recent inspection or not. Accidental injury risks had been assessed in 68 per cent of the schools, and outdoors safety was found deficient in 28 per cent of the schools.
**Conclusions** Multiprofessional inspection provides valuable information about school indoors and outdoors conditions, school surroundings, and safety at school trips. Most schools had paid attention to accidental injury prevention and safety both indoors and outdoors. However, a significant part of the schools did not monitor the risk of accidental injuries indoors or in the school yard.

## 940 PILOT MODEL FOR CHILD RESTRAINT USE IN CAR IN THAILAND: A CASE STUDY OF KHON KAEN PROVINCE

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**Background** Road traffic accidents is the second most common cause of death among Thai children after drowning. There is very little use of child restraint in car in Thailand. Therefore, we were established the promotion of child restraint use among Thai family during postpartum period.
**Objectives** To explore attitudes,normative beliefs and intention for child restraint used in Thai family
**Methods** This qualitative study was conducted during November 2014 to April 2015 at Khon Kaen Hospital. The volunteers are 30 Thai parents of postpartum with healthy infant who received healthcare information and use their cars on a daily basis. The process of implementation consists of the practical training in the use of child restraint to volunteer after birth and group meeting every 2 months. Interviewing data were collected at 6 months after training to identify attitudes normative beliefs and intention to use child restraint
**Results** 90% of participating parents used the child restraint continuously and correctly. The reasons for using the child restraint were: confidence that their children will be safer than carrying their children on their lap in the car,having more concentration to drive the car, muchmore comfort when the mothers have to drive the car alone. While the intermittent a child restraint used groups, their comments were inappropriate to use child restraint due to the children were hot, crying and refusing, travelling at long distance, no child -parents bonding by the separated car seat, influence on decision by the old age people in families who believed that holding baby by parent were safer than using child restraint. the number of peoples in their families and the size of their car , but soon they found technique to solve the problems and shared the technique among the group.Next steps,we are going to advocate for child restraint legislation, intensive public relation to raise more social awareness for safety of the children in the car.
**Conclusions** Participation of knowledge exchange in child restraint use in the car among participants can lead to improve and support good cognitive behaviour in the subgroup. However supporting the devices with low price, strong public relation, education program for mothers at ANC and well baby clinics and legislation are important factors that influence behavioural change.

## 941 PREVENTING CHILDHOOD INJURIES THROUGH EDUCATIONAL POSTERS

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**Background** Since 1991, Childsafe South Africa has gathered available statistics on childhood injuries and deaths presenting at Red Cross War Memorial Children's Hospital Trauma Unit in Cape Town, South Africa. This database serves as a surveillance system on childhood injuries and it is considered to be one of the biggest paediatric injury databases. The database has been systematically analysed for a large number of clinical and epidemiological studies as they relate to childhood injuries.

Childsafe South Africa collaborated with relevant stakeholders and developed educational posters that convey universal safety information and recommendations for families, crèches, and care givers, based on the statistics from the database.
**Methods** A series of three educational posters (1) "Growing Safely" (2008), (2) "Living Safely" (2010), and (3) "Travelling