**REDUCING CHILD INJURY: EVALUATION OF INTERVENTIONS TARGETING CHILDREN AND THE ADULTS WHO SUPERVISE THEM**

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DC Schwebel*. University of Alabama at Birmingham, USA

**Background** Unintentional injury is a leading cause of paediatric mortality worldwide. Behavioural strategies hold promise for prevention. Although behavioural strategies targeting children—primarily by changing children’s behaviours or decisions—are logical, strategies targeting adult supervision of children also show promise.

**Aims/Objectives/Purpose** Discuss behavioural research evaluating two child injury prevention strategies targeting children—safety with pet dogs and pedestrian safety—plus two strategies targeting adult supervisors—safety on preschool playgrounds and safety at swimming pools.

**Methods** Four studies, each using experimental pre–post designs, will be presented. Two studies included control groups. Multi-informant strategies (observational, behavioural, self-report) assessed child and adult behaviour pre- and post-intervention.

**Results/Outcome** All interventions showed promise. For example, The Blue Dog software, to teach children ages 3–6 about safety with pet dogs, yielded improved recognition of dangerous activities with dogs (F=4.17, p<0.05, but not improved behaviour). Similarly, a behavioural intervention targeting adult lifeguards improved lifeguard surveillance ($\chi^2(2)=8.53$, p<0.01) and reduced swimmers’ risky behaviours ($\chi^2(2)=10.63$, p<0.01).

**Significance/Contribution to the Field** Human behaviour is difficult to change, so behavioural interventionists must be creative, thorough, and persistent. Changing children’s behaviours can prove difficult given developmental limitations of children’s thinking and behaviour patterns. Adult behaviour may be more amenable to change, but is notoriously challenging given the power of long-standing behavioural habits. These data reinforce the promise of behavioural interventions to reduce paediatric injuries, as well as the challenges our field faces to develop creative, effective interventions targeting the multiple factors relevant to reducing child injury risk.