

464

ANALYSIS ON THE INCIDENCE AND RELEVANT RISK FACTORS OF SCHOOL VIOLENCE AMONG MIGRANT, LEFT-BEHIND, AND ORDINARY SCHOOL ADOLESCENTS IN CHINA

¹Jian Shuai, ²Liping Li, ³Yan Zhang. ¹The Traditional Chinese Medicine University of Jiangxi, China; ²Injury Prevention Research Centre, Medical College of Shantou University, China; ³The Second People's Hospital of Longgang, Shenzhen, China

10.1136/injuryprev-2016-042156.464

Background School violence is a leading cause of death among adolescents. A number of studies indicate that numerous influencing factors of violence in adolescents, but less is known about the role of migrant, left-behind, and ordinary (non migrant and non left-behind) school adolescents in China. The aim of this study was to examine the violence relevant risk factors in this population.

Methods This study choosing a stratified cluster sample method in proportion, 5,158 adolescents of seven grades, spanning 3th to 5th grade (four primary schools), 7th to 8th (four junior high schools), 10th to 11th (two senior high schools) involved in the investigation. Data on the occurrence of influencing factors were tested using binary logistic regression for their association between suffered and exerted violence among school adolescents.

Results The survey indicated that the incidence of suffered violence among migrant, left-behind, and ordinary school adolescents is 10.51%, 18.40%, 11.33%, and the incidence of exerted violence is 6.54%, 8.96%, 5.76% in the past six months. There are differences of the status of suffered violence among different types of school adolescents, left-behind school adolescents had high incidence of suffered violence ($P = 0.002$). The binary logistic regression revealed that male, poor family relationship, smoking, father's low educational, moderate and severe degree of being bullied were the risk factors of suffered violence in migrant children. Risk factors of left-behind children were moderate and severe degrees of being bullied. Risk factors of ordinary children were male, primary school adolescents, poor family relationship, moderate and severe degree of being bullied. Primary school adolescents, mother smoking, smoking, drinking, poor school performance, poor family relationship, moderate and severe degree of being bullied were the risk factors of exerted violence in migrant children. Risk factors of left-behind children were severe degree of being bullied, not single-child and father's occupation was manager. Risk factors of ordinary children were male, primary school adolescents, not single-child, poor family relationship, moderate and severe degree of being bullied.

Conclusion Our research indicates that numerous risk factors are related to suffer and exert violence among school adolescents. Prevention of school violence can best involve strategies that focus on individuals in known high-risk groups and strategies aimed at general reduction in population risk of violence.

465

SAFE SCHOOL ZONE PROJECT IN THE PHILIPPINES

^{1,2}Amalia C Rolloque, ^{1,2}Jesús J de la Fuente, ^{1,2}Peavy Denise A. ¹Safe Kids Worldwide Philippines, Philippines; ²National Institutes of Health, University of the Philippines-Manila, Philippines

10.1136/injuryprev-2016-042156.465

Background In the Philippines, many schools are prone to road traffic injuries because of the unsafe walking environment and because of the dangerous locations. Most of them are in the highways where vehicles come and pass by. Commonwealth

Elementary School, Quezon City, our pilot safe school zone project is one of them.

Objective To improve the walking environment of the Commonwealth Elementary School, Quezon City Philippines using the 3Es of the Safe Kids/FedEx Walk This Way, the pedestrian safety program. The Education, Engineering and Enforcement while putting permanent barriers and later use the school as Model for other schools in the country.

Results Safe Kids Worldwide Philippines organised the stakeholders meetings and conducted baseline data through the assistance of the volunteer parents of the students of Commonwealth Elementary School. Based on the baseline data the school has no enough lighting, over crowded, vendors are everywhere and no barriers that separate motorists and pedestrians. SKWP worked with the local government and other NGOs and improve the walking environment of the school by removing the vendors, installing lights at night and putting road signs. After improving the environment post data gathering was done and has seen the improvement of the walking environment of the school aside from the engagement of the whole population of the school and increasing the road safety awareness.

Conclusions Safe School Zone Project supports the UN Decade of Action for Road Safety 2011–2020. It can be easily replicated by other schools. Through making every school a Safe School Zone, we can reduce the number of road traffic injuries in the country.

466

REACHING OUT TO NEW PARENTS NEW COMMUNICATION TOOLS AND SOCIAL MEDIA

Ine Buuron. Consumer Safety Institute, The Netherlands

10.1136/injuryprev-2016-042156.466

Background New customer insights from various studies conducted over the last few years among new parents, compelled our Institute to change the strategy for child safety education. This led to the development of a new approach, which was deployed nation wide as of January 2015.

Methods A two-pronged approach of parents is developed consisting of communication efforts directly aimed at new parents and an additional process of cascading information through a wider network of local health professionals:

The direct communication efforts focus more intensively than before on tailoring communication messages to the information need of new parents (demand-driven). For that purpose an online platform for pregnant women is daily monitored, and campaigns and messages are being boosted on social media. New products are developed, including Youtube films, online tutorials, video press releases and apps.

The second track aims to increase the cascading of information through networks of professionals. The network of paediatricians and nurses in the local clinics is being extended by including local networks of midwives and maternity care service staff.

Results The previous approach was proven effective, as we managed to reduce injuries over the last decade by an average of 27%, saving the community nearly 6 million euro's every year. Our new approach was tested in 2 pilot regions in 2014. The nation-wide deployment is being monitored again. For 2015 we aim at reaching an average of 60% of all professionals, hoping to expand in the next few years.

Conclusions A new approach of reaching out to new parents was needed and developed. The results of the monitoring of the

new approach – which was deployed in 2015 – will be available early 2016.

467

FIREARM LEGISLATION CAN REDUCE FIREARM-RELATED INJURIES IN CHILDREN

AB Van As, NM Campbell, JG Colville, Y van der Heyde, A Numanoglu. *Red Cross War Memorial Children's Hospital, University of Cape Town*

10.1136/injuryprev-2016-042156.467

Background Violence and firearms are common features of South African society: the leading cause of death being those resulting from violence and homicide, with firearms being ranked as a leading external cause of non-natural deaths. The Red Cross Children Hospital is the only hospital in Africa with a dedicated trauma unit for children and has been dealing with gunshot wounds since 1991.

Methods A retrospective review of firearms injuries which presented to the Red Cross Children's Hospital between 1991 and 2011 was performed. Data recorded included the folder numbers; sex; date of birth; age; date of presentation; date discharged and in-patient stay; firearm type; number of shots; circumstances; injury sites; injury type; treatment; resulting morbidities and survival.

Results 441 children presented with firearm injuries during the review period. The results showed a steady decrease in incidence from 2001–2011. There was a greater incidence amongst older children and males. Contrary to studies in adults, the majority of children were shot unintentionally, as innocent bystanders and in crossfire. During the first decade (1991–2000) there was a gradual increase in incidence of children suffering from firearms injuries with time, peaking in the year 2000, while the number of gunshots gradually declined during the second decade (2001–2010). The study showed a decline in total firearm injuries in children since 2001, coinciding with the legislation introduced in 2004 and the changes in government opinion since 2000. Mortality also reduced significantly from the previous study (6% to 2.6%), as did the total number of in-patient days (1063 to 635).

Conclusions This study showed a significant reduction in the number of children presenting with a firearm-related injury after the implementation of the New Firearm Bill. Mortality rate and in-patient stay were also significantly reduced. This study shows the impact that the Firearms Control Act has had in terms of paediatric firearm-related injury and provides clear evidence of the important role civil society mobilisation can play in the prevention of fire-arm related injuries in children.

Child Maltreatment

Post Mon 1.8

468

PREVALENCE OF CHILD ABUSE AMONG CHILDREN AGED 11 TO 17 YEARS OLD IN COMMUNITY SETTINGS OF KARACHI, PAKISTAN

¹Maryam Lakhdir, ¹Masood Kadir, ¹Iqbal Azam, ²Yasmin Parpio, ³Uzma Khan, ⁴Junaid Razzak. ¹Department of Community Health Sciences, Aga Khan University, Pakistan; ²Department of School of Nursing and Midwifery, Aga Khan University, Pakistan; ³Department of Emergency Medicine, Aga Khan University, Pakistan; ⁴The Johns Hopkins Medical Institution, Maryland, USA

10.1136/injuryprev-2016-042156.468

Background Harsh disciplinary practices are considered common in developing countries. However, scientific evidence lacks to support this. Primary aim of this study was to determine the prevalence of different forms (physical, emotional maltreatment and neglect) of child abuse in Karachi, Pakistan.

Methods A cross sectional survey of 800 dyads (children ranging from 11–17 years old and their parent) were selected from 32 clusters of Karachi, using multistage cluster sampling between December 2014 to March 2015. A structured questionnaire adopted from International society of child abuse and neglect (International child abuse screening tool for parent and child). Prevalence of child maltreatment was estimated by mean child abuse score.

Results Mean score were 51.7 + 11.9 (child), 77.9 + 20.2 (mother) and 63.6 + 17.3 (father). Both parent and child responses revealed similar prevalence (43%) of child maltreatment. The mother's responses showed a prevalence of physical (42%), emotional (50%) maltreatment and neglect (5.4%) whereas, father's responses showed a prevalence of physical (39%), emotional (46%) maltreatment and neglect (9.7%). The child's experiences showed a prevalence of physical (49%), emotional (50%) maltreatment and neglect (57%). A substantial proportion of participants were exposed to at-least one form of maltreatment on mother (58%), father (54%) and child (74%) responses, of which all three maltreatment forms experienced by children were 4%, 9% and 31% on mother, father and child responses respectively.

Conclusions This study reflects hidden extent of child maltreatment and poly-victimisation in Karachi. Our findings provide evidence to raise public awareness about malpractices and highlight the need to develop positive parenting program.

469

PREVALENCE OF VIOLENCE AGAINST CHILDREN IN CHINA

¹Gao Xin, ²Zhu Xu, ¹Wang Linhong, ¹Jin Ye, ¹Duan Leilei, ²Robert Scherpbier. ¹National Centre for Non-Communicable Disease Control and Prevention, China Centre for Disease Prevention and Control, Beijing, 100050, China; ²United Nations Children's Fund UNICEF Office for China, Beijing, 100600, China

10.1136/injuryprev-2016-042156.469

Background Violence against children (VAC) prevention is the priority of public health; and to master the prevalence state and risk factors of VAC is the base to develop the prevention strategies. This study aimed to obtain the prevalence features and to find the risk factors of VAC in China, and provide basis and formulate the prevention strategies.

Methods The death data of VAC was from The National disease surveillance points system (DSP) during 2006–2012. There were 161 surveillance points in DSP distributed in all the 31 provinces in China. The total population in this system was more than 73 million. We analysed the data from DSP about children aged 0–17 died from violence (ICD-10: V01-Y89). The VAC hospital information was from The National Injury Surveillance System (NISS) during 2006–2013. This system included 126 hospitals from 43 surveillance points. We analysed the data from NISS about children aged 0–17 caused by VAC with the parameter of “intentional” injury.

Results The trend of death caused by VAC had declined overall; it was reduced to 0.52/100,000 in 2012 from 0.85/100,000 in 2006. The male VAC mortality was higher than female, and the rural was higher than urban. Blunt injury was the leading maltreatment injury (63.35%), followed by sharp injury (11.09%).