

## NOTES

- 1 Founder President Avoid Accident India.
- 2 The Motor Vehicle Act of India and rule amended in 1993 exempts Sikhs men wearing turbans and women from wearing helmets while riding motor-cycles and scooters.
- 3 Figures released by the Delhi Traffic Police
- 4 an activist who is challenging the government to enforce safety rules. He said similar moves to force women to wear helmets in Goa met with fierce resistance from female pillion passengers.
- 5 Jawed Habib Hair and Beauty Ltd is the leading player in the hair and beauty segment. <http://jhhairbeauty.com/profile.php>

## Child Maltreatment

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### 716 PARENTING TECHNIQUES & FACTORS ASSOCIATED WITH CHILD MALTREATMENT AMONG CHILDREN 11 TO 17 YEARS IN KARACHI, PAKISTAN

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

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**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. MLR was used to assess the association of factors with outcome.

**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. There is an interaction between parental exposures to childhood abuse and physical fighting with hard object among family members. Among children whom family always fight with each other and parents have exposure to childhood maltreatment, the mean estimated ICAST-Child score increases by 13.746 (95% CI: 7.193, 20.298). There is an interaction between age of mother and parental education. The estimated mean of ICAST-Child score increases 2.169 times for every 10 years increase in age of mother among children whom both formal have no formal school education as compared to children whom both parents have formal education.

**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.

### 717 TOWARDS A SAFE PARENTING IN FINNISH FAMILIES

Satu Keisala, Johanna Matikka. *The Federation of Mother and Child Homes and Shelters, Finland*

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**Background** A safe relationship between a child and his or her close adults has a significant impact on the child's future life. From the child's point of view the feeling of safety is created by sensitive parenting practices, close and positive interaction and responding to child's everyday physical and emotional basic needs. A child's safety in close relationships can be compromised as a result of different forms of violence and neglect. Recent studies confirm that many mothers and fathers in Finland still use violent and neglectful methods in their everyday parenting. Also exposing to domestic violence is harmful to the child's development.

**Objective** Kannusta minut vahvaksi! (Encourage me to grow strong) – project at The federation of mother and child homes and shelters is developing professional work in shelters, mother and child homes and their regional partners to help prevent neglect, abuse and corporal punishment. The project operates in three pilot areas (Turku, Lahti, and Oulu). The project also continues national awareness raising so that children's right to safety and non-violent childhood can be strengthened.

**Results** Corporal punishment in the home has been prohibited by law for over 30 years. During these decades the attitudes against corporal punishment have successfully tightened, but the practices towards positive and encouraging parenting methods are still only developing. The professionals working with children and families need more knowledge and better practices to recognise and intervene the harmful ways and to promote the positive ways in parenting.

The project has developed various materials for the professionals to support their work and continues educating different organisations and communities and co-developing with them.

**Conclusions** The Finnish parents need support and guidance in safe and positive parenting and parenthood. Every professional working with children and parents should promote positive interaction and safe childhood.

### 718 THE NATIONWIDE SURVEY OF CHILD AND SEXUALLY ABUSE IN THAILAND

<sup>1</sup>Orawin Vallipakorn, <sup>2,3</sup>Sakda Arij-ong Vallipakorn, <sup>3,4</sup>Adisak Plitponkarnpim. <sup>1</sup>Department of Obstetrics and Gynaecology, Faculty of Medicine, Ramathibodi Hospital, Mahidol University, Bangkok, Thailand, 10400; <sup>2</sup>Section for Clinical Epidemiology and Biostatistics, Faculty of Medicine, Ramathibodi Hospital, Mahidol University, Bangkok, Thailand, 10400; <sup>3</sup>Child Safety Promotion and Injury Prevention Research Centre (CSIP), Ramathibodi Hospital, Mahidol University, Bangkok, Thailand, 10400; <sup>4</sup>Department of Paediatrics, Faculty of Medicine, Ramathibodi Hospital, Mahidol University, Bangkok, Thailand, 10400

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**Background** Child abuse was top five rank causes of preventable premature death in Thai children. Many types of child injury were reported by campaign/law enforcement and nationwide policy such transport injury and other physical injuries (drowning and near drowning, falling, suffocation, bite and string, burn and struck by against). Child Abuse and maltreatment was a one problem of injury types that difficult to report and approach. As a tip of iceberg, a few cases were reported and usually fatal but these bring to the short term of social concern due to few

evidence. Finally there were not strategies to improve and cope with this problem.

**Methods** The National Injury Database (NPIRT) was developed and implemented. It included all types of injured children participated from 34 emergency services across country during 2010–2012 to solved this problem. The descriptive analytic of child injury surveillance such as age group, sex, pre-hospital factors and support, vital signs, GCS, mechanism and type of injuries included with child abuse components and outcome were included in this new database and analysed.

**Results** Of these 42,144 cases from NPIRT, The mainly interest was the incidence of child abuses that occurred 2,400 cases (5.7%), Male: Female 1.4: 1 and mean age 15.3 + 3.32 years. The death rate of child abuse was higher in male than female (1:100). 92% of children were injured mainly within their residential areas. Only two-third of abuse was transferred by ambulance. About 37% had prior communication with the referral hospitals and healthcare worker before transportation. 34% of children had initial first aid at scene and 29% were provided appropriately. The mainly mechanism of all child abuses were physical blunt injury (51%) followed by penetrating (5%). Most of common injuries were physical abuse (2,309 cases, 95%), and following with sexually abused (91 cases, 5%). The overall child abused death was 9 per 1,000 victims.

**Conclusions** The NPIRT included with child abuse information was provided as the nationwide comprehensive injury database of Thailand. It was a useful tool to identify the incidence all of death in Thai injured children. It can explore the causes of injury child death integrated with child abuse and child maltreatment information, especially sexually abuse and their association factors and high risk of injury mechanism that can incorporate to future preventive strategy.

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#### ENABLERS OF HELP-SEEKING AND PROTECTION FROM ABUSE FOR DEAF AND DISABLED CHILDREN: A QUALITATIVE STUDY

<sup>1</sup>Julie Taylor, <sup>2</sup>Christine Jones, <sup>3</sup>Audrey Cameron, <sup>3</sup>Deborah Fry, <sup>4</sup>Anita Franklin. <sup>1</sup>University of Birmingham, England; <sup>2</sup>University of Strathclyde, Scotland; <sup>3</sup>University of Edinburgh, Scotland; <sup>4</sup>University of Coventry, England

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**Background** Research internationally has highlighted the increased vulnerability of disabled children to abuse and the often poor response of services. Very few studies, however, have explored disabled children's experiences of help-seeking. This paper reports selected findings from a study, commissioned by the National Society for the Prevention of Cruelty to Children, examining the help-seeking experiences of deaf and disabled children who had been abused. The paper focuses on enablers of help-seeking and protection from abuse

**Methods** The research aimed to better understand the experiences of abused deaf and disabled children and identify enablers and barriers, in terms of disclosure, recognition and response, within the child protection system. Interviews were conducted with 10 children and adults abused in childhood, including some who came into contact with child protection services and some who did not. The definition of a referral having been made and recorded by the relevant statutory services was based on the participant's recollection; this was not something we were in a position to verify. Our starting point was always to acknowledge the participant's perception of events. A 'dialogic approach' was used

to promote participant empowerment in giving informed consent.

**Results** Four key enablers were identified by participants. These include children's resistance to abuse, the capacity of adults to detect abuse and respond to disclosures, supportive relationships or circumstances which facilitate disclosure and, for Deaf children, access to registered interpreters.

**Conclusions** The implications of the findings for policy and practice are highlighted and recommendations include: education and awareness raising amongst practitioners, children and parents; addressing deaf and disabled children's social isolation; providing comprehensive support services that address the needs of the child holistically; ensuring the voice of the child is heard; routine access to registered interpreters for Deaf children within mainstream and specialist services and measures to address disability at a local and institutional level.

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#### ED PHYSICIAN AND NURSE EXPERIENCE IN DIAGNOSING AND REPORTING PAEDIATRIC ABUSE-RELATED TRAUMA IN CHINA

<sup>1</sup>Huiping Zhu, <sup>2</sup>Jianbo Shao, <sup>3</sup>Jin Peng, <sup>4</sup>Chuanhua Yu, <sup>2</sup>Wenyan Yao, <sup>5</sup>Hongyan Yao, <sup>3</sup>Junxin Shi, <sup>3</sup>Huiyun Xiang. <sup>1</sup>School of Public Health, Capital Medical University, Beijing, the People's Republic of China; <sup>2</sup>Wuhan Children's Hospital, Wuhan, Hubei, the People's Republic of China; <sup>3</sup>Centre for PaediatricTrauma Research, the Research Institute at Nationwide Children's Hospital, Columbus, Ohio, USA; <sup>4</sup>School of Public Health, Wuhan University, Wuhan, Hubei, the People's Republic of China; <sup>5</sup>Office of Epidemiology, Chinese Centre for Disease Control and Prevention, Beijing, the People's Republic of China

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**Background** Child abuse and neglect are serious problems around the world. However, little research has been done in China to describe the burden and characteristics of abuse-related trauma among Chinese children. It also remains unknown about experience of emergency department physicians and nurses in treating and reporting suspected abuse-related trauma. The objectives of this study were to 1) examine how Chinese physicians and nurses identify and report physical child abuse; and 2) examine whether they are aware of any official policies and guidelines regarding physical child abuse.

**Methods** We conducted a questionnaire survey among physicians and nurses who work at emergency departments (EDs) of 15 large children's hospitals in China. The questionnaire included demographic information, knowledge and past experiences of identifying and reporting physical child abuse and abusive head trauma, standardised practice protocols, and perceived major obstacles of reporting physical child abuse.

**Results** Our study collected 304 completed questionnaires, 154 from physicians and 150 from nurses. Physicians and nurses reported that 40.1% of them encountered children in their practice whom they suspected were a victim of physical child abuse. However, only 10.2% asked caregiver and noted in the medical records and 9.9% reported the child abuse. The majority of physicians (86.3%) and nurses (86.0%) were not aware of any standardised protocol for identifying and reporting physical child abuse in China. Only 3.6% of ED physicians and nurses have ever received training in how to identify and diagnose physical child abuse.

**Conclusions** Abuse-related trauma is likely underreported and there is a great need to train medical care professionals in diagnosing and reporting child physical abuse in China.