

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.

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

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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.

720 ED PHYSICIAN AND NURSE EXPERIENCE IN DIAGNOSING AND REPORTING PAEDIATRIC ABUSE-RELATED TRAUMA IN 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.