Results Out of the 342 children from the rural area and 325 children from the urban area, 89 and 56 children were injured respectively in the last one year. The injuries resulted in a temporary impairment of 12.4% and 1.8% of children in rural and urban area respectively. Similarly, 11.2% of them in rural and 1.8% in the urban area suffered from some form of permanent disability. The children also missed their school ranging from 1 to 90 days due to injury. In 22.2% of injury cases in rural and 14.3% in the urban area, either of the parents had lost their workdays to take care of the injured child.

Conclusion The impacts of unintentional injuries were higher in rural areas, probably because of delays in seeking health care for the injury and lack of better health care facilities in the rural area.

Learning Outcomes There is a need of contextual and cost effective childhood injury prevention program to reduce premature mortality and morbidity (SDG 3.4).

58.004 PREVENTING CHILDHOOD INJURIES IN UGANDA – DEVELOPMENT OF A CHILD SAFETY KIT

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Background Globally, nearly 650,000 children lose their lives to injuries every year. Injuries occurring in and around the home to children under 5 years (burns, falls, drowning, poisoning) can be prevented through providing safety equipment e.g. barriers, childproof containers. A number of studies have shown significant reductions in child injuries following this approach but all studies have thus far been conducted in high-income countries. Our research aims to reduce unintentional child injuries among under 5’s in Jinja, Uganda through the provision of a child safety kit and parental education.

Methods This study is guided by a community-based participatory research (CBPR) approach utilizing mixed methods. A quantitative retrospective review of hospital data is combined with a community-based household survey and risk assessment checklist tool to provide incidence and risk factor data. A deeper exploration of attitudes and perceptions of injuries in the home along with participatory workshops is provided through focus-group discussions and Photovoice.

Results Data collection is currently underway and will be analysed by March-June 2020.

Conclusion This formative research will contextualize the problem and develop an intervention package including the child safety kit, educational material, parent training workshops and an awareness campaign. The findings will inform the development of a culturally appropriate/affordable safety kit and provide accurate incidence rates on which to base sample size calculations for an intervention trial to measure behaviour change and reductions in injuries.

Learning Outcomes The results will have significant implications for other low-income countries both in terms of research methodology and effectiveness information.