in Austria, which means a total market share of 33% of all bikes sold (2016: 22%).

E-bikes are above all a good alternative for motor vehicles in city traffic.

The KFV (Austrian Road Safety Board) is currently dealing with questions about the safety of e-bikes.

**Methods** In our studies the following methods were applied:

1. analysis of existing accident data on e-bikes (statistical data, media analysis)
2. on-site observations (e.g. helmet wearing quota for cyclists, collection of speed differences of selected bike types, …)
3. questionnaire survey among 101 e-bike users concerning the comfort and safety of different bike types
4. survey on the subjective safety of e-bike users and e-bike non-users

**Results** Results showed among others that...

1. … in 2018 1.025 injured and 17 killed e-bike cyclists showed up in statistics
2. … helmet wearing rate of e-bike cyclists was 44% (compared to 25% of conventional bikes)
3. … the average speed of pedelecs was 21.4 km/h (compared to 18 km/h of conventional bikes)
4. … pedelec drivers feel safer and more comfortable than conventional cyclists

**Conclusion** Based on the results, tips for safe driving with e-bikes were drawn up and recommendations for action to increase the safety of e-bike users were derived.

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**Abstracts**

**P5.009 PREDICTORS OF PSYCHOLOGICAL AND FUNCTIONAL OUTCOME FOLLOWING TRAFFIC INJURIES: A SCOPING REVIEW**

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**Background** Each year tens of millions of individuals are injured or disabled as a result of Road Traffic Crashes (RTCs). In addition to immediate death, there is an increased risk of subsequent death, ongoing physical disability, psychological issues, and reduced overall health related quality of life following RTCs. This study aims to identify the factors reported in the literature that are associated with adult trauma patients’ morbidity following an RTC.

**Methods** A scoping literature review was conducted. Peer-reviewed articles were retrieved from MEDLINE/PubMed, EMBASE, and CINAHL.

**Results** This literature review identified six categories of variables being used in studies that explored predictors and factors associated with physical and psychological morbidity following RTCs. Five of the categories represented independent variables: (i.) injury characteristics and hospital predictive factors; (ii.) demographic factors; (iii.) family and social support; (iv.) compensation system process and fault in the RTC; (v.) pre-injury health status; (vi.) the sixth category was used to represent the range of (vi.) psychological and functional outcomes.

**Conclusion** These findings highlight the multiple and diverse contributors that influence person outcomes following an RTC. These factors are intrinsic and extrinsic and commence from the time of injury as well as highlighting the importance for ongoing support after acute care discharge to enable a quick return to optimal wellbeing.

**Learning Outcomes** Research examining RTC outcomes must integrate information about the crash response and health care system whilst simultaneously measuring other factors to appropriately quantify the relative contribution of each variable to psychological and functional outcomes.

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**P5.010 RED LIGHT RUNNING RATE IN THE KUMASI METROPOLIS OF GHANA**

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In Ghana, approximately 12% of all road traffic fatalities occur at junctions and the cause of these crashes, as assigned by the traffic police, include signal violation. Red light running place the violator and other road users at risk of road traffic crash. The main aim of the research work was to undertake baseline study to establish the current level of red light running through a direct observation survey and determine the risk factors associated with traffic light violation in the Kumasi Metropolis of Ghana. An uninterrupted road side observational survey was conducted at ten (10) signalized intersections using pro-forma checklist. A binary logit model was employed to determine the risk factors associated with traffic light violations. Overall, drivers were observed running red in 35% of all the red phases observed. From the model, factors which influence red light running include the age and gender of the driver, presence of a passenger in the vehicle, vehicle type, junction type, cycle length of the signal and queue length. There is a need for public awareness campaigns on the dangers of red light running. The education on red light violation must be accompanied by sustained enforcement of the traffic law by the traffic police to help reduce the violation of red light. Deployment of automatic red light cameras will also go a long way in ensuring enforcement at all times.

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**P5.011 EVALUATION OF INTERVENTIONS TO PROMOTE CHILD RESTRAINT USE AMONG KINDERGARTENERS IN CHINA**

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**Objectives** To evaluate the effectiveness of parent-based child restraint system (CRS) intervention so as to promote the parents’ knowledge, attitude, and use of CRS.

**Methods** We conducted a randomized trial with cluster sampling in 8 selected kindergarteners in Shantou and Chaozhou, China (4 from each city). Parents were randomly assigned to receive 1 of the 4 conditions: education intervention, behavioral education intervention, biomechanical visualization intervention, or control.

**Results** Six months after the intervention, multivariate logistic regression models showed that child gender of boy, parents’