Transportation safety

0035 RIDE SAFE REBOOT

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10.1136/injuryprev-2021-SAVIR.19

Statement of purpose The goal of the Ride Safe Pilot Program is to reduce motor vehicle crash (MVC) injuries among American Indian/Alaskan Native (AI/AN) children by promoting child safety seat use. Initially developed in 2003, the Ride Safe Pilot Program was revised and implemented in collaboration with tribal partners and the Phoenix Area Indian Health Service Division of Environmental Health.

Methods/Approach The Ride Safe Program utilizes a community-based approach coupled with the following to achieve its goal: 1.) Distribution of a child passenger safety (CPS) curriculum tailored for AI/AN communities; 2.) Provision of child safety seats; and 3.) Completion of evaluation activities.

Results The program was implemented in six tribal communities in Arizona, California, and Nevada. A total of 657 car seats were acquired and 75% were distributed.

Conclusions The pilot project is a promising community-based complement to evidence-based CPS activities aimed at addressing MVC. At the start of the initiative, a majority of the participating programs had below 50% CPS usage rates; unfortunately due to COVID-19, the sites were not able to collect post observational data. A positive outcome is the development of the COVID-19 CPS protocol to assist in the next cycle of the pilot program.

Significance In 2017, MVCs were the leading cause of death for AI/AN ages 5–24, with the youngest family members disproportionately affected. These losses are even more tragic because the majority of MVC injuries and deaths are preventable through the proper use of a child safety seat or seatbelt. Ride Safe can be easily replicated in any community to reduce MVC-related injuries among children. This serves as a testimony to the power of simple, well-informed, community-based models intended to reduce MVC injuries among children.

Pediatric injury

0037 PREVENTING UNINTENTIONAL CHILDHOOD INJURIES IN UGANDA – DEVELOPMENT OF AN INTERVENTION TOOLKIT

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10.1136/injuryprev-2021-SAVIR.20

Statement of purpose Globally, thousands of children lose their lives to unintentional injuries every year. Injuries occurring at home to under 5s (burns, falls, poisoning) can be prevented

through providing safety equipment e.g. barriers and child-proof containers. Although a number of studies have shown significant reductions in child injuries most have been conducted in high-income countries. This research aims to reduce unintentional home injuries among under 5s in Jinja, Uganda through the provision of a toolkit.

Methods/Approach This study is guided by a community-based participatory research approach utilizing mixed methods. A quantitative retrospective review of hospital data was combined with a community-based household survey and risk assessment tool to provide incidence and risk factor data. An exploration of perceptions of injuries, risky behaviours and practices in the home was provided through focus-group discussions and Photovoice.

Results Preliminary analysis of ongoing data collection has been done. Hospital record review of 225 cases revealed that 34% of injuries were due to burns, 45% were seen in outpatients and 39% admitted to the wards. The survey of 615 households indicated that there had been 879 injury events amongst under 5s in the preceding 12 months. The majority occurred within the compound of the home (57% fall-related; 23% burn injuries). From the qualitative exploration, falling in pits, open fireplaces and off beds were the major causes of injuries.

Conclusion This formative research contextualises the problem and looks to propose an intervention toolkit including educational material, parent training workshops, awareness campaigns, home visits and environmental modifications. The findings will inform the development of a culturally appropriate/affordable set of interventions and provide accurate incidence rates for a future intervention trial.

Significance The results will have significant implications for low-income countries in terms of research methodology and effective information in mitigating injuries among under 5s.

Firearms

0038 PATTERNS OF NONFATAL GUN USE IN INTIMATE PARTNER VIOLENCE: EVIDENCE FROM PROTECTIVE ORDER CASEFILES

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10.1136/injuryprev-2021-SAVIR.21

Statement of purpose In the context of intimate partner violence (IPV), perpetrators may use guns to injure, scare, and/or manipulate their partner. Gun threats are associated with increased PTSD symptom severity, sleep loss, and heightened fear among IPV survivors. Gun threats are also an indicator for homicide risk. Despite the negative consequences associated with gun related IPV, little research documents the prevalence and nature of these nonfatal behaviors. Fortunately, state and federal law restrict gun access for IPV perpetrators in qualifying domestic violence protective order (DVPO) cases. Using data from DVPO cases, we sought to document the extent to which perpetrators (DVPO defendants) engage in gun related IPV.

Methods/Approach We used observational data from DVPO casefiles and hearings that were collected for the CASE IPV study, a North Carolina-based project that used a

representative sampling strategy to examine civil protective order processes and outcomes.

Results In our sample ($n=406$), there was evidence of gun related IPV in one out of four cases ($n=101$, 25.6%). Specifically, perpetrators had verbally threatened to harm their partner with a gun (22%, $n=84$), displayed or discharged a gun in a threatening manner (10%, $n=42$), or physically used a gun to shoot at or hit a survivor in (0.6%, $n=3$). More severe abuse (including physical abuse, sexual abuse, stalking, etc.) was associated with increased odds of gun related IPV (OR = 2.01, 95% CI: 1.5, 2.7), controlling for defendant age, race, county rurality, and marital status.

Conclusions Survivors of IPV who seek protective orders experience high levels of violence, and the incidence of gun related IPV in this sample was disturbingly common. Furthermore, gun related IPV co-occurs with other severe abusive behaviors.

Significance We must ensure that existing legal mechanisms to restrict abuser access to firearms for DVPO cases are properly implemented and enforced.

Pediatric injuries

0039 DO MOTHERS WITH HEALTHIER LIFESTYLES MAINTAIN SAFER HOME ENVIRONMENT FOR THEIR TODDLERS?

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10.1136/injuryprev-2021-SAVIR.22

Statement of purpose The home is a primary setting for toddlers' injuries. Home safety and characteristics of a family's daily life have scarcely been studied. This study aimed to examine the association between a safe home environment for toddlers and the variables in their mothers' daily healthy lifestyle.

Methods/Approach This was a cross-sectional study, during 2019 in Israel. Mothers of toddlers aged 1–4 years old ($n=100$) completed a questionnaire, including a safe home checklist (BETEREM), a healthy lifestyle questionnaire (HLPCQ), and socio-demographic information. Questionnaires were collected through two community mother-child enrichment centers.

Results Mothers reported having a moderately safe home environment and low daily health habits (mean 58.9, 34.1 respectively on 0–100 scale). Mothers with higher safe home environment score reported less child injuries at home ($p<0.01$); additionally, mothers with higher healthy lifestyle score reported less child injuries at home ($p<0.01$). Safe home environment score is positively associated with mothers' daily healthy lifestyle score ($r=0.791$, $p<0.01$). A hierarchical regression demonstrated that of the five HLPCQ scales, mental balance predicted 79% of home safety; moreover, a mother's religious definition predicted 7% ($p<0.05$).

Conclusion Home safety is associated with mothers' daily healthy lifestyle. To promote child home safety there is a need to further study differences in parents' and in families' daily healthy lifestyle in diverse populations.

Significance Home safety interventions for parents of toddlers need to be embedded with general daily healthy lifestyle and health promotion initiatives (sleep, stress management, diet etc.).

Youth violence

0040 'BULLYING OR NOT BULLYING...IT PUTS US IN AN UNCOMFORTABLE SITUATION': CHALLENGES AND FACILITATORS TO IMPLEMENTING A STATEWIDE ANTI-BULLYING POLICY

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10.1136/injuryprev-2021-SAVIR.23

Statement of purpose Anti-bullying policies targeting bullying behavior in schools are now adopted across all 50 states; however, their effectiveness depends on their implementation. This study illustrates how Maine schools implemented their district's anti-bullying policies and presents facilitators and challenges to implementing these policies.

Methods/Approach Semi-structured interviews were conducted among 22 school personnel involved in implementing anti-bullying policies (administrators, counselors, teachers, and support staff). These 22 school personnel came from six school districts selected from four rural and two urban schools representing the children's cabinet regions of the state. Interview transcripts were analyzed using content analysis methods. Respondents were asked to recount how bullying allegations are reported, their experience investigating bullying allegations, how safety measures and responses plans are implemented, and the content of the anti-bullying training provided.

Results Implementation of anti-bullying policies varied across schools. Respondents provided examples of how school district resources assisted in establishing bullying reporting systems and creating a safety measures for all parties involved. Other resources such as school resource officers and community partnerships supported local policy implementation. Respondents discussed lack of funding to carry out the policy, time constraints to investigate bullying allegations, and limited training to conduct investigations as challenges to upholding the policy requirements.

Conclusions The challenges and facilitators to implementing anti-bullying policies reported by school staff identify where policy implementation practices can be improved to reduce bullying victimization.

Significance This study highlights how the challenges and facilitators to implementing statewide policy enhances our understanding of the potential connections between anti-bullying policies, policy implementation, and bullying incidents.

Occupational safety

0041 COPING AND WELLBEING FOR EMERGENCY DEPARTMENT WORKERS WHO EXPERIENCE WORKPLACE VIOLENCE

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10.1136/injuryprev-2021-SAVIR.24

Statement of purpose The impact of workplace violence (WPV) to emergency department (ED) workers' psychological well-being and coping is not known. Our study purpose was to describe coping and wellbeing of ED workers who have experienced WPV. The theoretical framework guiding our research was Neuman's Systems Model, specifically the constructs of