Use of child restraints

A pilot program in Aboriginal Community Controlled Health Services

Lisa Keay, Kate Hunter, Marilyn Lyford, Winston Lo, Kathleen Clapham, Rebecca Ivers
Background

Road traffic injuries - leading cause of child death in Australia. In 1 year:

- Fatalities: 36 in 0-4 yo; 25 in 4-8 yo *
- Serious injuries in approx 400 children
- Aboriginal child passengers
  - 3 x more injuries
  - 2½ x more hospitalisations

Child restraint use reduces injury risk in the event of a crash - yet use of restraints is low in Aboriginal communities

* Fatal road crash database (2006)

How to increase use of child restraints?

- Educate parents on:
  - how restraints work
  - the ‘right restraint for age’
- Involve peers & community
- Provide hands on demonstration
- Subsidise & distribute restraints

STAGE 1
Consult with members of an urban Aboriginal community on issues surrounding use of child restraints for children when travelling in cars

STAGE 2
Develop & implement a program to facilitate & encourage the correct use of child restraints, & evaluate its acceptability
**Methods**

**STAGE 1:** consult with members of an urban Aboriginal community on issues surrounding use of child restraints for children when travelling in cars

**APPROACH**
- Series of focus groups conducted in 2 ACCHS
- Interviews & meetings with staff of health services
- Presentation at staff meeting
- Workshop with staff about promoting safe travel in cars

→ *Development of a program for Stage 2*
Methods

STAGE 2: develop & implement a program to facilitate & encourage the correct use of child restraints, & evaluate its acceptability

APPROACH

• Staff capacity building
  • Individual training & provision of program manual
  • Restraint fitting training
  • Staff training at early childhood education service
  • Co-host sessions with staff
• Provide subsidised child restraints & booster seats
Focus groups

<table>
<thead>
<tr>
<th>Date</th>
<th>Group location and composition</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/9/2010</td>
<td>AMS WS; 3 men, 9 women</td>
</tr>
<tr>
<td>8/9/2010</td>
<td>Tharawal; 3 women from Indigenous Childrens Program</td>
</tr>
<tr>
<td>26/10/2010</td>
<td>Tharawal: 13 women who were members of art group</td>
</tr>
</tbody>
</table>

All sessions audiotaped, transcribed & thematic analysis conducted
Themes: opinions, attitudes & beliefs

- Lack of awareness of the law & confusion about the age & type of seats
- Adults don’t think of safety on day to day journeys, perception that short trips are safe
- Confusion re: the right seat for a child eg. age vs weight
- Lack of financial resources, cost of seats
- Large families
- Children not wanting to use seat every time, unplanned passengers, attitudes of other carers
- Problems with older vehicles, taxis
Staff consultation & planning

- Need clear information
- Hands on demonstration will work well
- Many families use transport services as well as a mix of private cars, taxis, many don’t own vehicles
- High level of interest in the project
- Anticipated some problems engaging with families on this issue
Program Development

Education & motivation
- Personal approach to clients
- Posters, printed material
- Policy on transport of clients
- Presentation at community days; staff training & workshops
- Interactive material (height charts)

Distribution & installation
- Demonstration of seats to families
- Selection of forward facing child restraint & a belt positioning booster seat
- Supply child restraints/booster seats at subsidised $50 to client
- Staff trained to be able to install the child restraints correctly
- All staff familiar with appropriate child restraint for age
- Integrated themes of correct use & right seat for age into parenting programs
- Program manual provided to all staff
- Educational DVD
- Print material
- Poster boards
- Demonstration seats
FORWARD FACING CHILD RESTRAINT – up to at least 4 years

- Correct use of forward facing child restraint
- Too small for booster seat

- Educational materials
Correct use of lap/sash belt with booster

School aged child too small for lap/sash

BOOSTER SEAT – up to at least 7 years

Educational materials
Selection & installation of child restraints

- Full day course by Mobility Engineering (agency responsible for training & certification of restraint fitters in NSW)
  - 14 staff trained at Tharawal
  - Well received by staff
  - Increased confidence in practical skills
  - Certificates supplied to all staff
  - Tharawal has booked additional workshops (funded by RTA)
Kids & Traffic Early Childhood Road Safety Education (Macquarie University & RTA) delivered a 2-hour staff training workshop to 7 staff at Ooranga Wandarrah Aboriginal Childcare Service, Airds.

**Confidence in delivering material (post workshop)**

- **To parents**: 2 (Very Confident) 5 (Confident)
- **To children**: 1 (Very Confident) 6 (Confident)
Uptake subsidised restraints

Parent pays director $50

Order placed via George Institute

Distributed by centre staff

Types of seats (30 offered to each service)

Tharawal Aboriginal Corporation: 8 booster seats, 13 forward facing child restraints
AMS Western Sydney: 2 booster seats, 10 forward facing child restraints

Supplied at cost to client of $50
Retail price ~ $150 - 250
Program Evaluation
Semi-structured staff interviews (n=13)

- Child passenger safety is an important issue within health service
- Enthusiastic support for the program particularly ‘hands-on’ demonstration & print material
- Staff benefited from training with greater knowledge & practical skills in selection & fitting of child restraints
- Subsidised seats were considered a critical part of the program
- Need dedicated resources to sustain this program including a staff member who can champion the program
- There are challenges in engaging with families on this issue
- A program to promote passenger safety needs to include transport services as well as personal cars
Summary

- This pilot project developed a program to promote child restraint use within Aboriginal Community Controlled Health Services
- Program was feasible & acceptable within this setting
- Impact on child restraint practices needs to be evaluated in a larger scale prospective trial
Acknowledgements

Funding: 2009 RACGP/CONROD (Centre of National Research on Disability & Rehabilitation Medicine Research) Fellowship

Collaboration partners:
- Tharawal Aboriginal Corporation
- Aboriginal Medical Service Western Sydney
- The George Institute for Global Health, University of Sydney
- Woolyungah Indigenous Centre University of Wollongong
- Royal Australian College of General Practitioners
- Kids & Traffic Early Childhood Road Safety Education Program, Macquarie University
- Roads & Traffic Authority

or more info: Dr Lisa Keay lkeay@george.org.au