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Palestinian Managers' Views and Practices Regarding the Prevention of Home Injuries: An Explorative Qualitative Study

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Introduction

Injuries are one of the leading causes of mortality, morbidity and disability in children (Alonge & Hyder, 2014). These injuries place a major burden on countries, particularly low-income ones (World Health Organisation (WHO), 2008. (According to the Palestinian Ministry of Health (MOH) annual report in 2016 unintentional injuries are one of the leading causes of death among young children.

There are differences in international plans for addressing the prevention of unintentional injuries (Alonge & Hyder, 2014). Nevertheless, some senior managers are ideally positioned to participate in planning for the prevention of unintentional injuries to children that occur in the home (European Child Safety Alliance (ECSA), 2012). These perspectives have rarely been investigated (Watson and White, 2001), and no similar studies have been conducted in Palestine. In light of the absence of such data, this study aims to provide an understanding of the perceptions and practices of senior managers regarding the prevention of injuries among children in the Ramallah District of Palestine. It also aims to identify the potential factors that might influence their practices in this area.

Methodology

Study Design

A qualitative approach was chosen to address the study aims, as there is little information about this issue in Palestine.

Setting

Ramallah District was purposively selected for this study as it is considered to be the most important administrative centre in Palestine (Mahmoud et al., 2003), and contains the main referral primary health clinics (MOH, 2016).

Sample

The eligible participants were senior-level managers working in registered institutions concerned with child health or protection in Ramallah District. They were included in the study because of their potential influence on the prevention of home injuries among children. A total of 18 subjects were purposively selected and interviewed in this study, and no further interviews were conducted after that as the data saturation point was reached.

Data Collection

Semi-structured interviews were chosen for data collection, as they provide a useful and flexible approach for accessing the participants' inner perceptions, attitudes, and feelings regarding complex phenomena (Bowling, 1997; Britten, 1995; Ryan, Coughlan, & Cronin, 2009). The information sheet and interview questions were sent to the selected participants by email prior to the interview, and they were contacted by telephone and email to confirm their approval. After that, interviews in Arabic were carried out in private rooms in the workplace.

The interviews lasted for approximately 30 to 60 minutes. During the interviews, a schedule was employed, using a flexible approach. This schedule was developed based on the literature review on the subject of prevention of home injuries, in light of the research aims and objectives. Additionally, verbal probes were used to further explore any hidden meanings and to enhance the understanding of the participants' perspectives (Harrell and Bradley, 2009).

Data Analysis

All the interviews were audio recorded, and then transcribed. The transcripts were translated into English in line with WHO (2010) guidelines. This study followed (Braun & Clarke, 2006) thematic-inductive approach to data analysis.

Results

A total of 18 senior managers were interviewed from different setting including: Primary Health Care, hospital, child protection organizations, and Ministry of Social Affairs. They were from various educational backgrounds: medicine, nursing, sociology, and law.

The main themes

The senior managers that were interviewed discussed the following main themes:

(1) Importance of Injury Prevention Issue

Half of the managers that were interviewed stated that injury prevention was an important topic and should be a priority (n=9). However, some managers (n=9) gave some reasons why home injuries were not given the priority that they deserved. This included political situations where emergency provision was always a priority; a lack of awareness among policy makers; the community not taking home safety seriously, and budget limitations. In addition, all of the managers stated that there was a deficit in the work of different organizations in this area.

(2) Practices for the Prevention of Home Injuries

The majority of managers (n=16) stated that their institutions worked on increasing parental awareness. With respect to providing support to the parent, five participants recognized the importance of providing feasible solutions to the families to help them to protect their children. These participants stated that providing health education without also offering any practical solutions was less likely to be effective. Despite the managers' understanding of the families' need for financial support, only one institution was able to provide it to some families (Ministry of Social Affairs).

(3) Factors Affecting the Prevention of Home Injuries Staff factor

Most of the participants (n=12) mentioned a lack of staff training in injury prevention as the main barrier. Most of them also discussed the negative influence of staff shortages and high workloads on injury prevention:

Parental factors

All of the participants recognized the low socioeconomic status of the parents as one of the main barriers that prevented them from adopting certain safety practices. However, some of the participants stated that other factors might interfere with the families' adoption of such

principles, such as the parents' level of awareness and their desire to adopt safety principles. In addition, ten participants thought that the parent's level of education could be an influential factor. For them, educated parents have a greater ability to understand safety principles at home and are more open to changing their practices or the home environment.

Environmental factors

The environmental factors included physical, social, and governmental policies. For the physical environment, over half of the interviewed managers (n=10) discussed the effects of the home environment, including its size and structure, on the occurrence of injuries. In respect of the social environment, almost half of the participants (n=10) stated that a few parents might use their belief in fate as an excuse for not applying some aspects of safety principles in their homes. For the governmental policies, nearly all them (n=16) stated that in Palestine there is a scarcity of data, which could be a barrier to improving practice. Moreover, nearly all of the managers (n=16) emphasized the need to develop current regulations regarding home safety to encourage parents to change their practices. Nevertheless, despite the current insufficiencies, they thought the existence of these regulations to be important as a legal framework for child protection. It is important to note that just over half the participants (n=10) identified the current political situation in Palestine as a significant factor affecting the families' psychological and financial status. They also stated that it affected governmental priorities, as it made handling emergency situations a high priority most of the time, and prevented them from tackling other important issues such as child injuries in the home.

Conclusions

The findings of this study suggest that injury prevention was deemed to be a priority by some senior managers, and that most of them attempted to work at solving this issue. Nevertheless, the activities of injury prevention in Palestine are still insufficient and need to be advanced. Current prevention strategies are greatly influenced by the economic, social, political and physical environments, as well as a lack of data and regulation. Therefore, these should be the main aspects of any future plan that targets this topic, with the aim of providing better support to the parents in this direction. If these elements were taken into consideration by senior managers, the health of Palestinian children would be expected to improve, and the burden of injuries on the health system to be reduced.

Lessons for International Healthcare Managers

Globally, unintentional injury presents a major threat to the health and well-being of young children. This paper suggests that the current interventions that target injury prevention in Palestine are insufficient and managers face many challenges. Similar countries with similar contexts could be facing similar issues.

There are now evidence based strategies for preventing many types of injuries in childhood, however many of them are from high income countries (WHO, 2008; Watson and Errington, 2016). Potentially, managers have key roles to play both directly and indirectly. Some managers in the past have been champions of child injury prevention and there is still a need for them to act as injury prevention advocates to raise awareness of and stimulate action. They should ensure where possible that interventions are multifaceted, informed by local data and are evidence based. Crucially, interventions should also be culturally sensitive and context dependent.

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Keywords:

Injury prevention, Qualitative and Senior managers

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Abstract Summary:

Unintentional injuries are an important global public health problem that forms a significant burden on healthcare systems, particularly in low and middle income countries. Potentially, senior managers have a major role to play in the prevention of home injuries. This study aims to explore their perceptions around this issue.

Content Outline:

Introduction:

- Unintentional injuries are a growing global public health problem
- Senior managers have a major role in injury prevention

• This study aims to explore their perceptions and practices regarding injury prevention in Palestine

The study:

- A qualitative approach was followed
- Semi-structured interviews were undertaken with 18 Participants
- The derived data were analysed using inductive-thematic analysis
- The study revealed that:
- 1. Half of the interviewed senior managers thought injury prevention was a priority.
- 2. The majority of them had worked on increasing parental awareness regarding injury prevention.
- 3. Many factors had interchangeably influenced their practice in injury prevention, including:
 - (1) staff (e.g. lack of training and workload)
 - (2) parents (e.g. lack of awareness and low financial status)
 - (3) environmental factors, such as the physical environment of the homes, social environment, as well as governmental policy (e.g. lack of home safety regulations, lack of data around this topic).

Conclusion:

- The evidence shows that the injury prevention is influenced by government policies and the surrounding environment.
- The study supports the usage of multiple intervention strategies to prevent any future home injuries.

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