PHARMACEUTICAL SCIENCES

# KNOWLEDGE，ATTITUDE，AND PRACTICE TOWARDS CHILDREN＇S CAR SAFETY SEAT AMONG FEMALE TEACHERS IN SECONDARY SCHOOLS IN TAIF CITY， KSA， 2021 

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## Abstract：

This study aimed to explore the knowledge，attitude，and practice of using children car seats among female teachers in Taif，KSA，as well as to associate sociodemographic data with the use of children car seats．Methodology：An analytic cross－sectional study for determination of knowledge，attitude，and practice towards children car safety seat smong female teachers in Secondary Schools in Taif City，KSA．The data was collected using a pre－designed self－administered questionnaire and analyzed using the Statistical Package for Social Sciences（SPSS）26．Results： The study included 267 females working as teachers（93．3\％），or leaders（4．5\％），or leader assistants（2．2\％）in secondary schools in Taif，KSA．The majority of participants were aged more than 35 years（ $68.5 \%$ ），married $(59.2 \%)$ ，have university education（100\％），work as a teacher（93．3\％）．The study found that there was a significant association between safety seat usage and age（ $P=0.003$ ），number of offspring $(P=0.000)$ ，occupation as being teacher was associated with more use of safety seat than school leader or leader assistant（ $P=0.017$ ），average family monthly income（ $P=0.004$ ），using a large（family）car was in comparison to small car $(P=0.000)$ ，and use of seatbelt $(P=0.000)$ ．Moreover，the study found that using CSS during RTA was significantly associated with lower severity of injury to the children involved $(P=0.000)$ ．Conclusion：Using children safety seat was associated with less severity of injury and it was more practiced by the younger participants with higher average monthly income，who also use seatbelts in front seats．We recommend more emphases to be implemented to reduce the casualties resulting from road traffic accidents involving children by increasing awareness of age－appropriate safety seat use．
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## BACKGROUND:

The World Health Organization (WHO) defines road traffic injuries as "fatal or non-fatal injuries resulting from a road traffic collision." In contrast, a road traffic crash is defined as "an occurrence involving at least one moving vehicle that may or may not end in harm and happens on a public road." (1). Around the world, motor vehicle collisions (MVCs) are the leading cause of injury-related mortality in children. Using a Web-Based Injury Statistics Query and Reporting System, these injuries account for $41 \%$ of all children's injuries. (2) In 2010, 3,554 children were murdered in the United States due to MVCs, with $14 \%$ of them being under the age of four. (3)

Every year, around 1.25 million people die due to road traffic injuries, and more than 50 million people are wounded or crippled as a result of road traffic incidents across the world. (4) According to the World Health Organization, if proper and sustained efforts are not taken, road traffic injuries will become the seventh-largest cause of death by 2030. (4) Despite owning just 54 percent of the world's motor vehicles, low and middle-income nations account for more than $90 \%$ of road traffic-related deaths, "death occurring within 30 days of the road traffic collision." (4)

Road traffic injuries inflict physical and emotional harm to people and put a strain on the country's and households' economies. (5) Around the world, $\$ 518$ billion is spent on road traffic accident recovery. (6) Families, relatives, and other caregivers of victims and survivors of traffic accidents endure psychological and financial consequences. Households are pushed into poverty when their breadwinner dies or must pay for medical treatment for a sick or disabled family member. (5) Every hour, almost 150 children are treated in emergency rooms worldwide for road traffic accidents. (7) The global rate of child road traffic injury and disability is estimated to be over 10 million per year, resulting in 9482 disability-adjusted-life years lost for children and adolescents aged 0 to 15. (5)

Furthermore, road traffic injuries kill more children and teenagers between the ages of 5 and 19 than any other form of injury. (7) In 2004, more than 260000 children and teenagers aged 0 to 19 years perished due to automobile accidents throughout the world. (5) Children injury risk factors include speeding, drinking and driving, not wearing safety equipment, and other issues relating to vehicle features and environmental safety all contribute to road traffic injuries. (5)

Numerous worldwide emphases have been put to reduce RTAs and subsequent human injuries (8-14).
The number of reports of car accidents in the Middle East is staggering. Saudi Arabia had the greatest number of fatalities out of all Arab nations in 2004. (10) According to a Saudi traffic study from 2008, 6,458 people died in car accidents, with 995 of them being minors. (11) With an estimated death rate of 27.4 per 100,000 people, Saudi Arabia has one of the highest rates of road injury and mortality and morbidity connected with it, compared to 10.6 in the US and 2.9 in the UK. (12)

Since December 2000, Saudi legislation has made the usage of seat belts for drivers and passengers in front seats mandatory, with enforcement in place to guarantee compliance. However, compliance remains low. (14) Furthermore, there are no official statistics to show the prevalence of CRS usage in Saudi Arabia and no national requirements in terms of age, weight, or height to verify that children are using the proper seat. (8) As a result, this study assessed secondary school female teachers' knowledge, attitudes, and practices on automobile safety seats in Taif, Saudi Arabia.

## Aim

The aim of this study is to assess the knowledge, attitude, and practice of children's car seats among Female Teachers at Taif city, KSA.

## Objectives

- To Explore knowledge, attitude, and practice of children car seats among female teachers in Taif city regarding child car seat
- To assess the level of awareness regarding the children car set
- To correlate demographic data like the level of education, socioeconomic status, and other factors that can affect the behaviour regarding car seats.
- To assess the effectiveness of car seat policies on parents' behaviour.


## Rationale

During the medical encounter in the emergency department, the researchers observed many RTA cases that cause injury and death among passengers, including Children, And the position of the child during an accident is one of the major factors that affect the outcome of the MVC. so, in most circumstances, those accidents occur as a result of improper use of safety measures such as car safety restraints, and it can be protected with using Child safety restraints which reduce risk of death and decrease injury severity from road traffic crashes.

## METHODOLOGY:

## Study design

An analytic cross-sectional study for determination of knowledge, attitude, and practice Towards Children's Car Safety Seat Among female Teachers In Secondary Schools in Taif City.

## Study setting

This study will be conducted in Taif city, Taif city located in the western region of Saudi Arabia (Makkah Province), at an elevation of 1700-2500 meters above sea level.
The city population is $1,200,000$, and it reflects a diversified demographic profile with a considerable portion of the population coming from rural descent, while others come from an urban one. This difference translates into biological, socioeconomic, and lifestyle differences in the Taif population. ${ }^{(22)}$

## Study Period

The study was conducted from August 2021 to December 2021.

## Study Population

Female Teachers in the secondary schools in Taif city. Based on the latest statistics on the Ministry of Education website, the General Administration of Education in Taif Governorate, the number of secondary girls 'schools reached 77 schools in the city of Taif without counting the schools in the villages of the city of Taif.
They are distributed as follows: 35 schools in East Taif, 25 schools in West Taif, 11 schools in South Taif, and 6 schools only in North Taif.
In addition, according to the statistics on the website of the ministry of education, the total number of female teachers in Taif city is around 5572 teachers, approximately 2310 teachers in the secondary schools. An average of 30 to 40 teachers per school. (23)

## Sample size

Using Raosoft sample size calculator with the following standard
(margin of errors $=5 \%$, confidence level $=95 \%$ and response distribution $=50 \%$ ).
According to the statistics on the website of the ministry of education, the total number of female teachers in Taif city is around 5572 teachers. Approximately 2310 teachers in the secondary schools. An average of 30 to 40 teachers per school. So, the population size $=267$ participants.

## Data collection tool

The researchers developed an Arabic selfadministered questionnaire, and validity has been obtained. It was delivered to the target population by direct contact with the target population during working hours.

## Sampling technique

To select the schools in which the questionnaire was distributed to the school teachers by simple random technique, after writing the names of girls secondary schools in the city of Taif, and based on the statistics on the website of the Department of Education of the city of Taif, ten schools were selected to distribute the questionnaire for their teachers.
The researchers distributed the self-administered questionnaire to the target population by direct contact with the target population.
In view of the current conditions and the Corona pandemic, school principals were contacted to facilitate the distribution of the questionnaire for female teachers, as the presence of female teachers in schools in light of this crisis is limited to a day or two during the week and for a few working hours.
The researchers were available to clarify any issues in the questionnaires. This data collection technique was on the same ways of distribution. The data was verified by hand then was coded and entered into a personal computer.

## Inclusion criteria

- Female Gender.
- Teachers only.
- Consent to participate in the study


## Exclusion criteria

- Male gender
- Supervisors, administrations, and cleaners.
- Those in vacations and absence.
- Those who refuse to participate in the study.


## Statistical Analysis

Data was collected and analyzed using SPSS version 26. Descriptive analysis was performed expressing frequencies and percentages. Association analysis was conducted using Chi-Square test where the threshold of significance was set at $\mathrm{P}=0.05$.

## Ethical consideration

Approval for the study was obtained from the research committee. Consent was obtained from each participant.

## RESULTS:

The study included 267 females working as teachers ( $93.3 \%$ ), or leaders ( $4.5 \%$ ), or leader assistants ( $2.2 \%$ ) in secondary schools in Taif, KSA. As shown in table 1, the majority of participants were aged
more than 35 years ( $68.5 \%$ ), married ( $59.2 \%$ ), have university education ( $100 \%$ ), work as a teacher (93.3\%).

Nearly two-thirds of participants related as a mother to the child inquired for ( $62.9 \%$ ), and nearly half of the participants ( $45.7 \%$ ) had 1 to 3 offspring. The majority of participants did not personally possess a driving license ( $79.4 \%$ ), and used a family car (63.3\%).

Table 2 shows that half of participants ( $50.9 \%$ ) usually use seatbelts in the car, whereas only $29.6 \%$ place their children in the safety seat. Of all participants, $26.6 \%$ used children safety seat because it is safer, and only $3 \%$ use it to avoid paying a fine. Regarding reasons for not using the safety seat, $40.8 \%$ of participants do not use it because it was too expensive, and $24 \%$ thought it was not important.

Table 3 shows that $43.4 \%$ had history of recent RTA, of which only $81.3 \%$ and only $20.2 \%$ used safety seat for their children during the RTA. Among the children involved in the RTA, 33\% had a severe injurt, while $38.3 \%$ had a mild injury.

The association between using children safety seat and sociodemographic characters is presented in table 4. There was a significant association between safety
seat usage and age ( $\mathrm{P}=0.003$ ) as the younger the participant is, the more likely they would use the safety car seat; the majority of participants aged less than 25 years were using safety seat in comparison to $23.8 \%$ of those aged 35 years or more. None of the participants who have four or more offspring used the safety seat ( $0 \%$ ), whereas $38.5 \%$ of participants who have one to three offpsring uses it ( $\mathrm{P}=0.000$ ).

More teachers ( $31.7 \%$ ) than leaders ( $0 \%$ ) and leader assistants ( $0 \%$ ) used safety seat ( $\mathrm{P}=0.017$ ). Higher average monthly family income was associated with higher usage levels of safety seat as $31.7 \%$ in comparison to $0 \%$ among participants with an average income of more than 10000 SAR, and 500010000 SAR, respectively $(\mathrm{P}=0.004)$.

Participants with small cars had higher level of using safety seats ( $59.7 \%$ ) than family size cars ( $19.5 \%$ ) ( P $=0.000$ ). Moreover, using seatbelt was associated with higher usage of safety seat ( $48.5 \%$ in comparison with $11.1 \%)(\mathrm{P}=0.000)$.

As presented in table 5 , using safety seat during RTA was significantly associated with the severity of injury to the children involved ( $\mathrm{P}=0.000$ ), as less participants of those who used the safety car suffered severe injuries $(0 \%)$, and mild injuries ( $47.2 \%$ ).

Table (1): Sociodemographic characters of participants ( $n=267$ )

| Parameter |  | Frequency (\%) |
| :---: | :---: | :---: |
| Age, y | Less than 25 | 14 (5.2\%) |
|  | 25 to 30 | 49 (18.4\%) |
|  | 31 to 35 | 21 (7.9\%) |
|  | More than 35 | 183 (68.5\%) |
| Marital status | Single | 95 (35.6\%) |
|  | Married | 158 (59.2\%) |
|  | Divorced | 14 (5.2\%) |
| Relation to child(ren) | Sister | 49 (18.4\%) |
|  | Other | 50 (18.7\%) |
|  | Mother | 168 (62.9\%) |
| Do you have children? | No | 99 (37.1\%) |
|  | Yes | 168 (62.9\%) |
| How many offspring do you have | None | 98 (36.7\%) |
|  | 1 to 3 | 122 (45.7\%) |
|  | 4 or more | 47 (17.6\%) |
| Educational level | University or more | 267 (100\%) |
| Occupation | Leader | 12 (4.5\%) |
|  | Leader assistant | 6 (2.2\%) |
|  | Teacher | 249 (93.3\%) |
| Average monthly income, SAR | 5000 to 10000 | 18 (6.7\%) |
|  | More than 10000 | 249 (93.3\%) |


| Type of personal or family vehicle | Small | $77(28.8 \%)$ |
| :--- | :--- | :---: |
|  | Family size | $169(63.3 \%)$ |
|  | Other | $21(7.9 \%)$ |
| Years separation of family children birth | No | $212(79.4 \%)$ |
|  | Yes | $55(20.6 \%)$ |
|  | One year | $31(11.6 \%)$ |
|  | Two years | $33(12.4 \%)$ |
|  | Three years | $37(13.9 \%)$ |
|  | Four years | $138(10.5 \%)$ |
|  | More | $131.7 \%)$ |

Table (2): Habits of using seatbelt and children safety seat among participants

| Parameter |  | Frequency (\%) |
| :---: | :---: | :---: |
| Using seatbelt | Sometimes | 95 (35.6\%) |
|  | No | 36 (13.5\%) |
|  | Yes | 136 (50.9\%) |
| Placing children in safety seat | No | 188 (70.4\%) |
|  | Yes | 79 (29.6\%) |
| Frequency of using safety seat | I don't use it | 188 (70.4\%) |
|  | Sometimes | 10 (3.7\%) |
|  | Mostly | 27 (10.1\%) |
|  | Always | 42 (15.7\%) |
| I use the safety seat because | I don't use it | 188 (70.4\%) |
|  | It is safer | 71 (26.6\%) |
|  | To avoid paying fines | 8 (3\%) |
| Using safety seat for all children below 8 years | I don't use it | 188 (70.4\%) |
|  | Yes | 79 (29.6\%) |
| Reason for not using safety seat | I use it | 79 (29.6\%) |
|  | Many children | 7 (2.6\%) |
|  | Too expensive | 109 (40.8\%) |
|  | Not important | 64 (24\%) |
|  | I have no children | 8 (3\%) |
| Seating of the child | I use it | 79 (29.6\%) |
|  | Front seat next to the driver | 68 (25.5\%) |
|  | Back seat | 115 (43.1\%) |
|  | With the driver in the driver seat | 5 (1.9\%) |
| Would you use it to avoid paying fines | I use | 79 (29.6\%) |
|  | Yes | 188 (70.4\%) |

Table (3): History of RTA among participants

| Parameter |  | Frequency (\%) |
| :---: | :---: | :---: |
| History of recent RTA | No | 151 (56.6\%) |
|  | Yes | 116 (43.4\%) |
| Children involved in the accident ( $\mathrm{n}=116$ ) | No | 173 (18.7\%) |
|  | Yes | 94 (81.3\%) |
| Used safety seat ( $\mathrm{n}=94$ ) | No | 75 (79.9\%) |
|  | Yes | 19 (20.1\%) |
| Injury to the child | Minor | 27 (10.1\%) |
|  | No children involved | 173 (64.8\%) |
|  | Yes | 67 (25.1\%) |
| Severity of injury to the child ( $\mathrm{n}=94$ ) | Severe | 31 (33.0\%) |
|  | Mild | 36 (38.3\%) |
|  | No injury | 27 (28.7\%) |

Table (4): Association between using children safety seat and sociodemographic characters.

| Parameter |  | Using safety seat |  | P-value |
| :---: | :---: | :---: | :---: | :---: |
|  |  | Yes | No |  |
| Age, y | Less than 25 | 10 (71.4\%) | 4 (28.6\%) | 0.003 |
|  | 25 to 30 | 10 (20.4\%) | 39 (79.6\%) |  |
|  | 31 to 35 | 5 (23.8\%) | 16 (76.2\%) |  |
|  | More than 35 | 54 (29.5\%) | 129 (70.5\%) |  |
| Marital status | Single | 32 (33.7\%) | 63 (66.3\%) | 0.427 |
|  | Married | 42 (26.6\%) | 116 (73.4\%) |  |
|  | Divorced | 5 (35.7\%) | 9 (64.3\%) |  |
| Relation to child(ren) | Sister | 5 (10.2\%) | 44 (89.8\%) | 0.000 |
|  | Other | 27 (54\%) | 23 (46\%) |  |
|  | Mother | 47 (28\%) | 121 (72\%) |  |
| Do you have children? | No | 32 (32.3\%) | 67 (67.7\%) | 0.452 |
|  | Yes | 47 (28\%) | 121 (72\%) |  |
| How many offspring do you have | None | 32 (32.7\%) | 66 (67.3\%) | 0.000 |
|  | 1 to 3 | 47 (38.5\%) | 75 (61.5\%) |  |
|  | 4 or more | 0 (0\%) | 47 (100\%) |  |
| Occupation | Leader | 0 (0\%) | 12 (100\%) | 0.017 |
|  | Leader assistant | 0 (0\%) | 6 (100\%) |  |
|  | Teacher | 79 (31.7\%) | 170 (68.3\%) |  |
| Average monthly income, SAR | More than 10000 | 79 (31.7\%) | 170 (68.3\%) | 0.004 |
|  | 5000 to 10000 | 0 (0\%) | 18 (100\%) |  |
| Type of personal or family vehicle | Small | 46 (59.7\%) | 31 (40.3\%) | 0.000 |
|  | Family size | 33 (19.5\%) | 136 (80.5\%) |  |
|  | Other | 0 (0\%) | 21 (100\%) |  |
| Possession of driving license | No | 66 (31.1\%) | 146 (68.9\%) | 0.278 |
|  | Yes | 13 (23.6\%) | 42 (76.4\%) |  |
| Years separation of family children birth | More | 31 (22.5\%) | 107 (77.5\%) | 0.000 |
|  | Four years | 25 (89.3\%) | 3 (10.7\%) |  |
|  | Three years | 9 (24.3\%) | 28 (75.7\%) |  |
|  | One year | 14 (45.2\%) | 17 (54.8\%) |  |
|  | Two years | 0 (0\%) | 33 (100\%) |  |
| Using seatbelt | Sometimes | 9 (9.5\%) | 86 (90.5\%) | 0.000 |
|  | No | 4 (11.1\%) | 32 (88.9\%) |  |
|  | Yes | 66 (48.5\%) | 70 (51.5\%) |  |

Table (5): Association between using safety seat during RTA and outcomes.

| Parameter |  | Using safety seat during the RTA |  |  | P-value |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Yes | No | Negative history of RTA |  |
| History of recent RTA | No | 0 (0\%) | 0 (0\%) | 151 (100\%) | 0.000 |
|  | Yes | 19 (16.4\%) | 75 (64.7\%) | 22 (19\%) |  |
| Children involved in the accident | No | 0 (0\%) | 0 (0\%) | 173 (100\%) | 0.000 |
|  | Yes | 19 (20.2\%) | 75 (79.8\%) | 0 (0\%) |  |
| Injury to the child | No | 2 (7.4\%) | 25 (92.6\%) | 0 (0\%) | 0.000 |
|  | No children | 0 (0\%) | 0 (0\%) | 173 (100\%) |  |
|  | Yes | 17 (25.4\%) | 50 (74.6\%) | 0 (0\%) |  |
| Severity of injury |  | 0 (0\%) | 0 (0\%) | 173 (100\%) | 0.000 |
|  | Severe | 0 (0\%) | 31 (100\%) | 0 (0\%) |  |
|  | Mild | 17 (47.2\%) | 19 (52.8\%) | 0 (0\%) |  |
|  | No injury | 2 (7.4\%) | 25 (92.6\%) | 0 (0\%) |  |

## DISCUSSION:

Children can be injured in several ways as road users, including as car passengers, pedestrians, and bicyclists. The majority of accidents to young children in cars come as a consequence of ineffective usage of safety features such as vehicle safety straps. (5) The number of reports of car accidents in the Middle East is staggering and is markedly higher than in the Western world. (10-12) According to the Institute for Health Metrics and Evaluation, MVC accounts for $7.6 \%$ of all fatalities recorded in Saudi Arabia across all age categories, with a mortality rate of 4.09 per 100,000 for children under the age of five. (13)

This study aimed to explore the knowledge, attitude, and practice of using children car seats among female teachers in Taif, KSA, as well as to associate sociodemographic data with the use of children car seats.

The study found that there was a significant association between safety seat usage and age ( $\mathrm{P}=$ 0.003 ) as the younger the participant is, the more likely they would use the safety car seat. This could be attributed to the fact that younger populations might be more exposed to the awareness campaigns, social media effect.

Our study found that $29.6 \%$ of participants use CSS with children with varying frequencies of use. A study conducted in Yerevan, Armenia in 2018 reported that $26.6 \%$ of the studied parents have been categorized as CSS users. (15) Another study conducted in Turkey in 2007 reported

That $28 \%$ of the parents did not know what a car safety seat was, while $20 \%$ of parents reported using a car safety seat, only $10 \%$ used them correctly.

Many of the participants reported that car safety seats are too expensive, which limits their safety seat use. CSS use was found to be significantly associated with average family monthly income ( $\mathrm{P}=0.004$ ). Similar to our findings, other studies found that car safety seat use was correlated with higher socioeconomic status. $(15,17)$ A study was conducted in Unaizah city, KSA in 2018 among parents with children aged 7 years old or less found that over half of the participants complied with the seatbelt policy ( $56.7 \%$ ), whereas only $16.3 \%$ used child seat every time the child rides in the car, which is similar to our findings ( $15.7 \%$ ). (18) Our study also found that increased number of offspring was associated with less use of safety car seat among participants ( $\mathrm{P}=$ 0.000 ). and that using a large (family) car was associated with less CSS use in comparison to small $\operatorname{car}(P=0.000)$.

Using CSS during RTA was significantly associated with the severity of injury to the children involved ( P $=0.000$ ), as less participants of those who used the safety car suffered severe injuries ( $0 \%$ ), and mild injuries ( $47.2 \%$ ). The United Nations General Assembly passed a resolution in 2010 establishing the Decade of Action for Road Safety (2011-2020). It urges 110 member nations to create a Global Plan for the Decade of Action with the goal of saving millions of lives throughout the world.

The World Health Organization (WHO) leads the United Nations Road Safety Collaboration and acts as a monitoring and reporting organization through its "Global Status Report on Road Safety" publications.
(8) Despite the fact that having an adequate child restraint regulation is one of the primary steps that The Decade of Action for Road Safety (2011-2020) calls on nations to implement, only 53 countries have child safety restraint laws based on a kid's age, height, and weight. (4) This law covers only $17 \%$ of the world population. According to the World Health Organization, child restraints can reduce newborn death by about $70 \%$ and child death by up to $80 \%$ when properly placed and utilized. (4) This implies that more policies for CSS use should be implemented to cover wider range of populations worldwide in order to reduce risk of children injuries in RTAs.

For the prevention measure to be effective, the car safety seats (CSS) must be appropriate for the child's age, height, and weight, and they must be correctly installed in the vehicle in the correct position and in the correct location, and the child must be fastened correctly at all times when traveling in a car. (9)

## CONCLUSION:

The study found that there was a significant association between increased safety seat usage and low age age, less number of offspring, occupation as being teacher, higher average family monthly income, using a family car was in comparison to small car, and use of seatbelt. Moreover, using children safety seat was associated with less severity of injury and it was more practiced by the younger participants with higher average monthly income, who also use seatbelts in front seats. We recommend more emphases to be implemented to reduce the casualties resulting from road traffic accidents involving children by increasing awareness of ageappropriate safety seat use.

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