

Results Majority (78.57%) of children were fully immunised in a timely manner, 7.86% were fully immunised in an untimely manner, 10.71% were incompletely immunised for age and only 4 children were unvaccinated. Although aware of childhood immunisation, 63.57% of them had poor knowledge regarding childhood immunisation. Statistically significant associations were found between a child's immunisation status and maternal age ($p=0.0072$), mother's highest educational level ($p=0.0000$), her husband's age ($p=0.0001$) and highest educational level ($p=0.0000$), estimated household monthly income ($p=0.0292$), number of siblings a child had ($p=0.0001$), child's place of birth ($p=0.0000$), antenatal care ($p=0.0000$) and vaccination card availability ($p=0.0000$).

Conclusion Badagry LGA is a major border town with heavy cross-border traffic facilitating transmission of diseases internationally. The gaps in immunization status of the children can be attributed to most mothers having poor overall knowledge. Parental age, educational level, estimated household income and household composition have significant impact on immunisation coverage and significantly, all unvaccinated children belonged to mothers with poor overall knowledge. Major limitations to this study were language barrier and unwillingness of mothers to be interviewed. This study demonstrates the need for continuous community engagement to improve immunisation completeness and timeliness of vaccine uptake.

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KNOWLEDGE, PREVALENCE AND MANAGEMENT OF DOMESTIC ACCIDENTS IN MOTHERS OF CHILDREN UNDER FIVE IN MUSHIN SUBURBAN AREA, LAGOS, NIGERIA

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Background Domestic accidents are a major cause of death and undesirable incidents in children. It has adverse effects, health-wise and emotionally; even in the future. Moreover, the economic and social hub of Nigeria, Lagos state is lacking an evidence-based study on childhood domestic accidents. This study assessed knowledge on the types, causes and prevention; the prevalence of and management practices used in domestic accidents among mothers of children under five in Mushin Local Government, Lagos, Nigeria.

Methods A descriptive cross-sectional study was conducted among 326 mothers in Mushin Local Government, Lagos. The mothers were recruited using multistage sampling method. Data was collected using a semi-structured, pretested, interviewer-administered questionnaire through Kobo Toolbox software. It was analysed using Microsoft Excel 2016 and Epi-info 7.2.3.0. Chi-squared test was applied to study associations between the variables. P-value less than 0.05 was considered significant.

Results Most mothers had poor knowledge on the types and causes of domestic accidents (73%), 26% of them had moderate knowledge while only 2% of them had good knowledge on this. Cuts/wounds (61.7%) were the commonest type of domestic accidents occurring in the kitchen while falls were mostly recorded in the bedroom (60.1%), bathroom (84.6%) and the immediate surroundings (73.3%). The prevalence of domestic accidents over the last six months before the study was 27.5%, of which 45% were females and 43%, males.

Falls (56.8%) was the most prevalent accident. Accidents occurred mostly in the kitchen (35%). Some of the mothers (62%) used first aid at home while others (75%) sought other forms of care including home treatment. Some mothers used potentially harmful remedies in management such as palm/black oils, salt, toothpaste, sheabutter, honey, eggs, malt, milk etc., depending on the domestic accident encountered. Sixty (60) mothers managed the accidents appropriately (68.18%) while twenty-eight (28) mothers managed them inappropriately (31.81%). There was only one death (1%) due to drowning and no recorded deformity. Only 9% of the mothers had good knowledge on preventive practices while 91% of them had poor knowledge. A factor significantly associated with mother's knowledge on preventive practices was her level of knowledge on the types and causes of domestic accidents ($P=0.0004$).

Conclusion This study demonstrates that the knowledge of mothers on domestic accidents was generally poor especially for their level of education and socioeconomic status. They, however, mostly had appropriate management practices. There should be health education programs on prevention and first aid workshops for the management of domestic accidents.

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EVALUATING THE IMPACT OF PLANNING GUIDANCE ON THE FOOD ENVIRONMENT, HEALTH OUTCOMES, AND INEQUALITIES: A QUASI-EXPERIMENTAL ANALYSIS USING LONGITUDINAL DATA FOR A LOCAL AUTHORITY IN THE NORTH EAST OF ENGLAND

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Background In light of the Covid-19 pandemic, the government has prioritised reducing obesity rates. Many local authorities have employed planning guidance to manage the local food environment and promote a healthy environment. There is a lack of evidence on the effectiveness of this type of guidance on the food environment and subsequently health outcomes in particular inequalities. The primary aim of this paper is to examine the impact of planning guidance on the number and type of food outlets, health outcomes in particular obesity rates for children, and inequalities in these outcomes in a local authority in the North East of England. Gateshead implemented a blanket ban on all new takeaways in 2015.

Methods The datasets consist of yearly number and type of food outlets in Gateshead from the Food Standards Agency Food Hygiene Rating System, Index of Multiple Deprivation 2015/2019, population density from the Office for National Statistics, childhood obesity data from the National Child Measurement Programme, and type 2 diabetes and hypertension data from Public Health England. The data is merged and analysed at lower layer super output area level across 8 years from 2012–2019. We use fixed effects and difference in difference models to investigate the impact of planning guidance on the food environment in Gateshead. The control groups are the neighbouring local authorities where did not implement the guidance. A fixed effects model will be employed to test the relationship between the density of food