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**FACTORS ASSOCIATED WITH THE USE OF CHILD  
AUTOMOBILE RESTRAINTS BY LOW-INCOME PARENTS**

**AN ABSTRACT OF  
A THESIS  
PRESENTED TO THE GRADUATE FACULTY  
OF WESTERN CONNECTICUT STATE UNIVERSITY**

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The purpose of the study was to describe the factors associated with the use of child automobile restraints for children under four years of age by low-income parents. The ultimate goal of the research was to examine these factors and group them according to the PRECEDE Model of Health Education so that effective strategies could be devised to increase proper and consistent use of child automobile restraints among this high-risk group.

Parents of children aged four or younger who were eligible for services at a Women, Infants, and Children (WIC) Nutrition Supplement Program in Connecticut were asked to complete a self-administered, 51 item questionnaire. The sample consisted of the first 30 parents who read and spoke English and who agreed to complete the questionnaire. The instrument, adapted from a survey developed by the Maryland Project KISS (Kids In Safety Seats), was based on the behavioral intentional model and included items concerning (a) knowledge about seat belts and car seats, (b) usage of both, (c) reasons for use and non-use, (d) attitudes toward child automobile restraints, and (e) demographic data. Limitations of the study are included.

Twenty-nine mothers and one father participated. All used restraints. Fifteen, however, did not use them consistently or properly. Proper use was associated with younger parental age, being white, being married, having less education than a high school diploma, the child's age being between 25 and 36 months, having only one child, owning a new rather than used seat, and driving over 100 miles per week. Both the proper and improper use groups were knowledgeable concerning the reasons for seat belt and restraint use. Though both groups had a favorable attitude toward restraints, the proper group felt more strongly that their child would be comfortable in the seat and better behaved. Eight parents did not recall having recently seen auto restraint information, though it was present in the survey room. Only 20% of the total sample recalled a doctor or nurse recommending the use of a car seat.

Implications for nursing are discussed. Public health education programs should be designed to include not just the need for use of restraints, but the need for proper and consistent use. New and original teaching materials for parents in high-risk groups are needed. Health professionals seeing mothers prenatally or during well-child visits have the opportunity to assess parental attitudes and correct errors in actual car seat use. Parents can be encouraged to obtain seats from community loaner programs

rather than use second-hand seats with incomplete equipment. The consistent association between parents' seat belt use and the proper use of child auto restraints also merits attention. The replication of the study with a larger, randomly selected sample is recommended. A more concise instrument, available in Spanish, would encourage greater participation. It is also recommended that an observational study which documents actual use be conducted to verify reported use.