Moderating Childhood Safety Beliefs in the Bedouin Community of Southern Israel

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Objective

The study's main objective was to test the effectiveness of an intervention program wherein Bedouin families from the Negev desert (Southern Israel) were instructed in topics relating to childhood safety in the home environment for the duration of six months. Bedouin families met up with accompanying instructors - who were themselves members of the Bedouin community -- and learned about the principles of beneficial communication. They also received guidelines for appropriate time and space allocation in their interactions with their children.

Method

In total, 45 participants took part in the reported evaluation study. These were mothers who, prior to and following the intervention program, responded to a specially tailored ordinal scale questionnaire. Among other things, we asked participants about the perceived inevitability of childhood injury and about the dangers of letting their children play outside. Participants were given the option of determining that incorrect statements were "very true" and "true." Since our findings pertain to mothers' reactions to incorrect statements, the correct answers across the parameters examined in this study are "totally untrue" and "untrue."



Figure 1: Child Injury is Inevitable

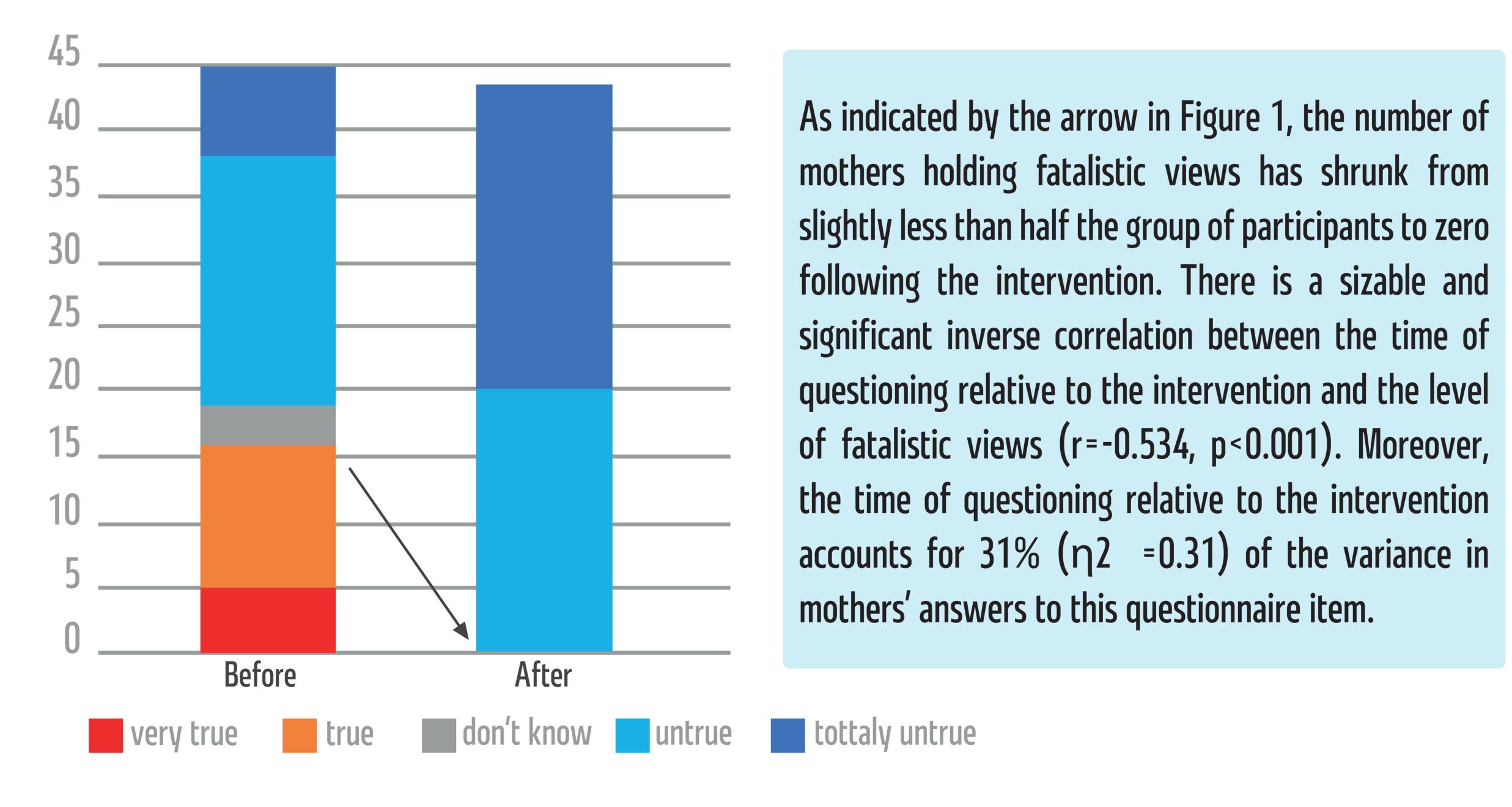
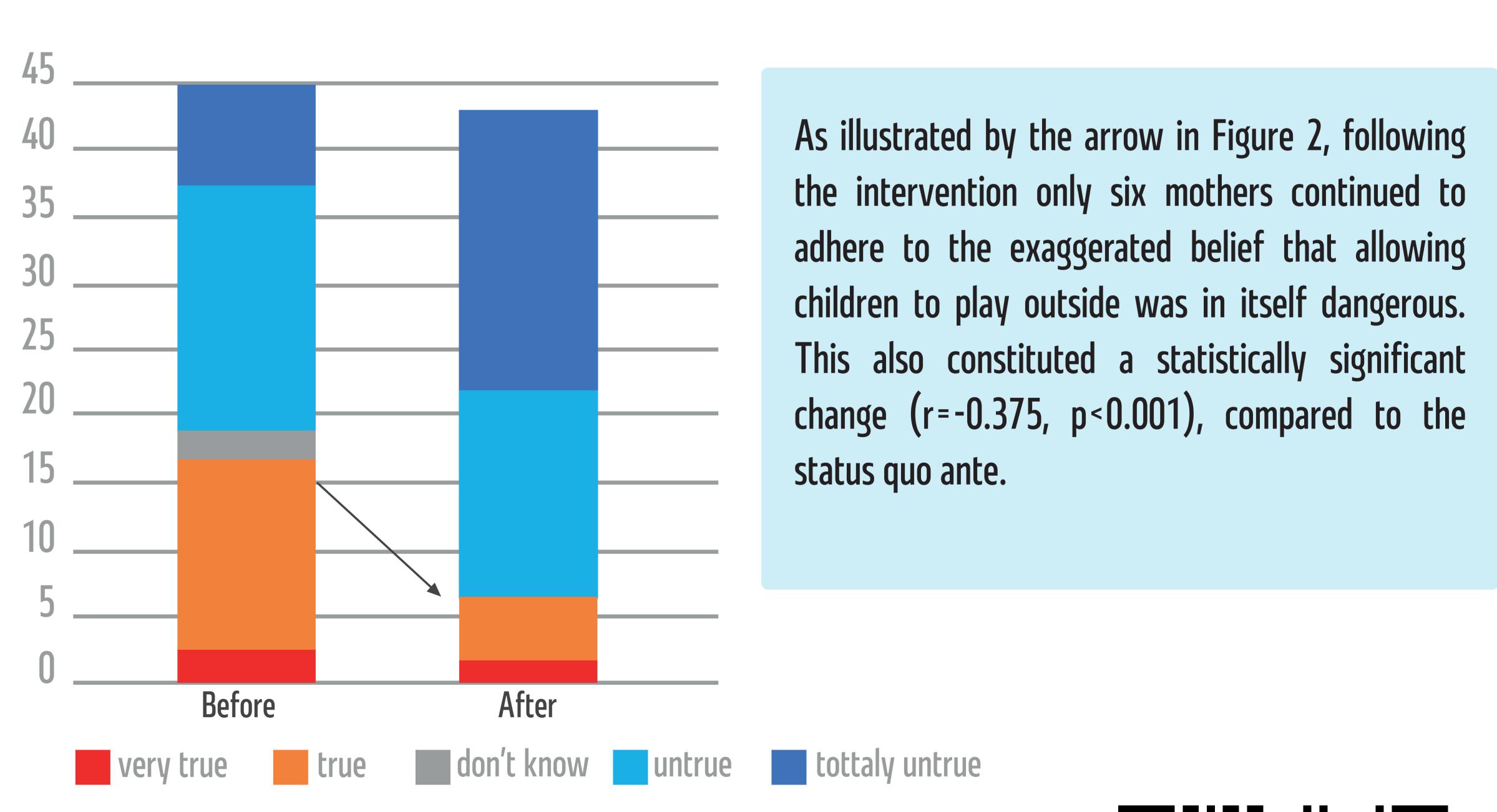


Figure 2: Playing Outside is Dangerous



Takeaway

The main lesson from this study is that the number of mothers who held problematic beliefs about child safety has shrunk dramatically following the intervention. Our study demonstrates the viability of instruction-based intervention programs in changing safety-related attitudes and together with extant work on the attitude-behavior nexus (Guilfoyle, Karazsia, Langkamp, & Wildman, 2012), holds the promise of fostering attitudes conducive to safety behavior.



Ref: Guilfoyle, S. M., Karazsia, B. T., Langkamp, D. L., & Wildman, B. G. (2012). Supervision to prevent childhood unintentional injury: Developmental knowledge and self-efficacy count. Journal of child health care, 16(2), 141-152.