Project Title: Improving Child Restraint Installation in Rural America through Interactive Virtual Presence

Principal Investigator: David C. Schwebel, Ph.D.

Program Report Date: July 1, 2019 (final report)

Comparison of actual accomplishments compared to objectives for reporting period: We completed data collection from 150 participants, as planned, on October 13, 2018. That date was ahead of the proposed timeline.

We completed all data analyses on time and submitted a complete manuscript for peer-reviewed publication on May 7, 2019. We are waiting reviews on the manuscript. We are anticipating funding from NIH to continue our work on a broader scale with a multi-site randomized trial research design. The R01 grant received a 2% score and we have indication from the NIH program officer that funding is likely.

All grant activities were completed according to the proposed timeline.

Reasons why established objectives and performance measures were not met: Not applicable. All primary objectives and performance measures were met. We recruited a sample that was somewhat more Caucasian and less Native American than planned due to challenges in working with Native American public health and tribal officials. We overcame most challenges of wi-fi connections in rural communities, but a small portion of the sample used researcher smartphones instead of their personal smartphones due to wi-fi connection or other reasons.

Other pertinent information, including analysis and explanation of cost underruns, overruns, or high unit costs: We spent funds mostly as planned. As is typical with a research project of this scope, we made some adjustments in budgeted funds to account for unexpected costs and available resources. As final expenses are posted, we do not anticipate overspending the budget or requiring extra funds.

We presented preliminary findings from the study at the annual conference of the Society of Public Health Education:


Our final results are currently under review for publication. The draft manuscript is attached to this report:

Conclusion: We are grateful to the National Safety Council and the US Department of Transportation for providing funding to allow this research to be conducted. Our results were largely as hypothesized, and they offer substantial potential to assist parents in rural locations with proper car seat installation. Our anticipated funding from NIH will enable a large-scale randomized trial to move our intervention strategy toward Phase III clinical trial testing and then dissemination. Ultimately, this work could contribute greatly to Road to Zero goals of no fatalities on America’s roadways.