

## Oral Presentations

## Rurality and injury

## 16 THE BURDEN OF TRAFFIC CRASHES ON APPALACHIA: AN OVERLOOKED HEALTH DISPARITY IN THE REGION

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**Statement of Purpose** The Appalachian Region (AR) has a higher premature fatality rate than the rest of the United States (US). While disparities related to chronic disease and other health conditions in Appalachia are well-described, an overlooked contributor to premature mortality are traffic crashes. Therefore, there is a need to examine the epidemiology of traffic fatalities in Appalachia and compare to the non-Appalachian US.

**Methods/Approach** We obtained 2013–2017 data from the Fatality Analysis Reporting System for the Appalachian and non-Appalachian US by county. To characterize differences between Appalachian and non-Appalachian counties, we calculated population-based fatality rates and rate ratios using multivariate Poisson regression. We also compared differences in crash characteristics using logistic regression.

**Results** For the period 2013–2017, the traffic fatality rate was 22% higher in the AR than in the non-AR (aRR: 1.22, 95% CI: 1.21–1.24). Traffic fatality rates were higher across all age groups and genders. Compared to non-Appalachian counties, the AR had higher fatality rates among motor vehicle occupants (aRR: 1.36, 95% CI 1.33–1.38) and motorcyclists (aRR: 1.16, 95% CI: 1.11–1.21), but lower rates among non-motorists (aRR: 0.75, 95% CI: 0.72–0.79).

Appalachian fatalities were more likely to have been in a vehicle >20 years old (OR: 1.28, 95% CI: 1.20–1.36) and to not have been wearing a seatbelt at the time of crash (OR: 1.31, 95% CI: 1.26–1.36); however, fatalities were less likely to have been in an alcohol-involved crash compared to non-Appalachian fatalities (OR: 0.66, 95% CI: 0.63–0.69).

**Conclusion** Appalachia has a higher burden of traffic fatalities than the rest of the US. While more research is needed, potential explanatory factors include vehicle age and lack of seatbelt use.

**Significance/Contribution to Injury and Violence Prevention Science** This is one of the first studies to perform an examination of the epidemiology of Appalachian traffic fatalities.

## Spreading the word: health communication and education

## 18 LANGUAGE AND RAPE MYTH USE IN NEWS COVERAGE OF SEXUAL VIOLENCE IN THE UNITED STATES, 2014–2017

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**Statement of Purpose** Explore the inclusion of rape myths and Language to Avoid terms (from the CDC's Reporting on Sexual Violence guide) in media coverage of sexual violence (SV). **Methods/Approach** A systematic random sample of SV-related articles published between 2014–2017 in the 48 most distributed newspaper outlets across the US were abstracted and coded (N=2600). We conducted chi-square analyses to explore associations between inclusion of Language to Avoid terms and rape myths (both general inclusion of any terms/myths and inclusion of specific terms/myths) with article framing [focus on specific SV incidents (episodic) vs. social context of SV (thematic)] and whether articles utilized news 'hooks' focusing on high-profile perpetrators or organizations involved in the SV incident (e.g., story of SV by a celebrity or professional athlete).

**Results** Nearly half of the articles (46.42%) used Language to Avoid terms and 13.5% included at least one rape myth. Compared to thematically-framed articles, articles using episodic frames were more likely to include rape myths (p=0.03) and, specifically, question the victim's credibility (p=0.002). Articles discussing SV perpetration by celebrities/professional athletes, government officials/military personnel, or individuals affiliated with churches or non-collegiate schools were more likely than articles not employing these news hooks to include rape myths and Language to Avoid terms.

**Conclusions** Rape myths and Language to Avoid terms still appear in SV reporting despite recent focus on their problematic use. Differences in use within articles framed episodically and articles focused on perpetrators or organizations involved in SV incidents highlight where more concerted efforts may be made to ensure accurate media representation on incidents of SV.

**Significance and Contributions to Injury and Violence Prevention Science** Media portrayal of SV can shape public conversation and propagate harmful social norms about the experience and perpetration of SV. Changing language used in SV reporting may help shift norms and perceptions of SV and support public health efforts to address and prevent future abuse.

## Violence research and prevention in healthcare settings

## 26 BASELINE CHARACTERISTICS OF A RANDOMIZED CONTROL TRIAL OF TRAUMA RECIDIVISTS OUT OF A LEVEL 1 TRAUMA UNIT

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**Statement of Purpose** Trauma recidivists are patients who present to an emergency room or trauma center on more than one occasion for different incidents of traumatic injury. One intervention that has shown promise in dealing with this issue has been the development of Hospital Based Violence Intervention Programs (HBVIP). The purpose of this presentation is to describe the implementation of a demonstration project to determine the impact of HBVIP services on victims of violent injury and to report baseline characteristics of the study sample.