Mental health consequences of violence

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MENTAL HEALTH CONSEQUENCES OF VIOLENCE IN MEXICO: A QUALITATIVE ANALYSIS OF PROVIDER PERSPECTIVES

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Background and Purpose Violence in Mexico has risen to epidemic levels, with far-reaching implications for mental health. Since 2007, violence associated with the Drug War in Mexico claimed the lives of over 200,000 people and resulted in more than 40,000 disappearances. This research focuses on mental health service access when extreme community violence occurs.

Methods Eighty semi-structured interviews were conducted with physicians (72%) and other health professionals (28%) in five states of Mexico selected for their high incidence of violence. Purposive sampling was conducted through local public health agencies. Recruitment was in person or by telephone. Interviews focused on how violence affects mental health of patients and providers' perception of mental health service needs/use. Interviews were in Spanish, recordings were transcribed, and coded thematically using ATLAS.ti.

Results Health professionals in all states reported an increase in mental health needs. Patients sought primary care services related to mental health for anxiety, stress, and shortness of breath, insomnia, headache and stomach aches. Psychologists in primary care centers are overbooked. In rural areas there are no psychologists; individuals travel longer distances to seek services. Tertiary psychiatric hospitals are regional and few in the country, referral diagnosis is required. Patients forgo mental health care due to an excess of demand, lack of services or referral, and long distances. Providers use words like 'psychosis', 'nerves', 'fear' and 'depression' to describe the mental health needs of patients.

Conclusions and Implications This study underscores the importance of understanding the impact of violence on mental health in vulnerable communities where health inequities exist. Trauma informed mental health services are needed at the primary care level. Greater information and communication of mental health consequences of violence exposure would likely help improve health outcomes and reduce inequities.

Firearm violence

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RECIDIVISM AND CRIMINAL HISTORIES OF GUN OFFENDERS

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Purpose To explore predictors of engaging in gun violence amongst a sample of formerly incarcerated individuals attempting to transition back into their communities in 2009 (n=11,026). Information about predictors of gun violence perpetration committed by former prisoners could arm service

providers with a more nuanced understanding of how to formulate continuity of care models to decrease violence in at risk communities, and amongst at risk populations.

Methods Data reflecting the criminal histories, recidivism patterns, demographic information, and actuarial risk scores on a pre-release assessment instrument are compared between former prisoners that were (n=1,158) or were not (n=9,868) incarcerated or previously incarcerated for committing gun crimes. The analytic strategy culminates with the construction of a competing risks survival analysis that estimates the sub-hazard ratios of committing a gun-related offense during the approximate 4-year follow-up period.

Results Age, risk classification, and current or former conviction for a gun related offense are statistically significant predictors of committing a gun offense during the follow-up. Former prisoners labeled as current or former 'gun offenders' were at an approximate two-fold increased hazard of committing a gun crime when compared to former prisoners incarcerated for non-gun crimes.

Conclusions Policy makers, practitioners, and releasing authorities should attempt to better gear evidence-based rehabilitative services focusing on criminogenic needs towards current or former gun offenders, as post-release service provision did not significantly differ between gun and non-gun offending former prisoners. Gun violence may be decreased if effective programs and services can be better targeted towards those with an increased risk of committing gun crimes.

Significance This research leverages data that are routinely gathered by, and available to, state departments of corrections to increase our understanding of factors that are predictive of gun violence and the timing of crime commission by former offenders.

Motor vehicle injuries and policy

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CELL PHONE USE AND A PATTERN OF RISK BEHAVIORS ASSOCIATED WITH CRASHES IN YOUNG ADULT DRIVERS: IMPLICATIONS FOR POLICY

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Statement of Purpose Young drivers under the age of 24 are involved in more fatal crashes featuring cell phone distraction than any other age group (NHTSA, 2019). Unfortunately, statewide policies prohibiting cell phone use while driving fail to show consistent reductions in motor vehicle crashes (MVC) (McCartt *et al.*, 2014). This study tested if cell phone use while driving is but one manifestation of a pattern of risk taking among young adult drivers.

Methods/Approach A sample of young drivers across the US aged 18–24 (n=384) completed an online survey capturing crash and citation history, engagement in risk-related driving behaviors (including intentional violations and driving errors from the DBQ, and additional cell phone use items), impulsivity, and demographic information. A confirmatory factor analysis tested a latent structure of risk-related driving behaviors identified in a prior study (Walshe *et al.*, 2018), along with alternative models. Associations between variables were examined with correlation coefficients and regression analysis.