that the ability and time to complete the investigation procedure determined how the school responded to bullying allegations.

Significance and Contributions to Injury and Violence Prevention Science Bullying behavior now includes social/relational interactions, gender identity, sexual expression, race/ethnicity, and body image, ongoing education of the various forms of bullying is a necessary step to address bullying. Therefore, future research should explore how training educates school personnel on the different forms of bullying and how training can improve their competencies to identify and address bullying incidences when and after it occurs.

Community and youth violence

218 EVALUATING THE IMPACT OF BALTIMORE COMMUNITY MEDIATION CENTER'S YOUTH-POLICE DIALOGUE CIRCLE PROGRAM

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Statement of Purpose The U.S. Department of Justice identified Baltimore Police Department officers as having applied unnecessary and excessive force in their interactions with youth, failing to uphold legal and professional obligations to be sensitive to their vulnerable age and developmental status. The Youth-Police Dialogue Circle (YPDC) Program of Baltimore Community Mediation Center (BCMC) offers unique insight into police-youth interactions and plays an important role in city efforts to reduce violence, increase police legitimacy, and build community trust. This study evaluated the effect of the YPDC program on youth and police attitudes and perceptions of one another.

Methods/Approach A mixed methods approach was used to evaluate YPDC program effect on attitudes, perceptions, and concerns among police and youth participants. Surveys collected pre-, post-, and one month following program participation were evaluated. Likert scale questions were evaluated quantitatively to assess whether the program significantly impacted participants' views and open-ended responses were analyzed qualitatively to identify key themes and glean important context.

Results Surveys demonstrate significant improvement in youth and police perceptions and suggest YPDC program participation contributed to mutual understanding. Program impact appears to further develop over time. Police and youth participants' open-ended responses indicate positive support for additional and expanded YPDC programming.

Conclusions The results indicate the YPDC program is effective at improving youth and police attitudes, perceptions, and concerns of one another. Expansion and sustained funding of the YPDC program is suggested and encouraged.

Significance and Contributions to Injury Research The YPDC program offers opportunities for police and youth to engage in positive interactions and the chance to address and challenge misperceptions. This intervention has the potential to contribute to meaningful violence reduction efforts, promote behavior change, and restore community-police relations.

Epidemiology of substance abuse and overdose

219 TRENDS IN THE PREVALENCE OF CONCURRENT NON-VA OPIOID AND BENZODIAZEPINE PRESCRIPTIONS AMONG VETERANS RECEIVING LONG-TERM OPIOID THERAPY FROM THE VA

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Purpose Since 2014, the Veterans Health Administration (VA) has reduced high-risk opioid prescribing, and opioid-benzodiazepine co-prescribing, at every VA healthcare system in the United States. However, Veterans who use VA healthcare services may receive opioids or benzodiazepines from non-VA healthcare providers. We examined the prevalence of concurrent non-VA opioid and benzodiazepine prescriptions among a sample of Veterans receiving long-term opioid therapy (LTOT) from the VA between 2014 and July, 2019.

Methods VA healthcare data were probabilistically linked to Oregon prescription drug monitoring program (PDMP) data for a total of 30,820 post-9/11 VA users in Oregon. Veterans who received outpatient services and LTOT (defined as ≥ 90 days of prescribed opioids in any 104-day period) from the VA were included in analyses for each respective year. We examined patterns in Veterans' receipt of concurrent (defined as ≥ 1 days of overlap) non-VA opioid and benzodiazepine prescriptions by year.

Results The proportion of VA users receiving opioid prescriptions from the VA decreased between 2014 and 2019. Among Veterans receiving LTOT, the proportions receiving concurrent non-VA opioids also decreased between 2014 and 2019 (24.1% in 2014; 26.1% in 2015; 19.3% in 2016; 19.0% in 2017; 15.6% in 2018; 6.3% in 2019). Smaller proportions of Veterans received concurrent non-VA benzodiazepines (3.8% in 2014; 4.9% in 2015; 2.8% in 2016; 3.4% in 2017; 3.8% in 2018; 1.2% in 2019).

Conclusion Among Veterans receiving VA LTOT, the proportions receiving concurrent non-VA opioids have been reduced during the 6-year analytical period. However, a substantial number of Veterans still receive concurrent VA and non-VA opioid and benzodiazepine prescriptions.

Significance Although improvements in safe opioid prescribing have been realized within the VA, there is still a need to account for non-VA prescriptions when considering Veterans' overall opioid safety.

Rurality and injury

223 AN ASSESSMENT OF THE IMPACT OF THE RURAL-URBAN DIFFERENCES IN THE ACCIDENT RESPONSE TIME TO ROAD ACCIDENT FATALITY RATE IN THE UNITED STATES

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Background Rapid response to accident events can reduce fatal road events. It is unknown how stages of response, from