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DAILY FIREARM CARRIAGE AND INTERPERSONAL VIOLENCE PATTERNS AMONG A HIGH-RISK URBAN EMERGENCY DEPARTMENT (ED) SAMPLE OF YOUTH AND YOUNG ADULTS

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Statement-of-Purpose Firearm violence is a leading cause of U.S. mortality. Intensive longitudinal daily data studies [ILDDS] have not examined firearm carriage or same-day/next-day predictors of carriage or violent conflict. Such data are necessary to inform violence interventions.

Methods/Approach ED youth/young adults (age=16–29) screening positive for substance misuse, firearm possession, and smartphone ownership were enrolled in a 30-day ILDDS. Daily assessment included 31-items about firearm carriage, violence, substance use, anger, anxiety/stress, and impulsivity. Separate conditional logistic regression models examined within- and next-day lagged associations with firearm carriage and violent conflict.

Results Across 30-days, 51% (n=27) of participants (n=53; M-age=24; 42%-male; 68%-Black; 87%-handgun possession) carried firearms, averaging 7 carriage-days/person. Carriage did not vary by day, week, day-of-week, or weekday/weekend. Firearms were carried 17% (180-of-1046) of days, with protection (97%) the primary reason-for-carriage and perceived low-risk (75%) the primary reason-for-not-carrying; 19% of participants disposed of their firearms. Examining between-person associations, no baseline differences were identified for participants carrying and not carrying firearms. Examining within-day factors, using illicit drugs (OR=7.5) and spending time in high-risk locations (OR=3.5) were associated with same-day carriage. No same-day associations were identified for other daily variables and carriage. Across 30-days, 26% of participants engaged in violent conflict (n=20 conflict-days; 63%-partner/27%-non-partner, 25%-firearm threats/use). Examining within-day, higher anger (OR=1.48), impulsivity (OR=1.28), stress/anxiety (OR=1.35), and riskier firearm behaviors (e.g., carriage drunk/high; OR=6.46) were associated with same-day conflict. Higher anger (OR=9.63) and lower self-efficacy for avoiding fights (OR=1.42) were associated with next-day conflict.

Conclusions Among high-risk youth, daily firearm carriage/violence rates were high. Results highlight carriage patterns and foci for interventions, including risky firearm behaviors, illicit-drug use, anxiety/stress, impulse control, anger management, and violence avoidance/refusal skills.

Significance/Contributions This is the first ILDDS examining firearm carriage/violence and identifies key data for future public health efforts addressing firearm violence.

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SOCIOCULTURAL AND DEMOGRAPHIC FACTORS ASSOCIATED WITH THE EDUCATIONAL PREPARATION AND GOALS OF ATHLETIC TRAINING STUDENTS

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Statement of Purpose Athletic training students (ATS) are training to provide independent healthcare, including injury prevention, to physically active patients. Our study aimed to identify sociocultural (race, gender) and demographic (age, athletic training program type) factors associated with the educational preparation of ATS.

Methods/Approach ATS (n=832; 629 females; mean age=22.2 ±2.7 years) completed a validated cross-sectional questionnaire on sociocultural and demographic variables, and educational experiences. A general linear model determined the effect of race (Caucasian, African-American, Asian, Latino/Hispanic, multi-race, other), gender, age category (<20, 20–24, 25–29, ≥30), and athletic training program type (undergraduate professional vs. graduate professional), on how prepared ATS felt for clinical practice. The 7-point scale ranged from completely unprepared to completely prepared.

Results Most participants were female (75.6%), Caucasian (73.8%), 20–24 years old (84.1%), and from an undergraduate professional-level athletic training program (78.3%). Most participants felt at least moderately prepared for clinical practice (46.5%). Additionally, most participants planned to further their education in some capacity (68.9%). In the general linear model, compared to Caucasian ATS, African-American ($\beta=-0.593$, $p<0.001$) and multi-race ATS ($\beta=-0.383$, $p=0.016$) felt less prepared for clinical practice.

Conclusions Our findings suggest that ATS of different racial backgrounds may have differing experiences compared to Caucasian ATS related to their perceived preparedness for clinical practice, independent of age- and program-related influences. Although these results only represent a one-level difference (moderately to somewhat prepared), the findings are important to consider when discussing the need to prioritize confidence, particularly among diverse populations of ATS.

Significance/Contribution to Injury and Violence Prevention Science Athletic training programs need to be aware of student differences relative to race/ethnicity as related to their perceived preparedness for independent clinical practice. Understanding how such disparities exist, their influence, and how to mitigate their influence on educational experiences will help to better train ATS to prevent future injuries.

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ALTER FOR HOME SAFETY IN BRIEF: A PROCESS EVALUATION TO EXAMINE THE FEASIBILITY AND ACCEPTABILITY OF AN ADAPTED INTERVENTION PROGRAM FOR A VULNERABLE POPULATION

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Unintentional injury is the leading cause of death in children 1–19 years of age; rates of injury in children of vulnerable parenting populations (e.g., those with lower socio-economic status, lower levels of education, younger maternal age) are even higher. Thus, intervention programs for parents need to be targeted and tailored for such a population. Currently, no evidence-based programming related to injury prevention is being used by Public Health agencies across Ontario, Canada. The previously validated Supervising for Home Safety intervention program was adapted to fit the needs of a vulnerable parenting population within the context of pre-existing community programming through these Public Health agencies. This process evaluation sought to explore parent acceptability,