feasibility of facilitator implementation, and to determine practic-
ticality of a PRE/POST questionnaire as a future method to
evaluate efficacy of this newly adapted program. Parents pro-
vided ratings of the program (e.g., helpfulness, utility, increase
in knowledge, would they recommend the program), and facili-
tators provided ratings and written responses (e.g., prepara-
tion, clarity, improvements that could be made). Results
suggest that overall both parents and facilitators rated the pro-
gram positively. Major themes identified by facilitators suggest
that the questionnaire should be significantly shortened and
simplified to account for low literacy in this population specif-
ically. Additionally, the limits of existing session length for this
community programming is a barrier to implementing a thor-
ough questionnaire evaluation. Moving forward, literacy level
will be reduced overall, and alternatives to a questionnaire
format will be explored. Conducting research within commu-

The overarching goal of this study is to better understand
how adverse childhood experiences and adult adversities clus-
ter together by gender.

Methods/Approach We used latent class analysis (LCA) in the
College Student Health Survey (CSHS), a large state surveil-
sance system of 2- and 4-year Minnesota college students to
identify clusters of childhood adversities plus highly correlated
adult adversities among emerging adults aged 18-24. Explora-
tory LCA was conducted in 2015 data and replicated with
2018 data. Given observed differences between men and
women with regard to experiences of adversities, the analyses
were stratified by gender.

Results In the 2015 sample, the seven-class and five-class mod-
els were selected for females and males, respectively, based on
how adverse childhood experiences and adult adversities clus-
ters were identified for females and males, respectively, based on
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generations. These different patterns may have different impacts throughout life that are not captured by a simple summed score of the number of adversities.

Significance and Contributions to Injury and Violence Prevention Science The unique pattern of adversity from those with different backgrounds is important to prevent adversity and to advance understanding of its impacts across different populations.

Statement of Purpose Researchers often use National Vital Sta-
tistics System (NVSS) mortality data to examine county-level
opioid-involved overdose mortality rates. Limitations such as
small counts and county-level variation in reporting the specific
drugs involved are not always considered. This study describes
county-level death counts and variation in drug reporting, and
possible implications when making county-level comparisons.

Methods/Approach NVSS mortality data from 2015–2017 were
analyzed. Drug overdose deaths were identified using the Inter-
national Classification of Diseases, 10th Revision underlying
Drug specificity was calculated by determining the percent of
drug overdose deaths with a multiple cause code of T36-T50.8.
Results Of 3,149 counties, only 1,574 (50%) had 10 or more
drug overdose deaths in 3 years, 1,261 (40%) had fewer than
10, and 314 (10%) had zero. Drug specificity was 86% over
all. For counties with at least one death, drug specificity was
0–50% for 469 counties (17%), 51–85% for 644 (23%), 86–
99% for 730 (26%) and 100% for 992 (35%). Compared to
counties with high specificity (>85%), counties with lower
specficity were more likely to be rural, located in Public
Health Regions 5–9, have county coroners as the state system
for medicolegal death investigation, and less likely to have a
state medical examiner.

Conclusions Even with 3-year aggregate data, half of the coun-
cies had fewer than 10 overdose deaths, and therefore
possibly unstable rate estimates. Counties with lower specificity
in drug reporting differed from counties with high specificity.
These differences might lead to biases when reporting county-
level drug-specific overdose rates.

Statement of Purpose The unique pattern of adversity from those with
different backgrounds is important to prevent adversity and to
advance understanding of its impacts across different populations.

Statement of Purpose Framed safety messages (gain- or loss-
framed) can counteract the increase in risk taking that occurs

Using National Vital Statistics System (NVSS)
Mortality Data to Estimate County-Level Trends in Drug-Specific Overdose Mortality:
Considerations and Limitations

Holly Hedegaard, Margaret Warner. National Center for Health Statistics

10.1136/injuryprev-2020-savir.114

Statement of Purpose Framed safety messages (gain- or loss-
framed) can counteract the increase in risk taking that occurs

Does Exposure to General Warnings in Framed
Messages Reduce Risk Behaviours in School-
Aged Children?

Emily Weinberger, Mackenzie Seasons, Barbara Morrongiello. University of Guelph, Ontario, Canada

10.1136/injuryprev-2020-savir.115
when children are in a heightened positive mood. In previous research, framed safety messages have consisted of behaviourally targeted messages that emphasize avoiding risk behaviors leading to specific injuries and outcomes. The current study examined whether more general warning messages in framed contexts had a differential effect on reducing risk taking in children when in a heightened positive mood.

Methods/Approach 39 children (7–9 years) were exposed to a safety message (gain- or loss-frame) regarding play behaviors on an obstacle course. Children’s risk-taking running the obstacle course was measured before and after a positive mood induction.

Results Participants who were exposed to loss-framed safety messages in both the general and behaviorally targeted groups demonstrated a significantly lower level of risk taking compared to baseline, whereas participants who were exposed to gain-framed safety messages in both groups performed at baseline levels. Regardless of whether children were exposed to general or behaviorally specific messages, gain and loss messaging counteracted the increase in risk taking when in a positive mood, but loss messages produced greater reductions in risk taking than gain messages.

Conclusion The results indicate that general messages can be as effective as behaviorally specific messages. Moreover, the loss-framed safety message had a greater effect on reducing risk-taking in children when in a heightened positive mood than the gain-framed safety message.

Significance and Contributions The results suggest that placing an emphasis on specific risk-taking behaviors and outcomes is not necessary in order to reduce risk-taking behaviours in school-aged children during play situations. This makes this intervention approach feasible to apply in situations in which there are a variety of potential risk behaviors which makes targeting a specific one likely to limit effectiveness of the intervention.

Statement of Purpose No Hit Zones (NHZs) are an emergent and highly promising public health strategy designed to change community-level social norms regarding the acceptability of physical punishment of children, an important approach for child physical abuse (CPA) prevention. NHZs are a multi-tiered strategic approach designed to: (1) promote an environment of safety such that no one will be hit, or witness hitting, within an organizational or community setting, and (2) reduce acceptance and use of PP within that setting, thereby ultimately reducing the incidence of CPA. This presentation will discuss the benefits and challenges of NHZ implementation, training resources available to implement an NHZ, and preliminary results from a NHZ evaluation at Children’s Hospital of New Orleans.

Methods/Approach Training resources developed and results from a short-term evaluation of the NHZ intervention will be presented. Pre- and post-assessments were administered to all medical center staff invited to participate in the study (n=507) before and after a mandatory NHZ training.

Measures were included to assess staff attitudes toward physical punishment, attitudes toward medical staff intervention when parents hit children, medical center policy and access to information on discipline, frequency of witnessing a parent hitting a child on the medical center property and whether or not they had intervened.

Results A pre-post analysis was completed via paired t-test, with significant results (p<0.001) for a reduction in positive attitudes toward physical punishment, an increase in positive attitudes toward medical staff intervention when parents hit children, and willingness to intervene.

Conclusions The current results demonstrate promise for NHZs in reducing community-level risk for CPA.

Significance and Contributions to Violence and Injury Prevention Science NHZs are an innovative approach to family violence prevention at the community level. This presentation will discuss development of and preliminary results from the intervention evaluation.