

Youth violence

0005 IMPACT OF COVID ON HOSPITAL BASED VIOLENCE INTERVENTION PROGRAMS

¹M Garretton, ²C Green, ²C Zavalaluque. ¹The Health Alliance for Violence Intervention, Jersey City, USA; ²Hartford Hospital, Hartford, USA

10.1136/injuryprev-2021-SAVIR.1

Statement of purpose Hospital-Based Violence Intervention Programs (HVIPs) provide trauma-informed, culturally competent, community-based services to violently injured patients. The HVIP model centers on violence intervention specialists who engage patients in the hospital, provide advocacy during the visit and deliver intensive case management after discharge. HVIPs promote psychosocial healing and improved social determinants of health for under-resourced communities of color disproportionately impacted by both the COVID-19 pandemic and structural violence. This study seeks to describe the initial impact of COVID-19 on these programs and their clients.

Methods/Approach A survey, developed with input from HVIP staff, probed changes in community violence, service delivery, and client needs. 32 programs, located in 19 states and DC, were invited to take the survey online. Descriptive statistics were calculated to describe changes between 2019 and 2020 clients served, implementation practices and client outcomes.

Results Preliminary results of the first 17 surveys completed (56% response rate) are reported. Compared to February 2020 there was a slight increase (5.6%) in patients seen in the Emergency Department who were eligible for HVIP services in April 2020 and a significant increase (58.2%) in June 2020, reflecting increased interpersonal violence during the pandemic. From March through June of 2020, programs served 19.5% more clients than during the same period in 2019, showing increased demand for these services. The types of services needed also shifted during the pandemic with increases in food and financial assistance requested. 16 out of 17 programs reported providing COVID-19 specific support to clients and communities.

Significance Preliminary results suggest COVID-19 has had a significant impact on communities impacted by violence and HVIP implementation across the country. This study begins to provide a greater understanding of programs' and clients' needs in the present context. As the pandemic endures, additional research is warranted to identify policy, training and funding priorities.

Transportation safety

0008 THE IMPACT OF A STAY-AT-HOME ORDER ON MOTOR VEHICLE INJURY RATES IN WEST VIRGINIA

T Rudisill. West Virginia University, Morgantown, USA

10.1136/injuryprev-2021-SAVIR.2

Statement of purpose Little is known about the relationship between Stay-At-Home (SAH) orders issued by state governments due to the COVID-19 pandemic and their impacts on

motor vehicle-related injuries. The purpose of this study was to determine whether the presence of a SAH was associated with lower rates of motor-vehicle-related injuries requiring emergency medical treatment among population sub-groups in West Virginia (WV) (i.e. males, females, 0–17, 18–15, 26–45, 46–65, >66 years old).

Methods/Approach A SAH order was in effect in WV from March 23 until May 4, 2020 (week 13–18 of 2020). Counts of individuals who incurred motor-vehicle-related injuries that required emergency medical treatment in WV were obtained from the Centers for Disease Control and Prevention's Syndromic Surveillance system from Jan 1, 2019 thru Sept 6, 2020. Counts were obtained by week-year and by population subgroup. The presence of the SAH order was binary coded by week. Negative binomial regression was used to assess the relationship between the presence of a SAH and injury rates. 2019 population sub-group estimates were obtained from the United States Census Bureau and used as offsets in the models.

Results There were 28,763 motor-vehicle related injuries during the study period. The presence of the SAH was associated with 46% less injuries overall [Incident Rate Ratio (IRR) =0.54, 95% CI 0.47, 0.62]. During the SAH, females experienced fewer injuries than males (IRR=0.49 vs 0.59, respectively) and the number of injuries decreased with age (p-value 0.031).

Conclusions WV's SAH order was associated with lower motor-vehicle injury rates across all populations sub-groups. These findings indicate that most population sub-groups likely altered their travel behaviors which resulted in lower motor-vehicle injury rates.

Significance These findings may inform future policies that impose emergency travel restrictions in populations.

Partnerships for prevention

0012 SINGLE MOTHERS: PORTALS OF CRITICAL KNOWLEDGE IN THE EFFORT TO MITIGATE YOUTH GUN VIOLENCE

J Gasparini. Shepherd University, Shepherdstown, USA

10.1136/injuryprev-2021-SAVIR.3

Statement of purpose Single mothers and their children residing in high-crime communities (HCCs) in the United States are disproportionately exposed to crime, and therefore, the criminal justice system. Specific challenges of single motherhood in HCCs compound the link between juvenile offending and single- female-headed households. Little is known, however, about how single mothers in HCCs perceive and use the police as a resource to help prevent juvenile offending, specifically gun violence. The purpose of this study was to explore the lived experiences of single mothers with police as they related to the arrest of their children for a gun crime. The research questions focused on understanding how single mothers in HCCs currently perceive the police in terms of effectiveness in preventing youth gun violence, if they currently use the police as part of a prevention strategy, and, if so, how they engage with the police. The theoretical base for this study was Husserl's transcendental phenomenological theory.