Youth violence

0005 IMPACT OF COVID ON HOSPITAL BASED VIOLENCE INTERVENTION PROGRAMS

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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

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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

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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.

Methods/Approach Snowball sampling was used to identify 7 participants for individual interviews. Data from the interviews were coded and categorized for thematic analysis.

Results Eleven themes emerged from the data analysis which highlighted the importance of officer demeanor and trust-building abilities. Findings also suggested that single mothers in HCCs should be regarded by police agencies as critical portals of information regarding youth gun crime.

Significance The implications for social change and injury and violence prevention science include informing law enforcement policy makers of best practices for collaborating with single mothers in HCCs to prevent youth gun violence. Implementing these practices can help reduce the loss of life as a result of youth gun violence and reduce the number of youth arrested for gun crimes annually.

Child maltreatment

0013 COMMUNITY-LEVEL PREVENTION FOR CHILD ABUSE AND NEGLECT

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Statement of purpose One in eight children is estimated to experience child abuse and neglect (CAN) before 18 years of age. Ohio has a drug overdose death rate nearly twice that of the United States (19.8 per 100,000). Prior research demonstrates that parents who misuse substances are more likely to engage in abusive and neglectful parenting. However, there is a significant variation in rates of drug overdoses and CAN across neighborhood areas. Therefore, understanding how neighborhood structural characteristics and social processes can impact the relationships between opioid misuse and CAN is pivotal. This study aims to provide a greater understanding of the environmental and social mechanisms that support or hinder maltreating behaviors by caregivers.

Methods/Approach In the first phase of this study, to analyze the role of opioid overdoses on CAN, Bayesian space-time models were conducted using data from Ohio's Statewide Integrated Child Welfare Information System, naloxone administration data obtained by the Ohio Emergency Medical Services Incident Reporting System, and information on opioid dispensing practices from the Ohio Automated Rx Reporting System. We have selected 16 census block groups in Ohio, that have at least 500 children in them (CBGs), providing equal representation from urban, suburban, rural, and Appalachian communities. Each of the 4 regions contributes 2 CBGs with higher (high risk) and lower (low risk) than model-based CAN rates. In the current phase of this study, we are interviewing caregivers residing in the CBGs and key informants who serve those in the CBGs to discuss neighborhood social processes, resources available to families, their view on the impact of the opioid crisis in the community, their view on parenting practices within the community, and sociodemographic variables.

Significance We believe that one way of creating and sustaining safer environments for children is to develop CAN prevention efforts that focus on strengthening neighborhood structures and social processes.

Firearms

0018 NEIGHBORHOOD GUN VIOLENCE IS ASSOCIATED WITH INCREASED MENTAL HEALTH-RELATED PEDIATRIC EMERGENCY DEPARTMENT UTILIZATION

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Statement of purpose Community violence exposure is known to have adverse effects on children's long-term mental health. We aimed to examine the association between episodes of neighborhood gun violence and subsequent acute mental health-related pediatric emergency department (ED) utilization.

Methods/Approach This location-based neighborhood study included children living in Philadelphia, PA who presented to a children's hospital ED from 1/1/2014–12/31/2018. We included children in the study if they had one or more ED visits within 7, 30, and 60 days of a neighborhood shooting and lived within 660 feet (2–3 city blocks) of where the incident occurred. Mental health-related presentations were identified using ED chief complaint data. We used multivariable logistic regression to compare odds of mental health-related ED utilization before and after neighborhood shootings.

Results There were 4,217 episodes of gun violence in the study area from 2014–2018, and 54,465 children living near a shooting had one or more ED visits in the 60 days before or after this shooting. Most of these children were Black (84.5%) and Medicaid-insured (78.2%). After adjusting for age, race, ethnicity, insurance status, and zip code, children residing within 660 feet of an episode of gun violence had greater odds of mental health-related ED presentations in the subsequent 7 days (aOR 1.49, 95% CI, 1.08–2.04), 30 days (aOR 1.25, 95%CI 1.05–1.48), and 60 days (adjusted odds ratio (aOR 1.14, 95%CI 1.01–1.29). In stratified analyses, this effect was strongest for Black children (7-day aOR 1.52, 95% CI 1.08–2.14) and children ages 11–19 (7-day aOR 1.60, 95%CI 1.08–2.39).

Conclusions and Significance Neighborhood gun violence has immediate adverse effects on children's mental health. Recognizing the potentially triggering event and mitigating these health impacts will require both community-based support for children exposed to violence, and trauma-informed approaches during and after ED visits.

Child passenger safety

0020 THE IMPACT OF FOCUSED CHILD PASSENGER SAFETY (CPS) EDUCATION ON PEDIATRIC NURSES' KNOWLEDGE OF CPS

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Statement of purpose Motor vehicle traffic crashes are one of the top mechanisms of injury for children in New York City and throughout the United States. The American Academy of Pediatrics (AAP, 2019) encourages hospitals to provide child passenger safety (CPS) programming and resources to ensure