

Results The simulator received favorable realism scores for all domains with 'appearance' receiving the highest average realism score (4.58, SD = 1.03) and 'sound' receiving the lowest (3.86, SD = 1.57). The most suggested improvements were to tighten the steering wheel (27%), make the front tires visible (19%), and that no improvements were needed (18%). FEOs 65+ responded 5.00 [95% CL=-1.23, 11.24] seconds slower than younger FEOs when adjusted for medical diagnoses, labeled medication use, tractor generation, and tractor horsepower.

Conclusion The realism scores and suggestions from the FEOs demonstrated that the tractor miniSim is a viable approach to studying tractor driving. When examining the association between age and driving performance, it demonstrated that older FEOs have slower perception response times and therefore greater crash risk than younger FEOs.

Significance Farm equipment crashes represent the nation's leading cause of work-related death within the deadliest occupation. As farmers continue to grow older, the need to understand their age specific risk factors for injury will continue to rise. Trends demonstrated in this study have the potential to become more significant as tractors increase size and velocity thereby increasing stopping distances.

Domestic & intimate partner violence

0060 SOCIAL SUPPORT, MARGINALIZATION, AND TEEN DATING VIOLENCE AMONG NEW MEXICO YOUTH

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Statement of purpose This study uses data from the 2015 New Mexico Youth Risk Behavior Survey to determine whether perceived support is associated with lower prevalence of teen dating violence among marginalized youths.

Methods/Approach I conducted hierarchical linear regression to predict the effect of social support in three domains (at home, at school, and in community) on teen dating violence when controlling for the effects of marginalized identity, including sexual orientation, race/ethnicity, parent education, physical disability, nativity and homelessness.

Results Marginalized identities predicted higher prevalence of dating violence, with girls, homeless students, students with disabilities or long-term health problems, students born outside the U.S.A. and LGB students and those unsure of their sexual orientation experiencing more dating violence than their peers. When evaluated independently, social support at home, at school, and in the community each significantly predicted lower prevalence of teen dating violence. In multi-variable modeling, however, only home support and community support remained significantly predictive of less dating violence when controlling for marginalized identities.

Conclusion Social support in this study accounted for a small amount of the total variability in teen dating violence, while marginalization explained much more. Even so, these findings suggest that positive relationships with adults at home and in the community may help to protect marginalized young people from dating violence victimization.

Youth violence

0061 BARRIERS AND FACILITATORS TO SUCCESSFUL RECRUITMENT AND ENGAGEMENT OF BLACK AND LATINX YOUTH IN HOSPITAL-BASED VIOLENCE INTERVENTION PROGRAMS

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Statement of purpose Black and Latinx youth bear an unequal burden of adversity and trauma with an overrepresentation in violent injury and gunshot wound hospital admissions. To address the long-reaching developmental impacts on health and wellbeing, hospital-based violence intervention programs (HVIPs) have emerged to provide case management services after discharge. Recruitment and engagement of youth are primary barriers to program success, yet little research exists on best practices. By convening a sample of representatives from established HVIPs, this study illuminates barriers and facilitators to successful recruitment and engagement of youth.

Methods/Approach Drawing from four HVIPs based in Midwest and Northeast cities of similar demographics in the United States, a purposive sample of representatives (n = 7) participated in a focus group (90 minutes). Content analysis was conducted in three phases. First, two researchers separately completed open and focused coding resulting in preliminary categories. Second, a researcher reviewed these codes for accuracy, and revisions were made after consensus was reached. Third, preliminary themes were vetted and finalized by the full research team using consensus. A code book was created documenting all changes.

Results Two themes emerged related to barriers and facilitators: 'Individual/Relational' with categories such as Patient and Parent-Specific Characteristics, Building Rapport, Enhancing the Teachable Moment, and Building Relational Health; and 'Structural/Systemic' with categories including Hospital Investment, Structural Racism, Workflow, Training and Preparedness of Staff, and Trauma Informed Procedures.

Conclusions The findings illuminate barriers and facilitators relevant to structural, programmatic, familial, and youth-focused aspects of HVIPs. Strategies to address these barriers are discussed.

Significance This is the first study to examine facilitators and barriers to recruitment and engagement of clients in HVIPs. As the emerging standard of care for violent injury in hospitals, studies advancing the practices of HVIPs are critical to ending the cycle of violence experienced by youth of color.

Domestic & intimate partner violence

0062 IN THE MIDST OF COVID-19: CHALLENGES AND CREATIVE SOLUTIONS TO CONDUCT A RANDOMIZED TRIAL WITH IMMIGRANT RELIGIOUS LEADERS TO PREVENT INTIMATE PARTNER VIOLENCE

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