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

¹K Parekh, ¹N Michaels, ²B Freisthler. ¹Center for Injury Research and Policy in The Abigail Wexner Research Institute at Nationwide Children's Hospital, Columbus, USA; ²The Ohio State University College of Social Work, Columbus, USA

10.1136/injuryprev-2021-SAVIR.4

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

^{1,2}A Vasan, ^{1,2}H Mitchell, ¹D Buckler, ¹D Wiebe, ^{1,2}J Fein, ¹E South. ¹University of Pennsylvania, Philadelphia, USA; ²Children's Hospital of Philadelphia, Philadelphia, USA

10.1136/injuryprev-2021-SAVIR.5

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

¹G Ramsey, ²C Grippi. ¹Maimonides Medical Center, Brooklyn, USA; ²LIU Brooklyn Harriet Rothkopf Heilbronn School of Nursing, Brooklyn, USA

10.1136/injuryprev-2021-SAVIR.6

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

that children are being transported safely upon discharge. Literature shows that implementing a CPS education program in pediatric hospitals is an effective way to decrease car seat misuse. Although discharge education is recommended, there is a lack of literature to show the knowledge level of nurses who provide this education. The purpose of this study is to determine the CPS knowledge level of RNs before and after an educational session given by a Certified Child Passenger Safety Technician Instructor.

Methods/Approach 133 RNs in the Neonatal ICU, Pediatric ICU, General Pediatric Unit, and Mother-Baby Unit in a hospital in New York City participated. Pre/post-test design was used. A demographic questionnaire and an 11 question pre/post-test was given. A 30-minute education session on CPS was given by a Certified Child Passenger Safety Technician Instructor to all RNs.

Results There was a significant increase ($p \leq 0.0001$) in child passenger safety confidence and knowledge level in participating RNs after a 30-minute modular educational session, as evidenced by post-test scores.

Conclusion Appropriate knowledge of CPS is essential for RNs when they are expected to provide discharge education to caregivers. The results of this study support providing formal CPS education to all RNs working in pediatric hospitals.

Homicide/Assault

0021

THE IMPACT OF EXPOSURE TO WAR-RELATED VIOLENCE AND POST-MIGRATION LIVING DIFFICULTIES ON NEUROPSYCHIATRIC MORBIDITY: THE CASE OF SYRIAN REFUGEES IN LEBANON

¹S Al-Hajj, ¹W El Sheikh, ¹H Abou Abbas, ²S Mondello, ³H Harati, ¹F Kobeissy. ¹American University of Beirut, Beirut, Lebanon; ²University of Messina, Messina, Italy; ³Lebanese University, Beirut, Lebanon

10.1136/injuryprev-2021-SAVIR.7

Statement of purpose Violence adversely impacts individuals' mental health and contributes to the development of neuropsychiatric disorders. This study aims to assess the psychological state of the Syrian refugee population exposed to war-related violence and analyze their association with neuropsychiatric morbidity.

Methods/Approach In 2017, a refugee cohort in Lebanon completed the Harvard Trauma Questionnaire (HTQ), Post-Migration Living Difficulties Checklist (PMLDC), Posttraumatic Stress Disorder Checklist for DSM-5 (PCL-5), and the Depression and Anxiety Scale-21 Items (DAS-21). We performed multivariable logistic regressions to examine potential factors associated with long-term neuropsychiatric disorders.

Results Of the 220 refugees, 191 were eligible to participate, of whom 92.15% were exposed to at least one war-related violence. As for the neuropsychiatric morbidity, 64% met the cut-off point for PTSD diagnosis, while 62.8% and 64.4% suffered from moderate to extremely severe depression and anxiety, respectively. We identified war-related violence as the strongest predictor of PTSD (adjusted [OR] 1.16, 95% CI 1.07 – 1.26; $p = 0.001$) and of severe and extremely severe depression (OR 1.21, 95% CI 1.05 – 1.39; $p < 0.01$). Only

higher anxiety levels were associated with post-migration living difficulties (OR 1.03, 95% CI 1.01 – 1.05; $p < 0.0001$). While lower educational attainment was a significant risk factor for all three neuropsychiatric disorders, being a male was a significant protective factor for both depression (OR 0.19, 95% CI 0.04 – 0.96; $p < 0.05$) and anxiety (OR 0.35, 95% CI 0.15 – 0.85; $p < 0.05$).

Conclusions War-related violence constitutes a major risk factor for multiple neuropsychiatric disorders. Identified prognostic factors include post-migration living difficulties, educational attainment, and gender.

Significance This study highlights the adverse impact of violence on individuals. Generated evidence should be adopted to develop and implement tailored psychological programs targeting refugees and displaced individuals.

Advocacy

0022

#STAYATHOMESAFETY CAMPAIGN TO PREVENT HOME-RELATED INJURIES DUE TO COVID-19

T Mehan, S Smoske. Center for Injury Research and Policy in the Abigail Wexner Research Institute at Nationwide Children's Hospital, Columbus, USA

10.1136/injuryprev-2021-SAVIR.8

Statement of purpose Prevent Child Injury launched the #StayAtHomeSafety campaign on March 25th, 2020 in response to the COVID-19 pandemic with the goal of increasing awareness of child injuries that occur in and around the home, as families were spending more time at home due to directives to shelter in place and socially distance.

Methods/Approach The campaign included a Twitter chat and a frequently updated page on the Prevent Child Injury website that served as a hub for home safety and COVID-19 information. Before the event, we called upon individuals and organizations (American Academy of Pediatrics, Parents Magazine, Safe Kids Worldwide, and more) to participate in spreading awareness of the campaign and taking part in the Twitter chat.

Results The #StayAtHomeSafety Twitter chat resulted in 336 contributors, 999 tweets with a reach of more than 6.2 million and more than 18.3 million timeline deliveries. The COVID-19 webpage on the Prevent Child Injury website has over 2,000 pageviews.

Conclusions In less than a week, nearly 20 organizations and 8 poison centers signed on to become partners of the campaign by promoting the materials to their networks, creating their own #StayAtHomeSafety materials, and participating in the Twitter chat. The hashtag continues to be used with 500+ new contributors, writing 1000+ tweets reaching 2 million more people and 4.2 million more timeline deliveries.

Significance With schools, businesses, and public places closing in late March 2020, children spent more time in the home under circumstances that included altered routines, gaps in supervision, and parental stress. These conditions put children at increased risk for injury in the home. #StayAtHomeSafety focused on protecting children from preventable injuries and helped parents and caregivers understand why preventing injury is especially important in the midst of a national emergency.