

reviewing transcripts, a codebook will be developed and used to analyze the data using Atlas t.i. Coding will be done independently and intercoder reliability will be assessed.

Results Re-occurring themes in the data analysis will inform the significance of social supports and what social supports are available to this population. Data collection is underway and preliminary study results will be available by April 2021.

Conclusions This research will inform what healthy relationships are supporting long-term recovery and appropriate parenting practices that could prevent child injury and abuse as well as increase permanency outcomes.

Transportation safety

0098 COMMUNITY ENGAGEMENT AND THE DEVELOPMENT OF A RURAL ROAD SAFETY CAMPAIGN

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Statement of purpose Evaluation of community engagement in the development and dissemination of a rural roadway safety campaign.

Methods/Approach We implemented 'We're On This Road Together,' a health communication campaign that targeted rural drivers' interactions with farm vehicles and had three main messages: Slow Down, Leave More Space, and Avoid Passing. Campaign development and implementation was guided by a community advisory board (CAB) who gave input and direction on campaign message design and dissemination at monthly meetings. They also led campaign activities (hanging banners, distributing swag-totes, car air fresheners, etc.).

To guide our future collaborations with CABs, we conducted in-depth, semi-structured telephone interviews with CAB members (n=8) in the summer of 2020. Interviews were recorded and audio files were transcribed by a third-party service. After transcription, a research team member coded the interview transcripts. Codes were then organized by common themes: 1) overall experience, 2) responsibilities & commitment, 3) perceived campaign success, 4) resources needed for project implementation, and 5) recommendations for improvement.

Results Interview length averaged 25 minutes (range: 16–41). CAB members reported overwhelmingly positive experiences, reasonable time commitment, and successful format and frequency of communication. They viewed the overall project a success and valued our team's community engagement efforts. However, the CAB had recommendations for improving campaign impact and reach, including adding online/social media campaign elements, expanding diversity of CAB membership (age, occupation/industry), and team-building activities to increase group bonding.

Conclusions Formation of a community advisory board was successful and critical in message development, implementation, and overall impact of our rural road safety campaign.

Significance This project demonstrates how to engage community advisors in development and delivery of a road safety campaign, which can be applied to other injury and violence prevention campaign activities.

TBI/Concussion injuries

0099 VALIDITY OF ICD-10-CM DIAGNOSIS CODES FOR TRAUMATIC BRAIN INJURY IN VA ADMINISTRATIVE DATA

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Statement of purpose International Classification of Diseases, Tenth Revision (ICD-10), Clinical Modification codes are used to identify Veterans with traumatic brain injury (TBI) for surveillance and research. We examined the validity of using ICD-10 codes in Veterans Health Administration (VA) administrative data to identify Veterans with TBI.

Methods/Approach Clinician-confirmed TBI cases and non-cases after October 1, 2016 were extracted from the VA Comprehensive TBI Evaluation (CTBIE) database, a standardized TBI evaluation tool, and used as the criterion standard. Accessing VA administrative healthcare data, we compared three series of TBI-related ICD-10 codes recommended by the Centers for Disease Control and Prevention (CDC), the Defense and Veterans Brain Injury Center (DVBIC), and the VA TBI Program Office (VA) to clinician-confirmed TBI diagnoses. Sensitivity, specificity, and concordance were calculated. The validity of distinguishing TBI severity (mild versus moderate/severe), using DVBIC-recommended codes, was also examined.

Results Among 29,767 Veterans who received a CTBIE between 2016 and 2019, 20,670 (69.4%) received a clinician-confirmed TBI diagnosis and 20,760 (69.7%) had at least one TBI-related ICD-10 code assigned from any series. The CDC series had low sensitivity (40.8%) but high specificity (80.7%; 53.0% concordance). The DVBIC series had moderate sensitivity and specificity (71.7% and 63.9%, respectively; 69.3% concordance). The VA series had high sensitivity (81.8%), but moderate specificity (58.8%; 74.7% concordance). The sensitivity of DVBIC-recommended codes to distinguish TBI severity was high (83.4%), but specificity was low (21.5%; 76.4% concordance).

Conclusion We found that all three series of ICD-10 codes for TBI resulted in considerable misclassification of clinician-confirmed TBI cases and non-cases. The potential misclassification in studies using ICD-10 codes to examine TBI prevalence and outcomes among Veterans should inform surveillance and research efforts.

Significance Examining the validity of methods used for enumerating TBI cases allows researchers to interpret and translate their findings in the context of potential error.

Social determinants of health

0101 COMMUNITY GREENING, FEAR OF CRIME, AND MENTAL HEALTH OUTCOMES IN FLINT, MICHIGAN

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Statement of purpose The purpose of this study was to explore how land parcel maintenance is associated with positive mental health outcomes using data collected during community greening efforts conducted in Flint, MI in 2017–2018. Unmaintained vacant land in urban areas is associated with a number of negative outcomes for residents of urban areas, including mental and physical health, safety, and quality of life. Community programs which promote land parcel maintenance in urban neighborhoods have been found to reverse some of the effects that unmaintained land has on nearby residents.

Methods/Approach Trained observers assessed the maintenance of approximately 7200 land parcels and surveyed 691 residents (57% Female, 53% Black, M age = 51). We grouped land parcels and aggregated resident data to 397 street segments and compared three structural equation models (SEM) to estimate the relationships between parcel maintenance, fear of crime, and mental distress for residents when controlling for a set of individual-, neighborhood-, and Census-level variables.

Results We found a negative association between parcel maintenance values and fear of crime, and a positive association between fear of crime and mental distress at the street segment level.

Conclusions Our results supported our hypothesis that the general land maintenance is related to mental distress through its relationship with residents' fear of crime.

Significance Continued development and support of community greening programs are likely to be associated with positive health and safety outcomes for residents in maintained neighborhoods.

Acute care

0103

COMPARING THE PERFORMANCE OF TWO SHORT PREDICTIVE SCREENERS TO ASSESS FUTURE DEVELOPMENT OF PTSD AND DEPRESSION: RESULTS FROM A COHORT STUDY OF SERIOUSLY INJURED ADULTS

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Statement of purpose To appraise the ability of two short clinical screeners designed to predict future development of post-injury depression and PTSD in traumatically injured patients.

Methods/Approach This study is part of a prospective longitudinal cohort study to improve the health of urban Black men after serious injury. The sample consisted of English-speaking, self-identified Black men at least 18 years old, residing in the Philadelphia metropolitan area, who were hospitalized for an acute traumatic injury. The two screeners used were the Penn Richmond Screener (PRS) and the Posttraumatic Adjustment Screen (PAS).

Results A total of 623 participants completed baseline interviews. Over 80% completed the 3-month follow-up interview and had complete data for depression (n = 502) and PTSD (n = 501). Of these, 177 (35.3%) met criteria for depression and 145 (28.8%) for PTSD; 116 participants met criteria for

both depression and PTSD (23.2%). Both screeners have similar positive predictive values (PPV) for depression. PAS performs slightly better in PPV for PTSD. Both screeners have high negative predictive values for PTSD and depression, so they will adequately identify individuals who will not develop symptoms. The area under the curve for PTSD and depression in both screeners is similar, so they similarly classify those with and without future risk of symptom development.

Conclusion PRS and PAS, developed through different methods and with different populations, show comparable predictive ability within the study population. Thus, mental health outcomes can be predicted in various populations using screeners the clinician values for brevity over the similarity of patient population to the screener's test population.

Significance ACS-COT encourages screening all patients for depression and PTSD risk. Integrating a predictive screener prior to discharge is critical to identifying those at risk and targeting patients who would benefit from post-discharge concurrent screening.

Health communication

0104

SOCIALIZATION OF SAFETY VALUES IN CHILDREN: THE ROLE OF PARENT AND CHILD GENDER

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Statement of purpose Little is known about the role of fathers in the socialization of safety values in children. Here, we examine how parent and child gender influence the socialization of safety values.

Methods/Approach Thirty-six parent-child dyads, with 8- to 10-year-old children (18 females, 27 mothers), jointly discussed and rated a set of 12 photographs depicting a child engaged in various physical activities (eg, reaching over a hot burner to pick up a pan). Conversations were coded for measures of who provided the initial rating, disagreements about safety, dangerous features and potential outcomes used to support ratings, and the final rating.

Results Mixed-effects regressions included fixed effects of parent and child gender, a random intercept of dyad, and a covariate of child age. Mothers were 1.90 times more likely to provide the first rating with daughters, whereas fathers were 3.49 times more likely to do so with sons, $z = 1.96$, $p = 0.04$. Mothers and sons were 1.75 times more likely to disagree when compared to mother-daughter dyads, whereas fathers and daughters were 2.27 times more likely to disagree with one another compared to father-son dyads, $z = -2.70$, $p = 0.01$. While gender did not significantly predict references to dangerous features or potential outcomes, dyads with fathers rated the activities as being safer compared to dyads with mothers, $t(31) = -2.13$, $p = 0.04$.

Conclusions Allowing children to provide the first safety rating is critical for understanding their perspective, yet parents in same-gender dyads did so more often than opposite-gender dyads. Disagreements are important in parents' efforts to socialize safety values, but again same-gender dyads disagreed less than opposite-gender dyads.

Significance Fathers may be underplaying riskiness relative to mothers and therefore increasing risk of childhood injury.