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≤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

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

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*

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.