

influence of adolescent-adult networks on violence exposure and involvement. This egocentric social network analysis examined adolescent-adult support networks, youths' and adults' attitudes towards violence and retaliation (ATVR), and youth violence exposure.

Methods: 106 youths, ages 12–22, completed egocentric social network surveys through a community-based violence prevention study in Pittsburgh, PA, from April 2019 to March 2020. Validated survey measures sought to capture youths' past 30-day violence perpetration, victimization, and witnessing, youths' own attitudes towards violence and retaliation, as well as youths' perceptions of their caregiver's attitudes towards violence and retaliation. Through the egocentric social network survey measures, youth enumerated their family-, school-, and community-based adult supports (alters), and reported on each alter's violence involvement (ever in a fight, gang, or shot/stabbed) as well as their perceptions of each alter's attitudes towards violence and retaliation. Adjusted Poisson regression (age, sex, race, parental education, household composition) separately examined associations between 1) youths', caregivers' and adult supports' (alters) attitudes towards violence/retaliation, 2) alters' violence involvement, and youths' violence perpetration, victimization, and witnessing.

Results: Mean participant age was 16.7 years (SD=1.9); 55.6% were female and 84.8% identified as Black or African American. Overall, in the past 30 days, 70.8% of youth perpetrated violence, 78.3% experienced victimization, and 92.5% witnessed violence. The mean score for youths' attitudes towards violence and retaliation was 3.35 (observed range:1.5–5) and 75.5% of youth had endorsed very high attitudes towards violence and retaliation on at least one item. Mean score for perceived caregivers' attitudes towards violence/retaliation was 3.12 (observed range:1–5). From the egocentric social network survey data, youth identified a mean of 4.8 adult supports in their networks (observed range:1–14). An average of 73.6% of adult supports were either immediate or extended family and 38.2% of all adult supports were involved in violence. Overall, 93.3% of youth listed at least 1 parent/guardian/caregiver as an adult support in their network and 55.6% of those youth reported that at least 1 parent/guardian/caregiver had been involved in violence. Youths' own attitudes towards violence/retaliation were significantly associated with violence perpetration (aIRR 1.34, 95%CI:1.10–1.62), but not with victimization (aIRR 1.18, 95%CI:0.93–1.51) or witnessing (aIRR 1.16, 95%CI:0.97–1.39). There were no significant associations between perceived caregiver or perceived adult supports' (alters) attitudes towards violence/retaliation and youth violence perpetration, victimization, or witnessing. Identifying at least one adult support (alter) who had been involved in violence was significantly associated with youth violence victimization (aIRR 1.74, 95%CI:1.04–2.90) and witnessing violence (aIRR 1.71, 95%CI:1.19–2.47). Identifying any parent/guardian/caregiver in one's support network who had been involved in violence was significantly associated with youth witnessing violence (aIRR 1.38, 95%CI:1.04–1.84).

Conclusions: Violence prevention interventions designed to leverage adolescent-adult support networks should consider trauma-focused supports for those adults which acknowledge how exposure to violence may shape violence risk.

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FACTORS ASSOCIATED WITH ADOLESCENTS AND YOUNG ADULTS' INTENTION TO RECEIVE A COVID-19 VACCINE

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Purpose: To lessen the impact of negative health outcomes associated with COVID-19, effective vaccines have received Food and Drug Administration (FDA) approval for those 16 years and older and Emergency Use Authorization (EUA) status for those 12–15 years old. Several studies have identified factors associated with intention to receive a vaccine within the general population such as gender, race, perceiving potential side effects from a COVID-19 vaccine, and mistrust of the government. However, there are limited studies assessing modifiable factors specifically among adolescents and young adults' intention to receive a COVID-19 vaccine. The study aim was to determine characteristics and attitudes, among a group of adolescents and young adults, associated with intention to receive a COVID-19 vaccine.

Methods: The study population was comprised of adolescents (12–17 years old) and young adults (18–25 years old) seeking primary care at a large Midwest academic medical center serving a racially and ethnically diverse community. In January 2021, potential participants were sent an email with a link to an online survey and all responses to the survey were included in the analysis. The survey included multiple items including assessment of the participants' beliefs about COVID and vaccines against the infection as well as beliefs about vaccines in general. Survey results were analyzed using separate multivariable logistic regression analyses with stepwise variable selection to determine characteristics and attitudes associated with intent of participants to be vaccinated against COVID-19.

Results: A total of 585 people (n = 248 adolescents and n = 337 young adults) responded to the survey. The mean age of adolescents was 14.8 years (SD = 1.8) vs 20.4 years (SD = 2.0) for young adults. Of the respondents, 60.1% (n = 149) of adolescents and 65.6% (n = 221) of young adults stated they intended to receive a COVID-19 vaccine. For both adolescents and young adults, positive attitudes towards vaccines in general (AOR = 3.55, 95% CI: 2.17–5.80 for adolescents; AOR = 1.39, 95% CI: 1.19–1.64 for young adult; p < 0.001 for both groups), and perceiving the COVID-19 vaccine to be safe (AOR = 1.54, 95% CI: 1.32–1.81 for adolescents; AOR = 7.29, 95% CI: 3.79–14.02 for young adults; p < 0.001 for both groups) were associated with an intent to be vaccinated against COVID. In addition, knowing enough about the COVID-19 vaccine to make a decision (AOR = 2.20, 95% CI: 1.44–3.38, p < 0.001) was associated with intent to receive a COVID-19 vaccine for young adults.

Conclusions: Positive attitudes about vaccines in general and perceiving the vaccine to be safe were factors associated with both adolescents and young adults' intention to receive a COVID-19 vaccine. This study identifies potential modifiable factors which may lead to an increase adolescents and young adults' intention to receive a COVID-19 vaccine.

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