

Overview

About Us

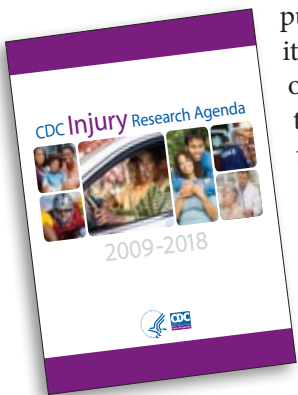
In the United States—regardless of sex, race, or economic status—injuries remain a leading cause of death for people of all ages. In 2006, for example, injuries accounted for more than 170,000 deaths. But injury deaths are only part of the picture; millions are nonfatally injured each year. At CDC's National Center for Injury Prevention and Control (CDC's Injury Center), we work to ensure everyone in the U.S. can live life to their fullest potential. Yet we need to learn more about the causes, risk factors, and preventive measures for injuries and violence. We also want to know more about the most effective strategies to reduce the consequences of those who are injured.

Our Mission

The mission of the National Center for Injury Prevention and Control is to prevent injuries and violence, and reduce their consequences.

Research Agenda Background

The 2002 CDC Injury Research Agenda guided research until 2007. The agenda was useful in directing our research efforts at the Injury Center as well as those of our public health partners. Toward the end of 2007, the Injury Center reviewed its research accomplishments and its progress toward achieving the goals outlined in the original agenda. The Center worked with its research partners to identify any research gaps. The result is the revised agenda, which describes the Injury Center's research needs and priorities for 2009–2018.



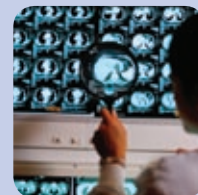
The agenda now includes chapters about child maltreatment and traumatic brain injury and places increased emphasis on evaluation research, cost studies, and widespread distribution and adoption of effective community-based programs.

Research Approach

The Injury Center uses the public health approach to prevent injuries and reduce their consequences. This process:

- Describes the problem;
- Identifies risk and protective factors;
- Develops and tests prevention interventions and strategies; and
- Ensures widespread adoption of effective interventions and strategies.

The Injury Center is the only organization in the federal government responsible for addressing all phases of the injury research framework, from basic and descriptive research to intervention development and testing to implementation research, for all major causes of injury among all age groups.



Centers for Disease Control and Prevention
National Center for Injury Prevention and Control
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CDC Injury Research Agenda[®]

Social-Ecological Model

The social-ecological model helps us frame discussion and organization of research ideas within the agenda.

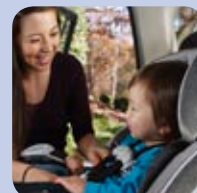
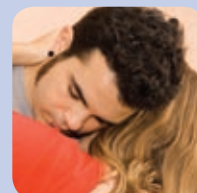
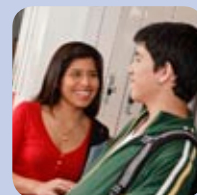


The model examines factors that increase or decrease the risk for violence, injury, or recovery from trauma by dividing those factors into four levels: individual, relationship, community, and societal. The overlapping rings illustrate how factors at each level strengthen or modify factors at another level. Multiple chapters in the agenda use this model to achieve a better understanding of the comprehensive nature of violence and injury.

Research Priorities

The agenda’s research priorities are those identified as warranting the greatest attention and the greatest share of the Injury Center’s intramural and extramural resources during the next 10 years. The identified 2009–2018 priorities are in the following topic-specific chapters:

Injury Response	Unintentional Injury Prevention	Violence Prevention
Acute Injury Care	Home and Community	Child Maltreatment
Tramatic Brain Injury	Sports, Recreation, and Exercise	Sexual Violence and Intimate Partner Violence
	Transportation	Suicidal Behavior
		Youth Violence



Categorizing Research Priorities

Three specific criteria guided the Injury Center’s selection of research priorities: 1) institutional mission, 2) public health burden, and 3) research opportunity. Once identified, priorities within each topic-specific chapter were categorized into two tiers. The first tier contains those priorities that reflect the most immediate research needs and those which, as resources become available, should be supported first. Categorizing the priorities of the two tiers does not imply that the first tier of the priorities is more important than the second tier or that the research related to second tier should wait until 2014 to begin. Rather, the tiers reflect the logical progression from basic research to establishing interventions. Tier one should not, however, be considered more important than tier two.

Additional Priorities

In addition to the topic-specific research priorities, the Injury Center includes within its research agenda several crosscutting and emerging priorities. The extent of the Center’s research and its place within the broader public health field offers opportunities for investigating crosscutting challenges and including these priorities in the agenda. Their inclusion also increases opportunities for independent and joint funding from multiple sponsors. For injury prevention and control research to continue to serve societal, community, and individual needs, CDC-funded researchers need to focus on priority areas. This approach is best suited to fill any research gaps and to ensure the successful movement of priority research topics through all phases of the Center’s research framework.



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