

## Partners in Prevention

CDC's Injury Center could not do its job without its partners. They are essential at every stage in the public health approach—collecting data about injuries, sharing insight about risk factors and strategies for prevention, developing and testing programs to prevent and control injury, and helping effective programs reach people at risk. CDC's Injury Center works with private industry, other federal agencies, state and local agencies and health professionals, national nonprofit organizations, academic organizations and institutions, and international agencies to achieve its goal of preventing injuries and resulting deaths and disabilities.

The list of partners found in this section is far from exhaustive. It is merely a sample of the wide variety of organizations and agencies with which we work closely. While we value our relationships with all our partners, there simply is not space to list them all in the *CDC Injury Fact Book*.

“Many of the nearly 50 million injuries that occur each year in the United States are preventable . . . we need greater recognition of the value of our prevention efforts . . . the benefits of preventing motor vehicle crashes, falls, residential fires, childhood abuses, and other injuries are significant.”

*NCIPC Director, Dr. Ileana Arias*

CDC works with many federal agencies to address injury issues that span all life stages. Below are examples of activities underway with some of the Injury Center’s federal partners.

#### **Defense and Veterans Brain Injury Center**

The Defense and Veterans Brain Injury Center (DVBIC) works to ensure that military personnel and veterans with brain injury receive the best possible evaluation, treatment, and follow-up. CDC’s Injury Center is collaborating with DVBIC to study outcomes of traumatic brain injury (TBI) among military personnel using methods developed through CDC-funded TBI follow-up studies.

#### **Health Resources and Services Administration**

CDC’s Injury Center recently partnered with the Health Resources and Services Administration (HRSA) to support the expansion of the Institute of Medicine’s Future of Emergency Care in the U.S. Health System study. This expansion will include focused assessments of pediatric emergency care and issues relating to pre-hospital emergency medical services. HRSA is also a partner in efforts to improve how states use traumatic brain injury data.

#### **Indian Health Service**

The Indian Health Service (IHS) is a valuable partner in efforts to prevent injuries and deaths among Alaska Natives and Native Americans. For example, the IHS partnered with CDC to research Native American childhood injuries and disseminate findings throughout the IHS and among tribes.

#### **National Highway Traffic Safety Administration**

In its efforts to prevent transportation-related injuries and deaths, CDC works closely with the National Highway Traffic Safety Administration (NHTSA), part of the U.S. Department of Transportation. NHTSA and CDC jointly published strategies to improve bicycle safety and child pedestrian injuries. The organizations also collaborated for World Health Day 2004 to organize and implement a comprehensive strategy for promoting road safety in the United States. Joint research projects have involved graduated licensing for teens, alcohol-impaired driving, and systematic reviews of what works to prevent motor vehicle crashes and related deaths. CDC and NHTSA are collaborating with the Task Force on Community Preventive Services to summarize what is known about the effectiveness of interventions to reduce alcohol-impaired driving and increase seat belt use (available at [www.thecommunityguide.org](http://www.thecommunityguide.org)). NHTSA also offers vital data about motor vehicle crashes and related deaths.

### **U.S. Consumer Product Safety Commission**

The U.S. Consumer Product Safety Commission (CPSC) has long been an important partner in injury prevention. CPSC manages the National Electronic Injury Surveillance System (NEISS), which collects vital information about nonfatal injuries. Recently, CPSC collaborated with CDC and the U.S. Food and Drug Administration (FDA) to determine the feasibility and usefulness of enhancing NEISS for monitoring adverse drug events. Based on the feasibility and utility demonstrated by this project, CDC, CPSC, and FDA now conduct ongoing adverse drug event surveillance (“medication injury monitoring”) in 64 NEISS–All Injury Program hospitals. Additionally, CPSC helped develop a program to prevent fire- and fall-related injuries among older adults, and it is one of several agencies evaluating current and prototypic smoke alarm technologies.

### **U.S. Department of Education**

Since 1992, CDC’s Injury Center has worked with the Department of Education (ED) to conduct a

national study of school-related violent deaths. This study allows public health officials to monitor trends in violence that occur in and around our nation’s schools. CDC and ED have also launched a social and character development research program to evaluate the effectiveness of interventions designed to promote positive social and character development, increase positive behaviors, and reduce antisocial behaviors among elementary school children. In addition, ED’s National Institute of Disability and Rehabilitation Research (NIDRR) funds the Traumatic Brain Injury Model Systems (TBIMS). The 17 TBIMS centers now funded are involved in a prospective, longitudinal multicenter effort to examine the course of recovery and outcomes following TBI. CDC’s Injury Center funds a collaborative study with NIDRR to compare TBI Model Systems data with population-based, CDC-funded surveillance and outcomes data in South Carolina.

### **U.S. Department of Justice**

CDC works with the U.S. Department of Justice (DOJ) on various injury and violence issues. For example, DOJ was one of the two agencies CDC worked with to conduct its national school violence study. DOJ also cosponsored the 2002 and 2004 National Sexual Violence Prevention Conferences and the National Violence Against Women Survey, resulting in estimates of stalking, rape, and physical assault among women in the United States.

### **U.S. Fire Administration**

CDC works with the U.S. Fire Administration (USFA), now part of the U.S. Department of Homeland Security (DHS), to address fire-related injuries and deaths in America. This agency is one of several partners working with the Injury Center to evaluate the performance of various smoke alarms. Additionally, through an interagency agreement, CDC evaluates outcomes of USFA-funded fire prevention programs.

# State and Local Agencies

CDC relies heavily on state and local agencies. These agencies provide critical data about injuries, offer important perspectives on how injuries affect communities nationwide, and help reach communities in ways that CDC, as a federal agency, cannot.

## State Health Departments

CDC has cooperative agreements with many state health departments. With CDC funding, states collect data about topics such as traumatic brain injuries, violence against women, and emergency department visits for injuries. States also conduct and evaluate programs to prevent sexual violence, distribute smoke alarms, promote use of bicycle helmets, and implement trauma care systems.

## State-funded Programs

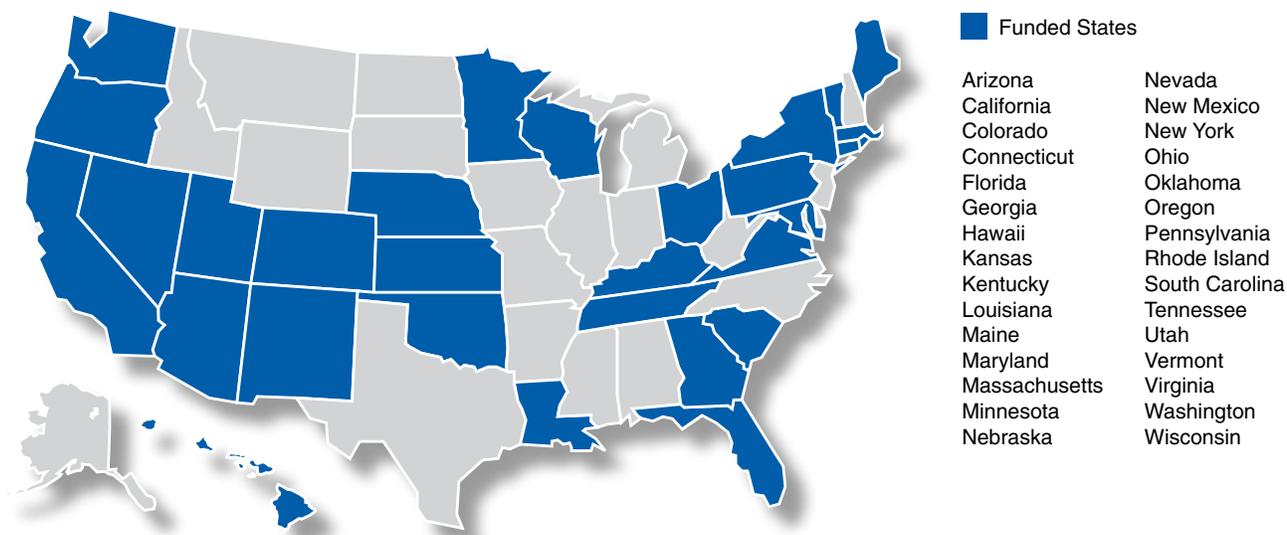
Injury is a leading killer in all 50 states, but injury problems differ among the states. Variations in geography, weather conditions, and populations cause some states to incur injury issues not experienced by the rest of the country. To address these issues, CDC funds state health departments to systematically collect information about TBIs, drownings, fire-related injuries, motor vehicle injuries, poisonings, homicides, suicides, and injuries

resulting from mass casualty events and then analyzes these data to direct future injury prevention plans. Thirty states receive Integrated Core Injury Prevention and Control (ICIPC) Program funding. The funding helps states strengthen infrastructure and build capacity by developing five core components of model state injury programs:

- Collect and analyze data;
- Provide technical support and training to communities conducting injury programs;
- Coordinate and collaborate in injury prevention activities;
- Design, implement, and evaluate programs to prevent injury; and
- Inform public policy that supports injury prevention.

To date, most funded states have established offices of injury prevention and control. Most states have also formed, and are actively using, injury community planning groups to develop and prioritize injury plans. They have built partnerships to improve coordination and collaboration, and their health agencies are paying greater attention to injury as a critical public health problem. State accomplishments and program profiles are available on the Injury Center's website.

## 2005 Recipients of Integrated Core Injury Prevention and Control (ICIPC) Program Funding



# Organizations for State and Local Health Professionals

CDC works closely with organizations representing state and local public health professionals. A sampling of those organizations follows.

## **Association of State and Territorial Health Officials**

Association of State and Territorial Health Officials (ASTHO), which represents the chief health officials for all states, U.S. territories, and the District of Columbia, formulates and influences public health policy and ensures excellence in state-based public health practice. ASTHO supports initiatives to improve states' abilities to develop, implement, and evaluate injury prevention efforts.

## **Council of State and Territorial Epidemiologists**

The Council of State and Territorial Epidemiologists (CSTE) and CDC work in partnership to improve the public's health by supporting the efforts of epidemiologists who work at state and local levels. CSTE and CDC promote the use of epidemiologic data to guide public health practice and improve health. CSTE has also consulted with CDC about the development and implementation of the National Violent Death Reporting System (NVDRS). This partnership provides a valuable link for CDC

to inform CSTE membership about NVDRS through the Council's newsletters, fact sheets, and position statements.

## **National Association of County and City Health Officials**

National Association of County and City Health Officials (NACCHO) provides information, education, research, and technical assistance to more than 3,000 local health departments. Its members work to ensure that local public health systems have the capacity to effectively address health and safety issues, including those related to injury and violence.

## **National Association of State Emergency Medical Service Directors**

The National Association of State Emergency Medical Service Directors (NASEMSD) provides vision and leadership for developing and improving EMS systems and national EMS policy. CDC supports NASEMSD to explore key indicators of EMS system readiness in the states and territories. This project comprises a series of surveys examining three areas: involvement of state EMS offices in bioterrorism grant and planning efforts; programmatic involvement of state EMS with prevention programs; and state EMS funding.

## **National Association of State Head Injury Administrators**

The National Association of State Head Injury Administrators (NASHIA) helps state governments promote partnerships and build systems to meet the needs of individuals with brain injury and those of their families. CDC's Injury Center works with NASHIA to coordinate traumatic brain injury (TBI) surveillance activities and service linkage projects with state programs providing TBI services.

## **State and Territorial Injury Prevention Directors Association**

The State and Territorial Injury Prevention Directors Association (STIPDA) is a national organization with a primary mission to promote, sustain, and enhance the ability of state, territorial, and local public health departments to reduce death and disability associated with injuries. As such, STIPDA is positioned to support the mission of CDC's Injury Center. The Injury Center supports STIPDA to develop models and standards for injury and violence prevention programs; to conduct systematic, comprehensive reviews of injury and violence prevention capacity in state health departments; and to provide technical assistance for state injury and violence prevention programs and staff.

# National Nonprofit Organizations

CDC works with many national nonprofit organizations to reach various audiences such as public health professionals, health care providers, and communities at risk for injury. Some of the organizations CDC works with follow.

## **American Academy of Pediatrics**

CDC's Injury Center provides a liaison to the American Academy of Pediatrics' (AAP) Committee on Injury and Poison Prevention and Committee on Child Abuse. CDC contributes scientific expertise to help AAP develop policies about child maltreatment and childhood injuries.

## **American Automobile Association (AAA) Foundation for Traffic Safety**

CDC works with the Office of Traffic Safety Policy in the AAA national office in Washington, D.C., to evaluate traffic safety interventions and to promote research in a broad spectrum of traffic safety issues such as aging and mobility, child passenger safety, teen driving, and impaired driving. CarFit, an AAA public awareness program, teaches seniors how to adjust seats, mirrors, seat belts, etc., so their cars better fit them. The program also gives seniors access to community resources. CDC also supports innovative focus group research on Latinos' use of seat belts. This research explores and measures multiple dimensions of seat belt use by Hispanics living in the United States.

## **American College of Emergency Physicians**

The American College of Emergency Physicians (ACEP) supports quality emergency medical care and promotes the interests of emergency physicians. CDC supports ACEP through the Terrorism Injuries: Information, Dissemination and Exchange (TIIDE) cooperative agreement, which promotes collaboration between national organizations of professionals in emergency care and state and local health departments that will be critical in the event of a terrorist attack or other mass casualty event. CDC also supported ACEP's 2004 Emergency Medical Services Week activities.

## **American College of Surgeons**

The American College of Surgeons (ACS) is a scientific and educational association of surgeons that was founded to improve the quality of care for the surgical patient by setting high standards for surgical education and practice. CDC supports ACS to provide national representative samples for Level 1 and Level 2 trauma centers through the ACS National Trauma Data Bank (NTDB). CDC is assisting ACS in planning and developing a national and regional probability sample for the NTDB to generate population-based rates that will help uniformly assess improvement in care of the injured.

## **American Psychological Association**

The American Psychological Association recently launched ACT (Adults and Children Together Against Violence), a national media campaign aimed at giving parents and other caregivers of young children the tools they need to prevent violence. CDC is evaluating the dissemination of the program.

## **American Public Health Association**

The American Public Health Association (APHA) is an association for local, state, and federal public health workers across the country. CDC has a long-standing relationship with APHA and supports it to develop a curriculum outline about the interface of the emergency medical system and public health. The outline is a first step toward professional training that integrates public health and emergency service practices that will enhance day-to-day operations and increase readiness in disaster situations.

## **American Trauma Society**

CDC supports the American Trauma Society (ATS) Trauma Information Exchange Program. Through this program, ATS collects data from trauma centers and improves access to such data. CDC funds ATS through the TIIDE cooperative agreement, which promotes collaboration between national organizations of professionals

in emergency care and state and local health departments. Such collaboration will be critical in a terrorist attack or mass casualty event.

## **Brain Injury Association of America**

CDC's Injury Center works with the Brain Injury Association of America (BIAA) to promote education and research about traumatic brain injuries. The Injury Center serves on BIAA's task force and has funded its pilot study for evaluating the development of a national brain injury information center. The "one-call" information center is being piloted in three states (Michigan, Minnesota, and Mississippi). People in these states who call the BIAA's toll-free number will be linked automatically to their local Brain Injury Association for confidential and individualized brain injury resources in their state.

## **Home Safety Council**

CDC works with the Home Safety Council (HSC), a national nonprofit organization dedicated to preventing home-related injuries, on issues about injury prevention. HSC and CDC supported the development of the National Council on Aging's *Falls Free: Promoting a National Falls Prevention Action Plan*, which addresses the challenges and barriers related to a national falls prevention initiative and outlines key strategies and ways to help reduce fall dangers for older adults. HSC also supported the 2005 Injury Center conference, "Injury and Violence in America: Meeting Challenges, Sharing Solutions."

## **MetLife Foundation**

Metropolitan Life Insurance Company (MetLife) established its Foundation in 1976 to support civic, educational, cultural, and health organizations. In 2004, through a partnership of the CDC Foundation and the MetLife Foundation, two CDC brochures were updated and translated into Spanish and Chinese: *What You Can Do to Prevent Falls* and *Check for Safety: A Home Fall Prevention Checklist for Older*

*Adults.* New posters that promote fall prevention activities were also created and are available in English, Spanish, and Chinese. See [www.cdc.gov/ncipc/pub-res/toolkit/brochures.htm](http://www.cdc.gov/ncipc/pub-res/toolkit/brochures.htm).

### **National Alliance of Children's Trust and Prevention Funds**

The National Alliance of Children's Trust and Prevention Funds initiates and engages in national efforts to prevent child abuse and neglect. These efforts include promoting and supporting services, laws, practices, and attitudes that enable families to provide their children with a safe, healthy, and nurturing childhood. CDC is working with the Alliance to expand its leadership role in preventing child maltreatment; to foster collaborations that respond to emerging policy and program issues; and to develop a plan to guide prevention activities.

### **National Association of Emergency Medical Service Physicians**

The National Association of EMS Physicians (NAEMSP) is an organization of physicians and other professionals partnering to provide leadership and foster excellence in out-of-hospital emergency medical services. CDC's Injury Center supports NAEMSP through the Terrorism Injuries: Information Dissemination and Exchange cooperative agreement, which promotes collaboration between national organizations of professionals in emergency care and state and local health departments. Such collaboration would be critical in the event of a terrorist attack or other mass casualty event.

### **National Fire Protection Association**

CDC and the National Fire Protection Association (NFPA) have collaborated for years to prevent injuries from residential fires. Together with the U.S. Consumer Product Safety Commission and other partners, CDC's Injury Center and NFPA developed Remembering When: A Fire and Fall Prevention Program for Older Adults. CDC evaluated the effectiveness of the Remembering When program, leading to a revision that CDC and NFPA were developing in 2005.

### **National Safety Council**

In collaboration with the National Safety Council (NSC), CDC is summarizing evidence of the effectiveness of graduated drivers licensing (GDL) systems for young, beginning drivers; estimating the cost of off-the-job injuries in America; reviewing CDC brochures on older adult falls; and creating fall prevention materials. CDC also works with NSC's Research and Statistics Services Department to rapidly provide NSC with emerging results from CDC injury research. A series of articles in the *Journal of Safety Research* will feature cutting-edge CDC research on injury and violence prevention.

### **Parents Anonymous**

Parents Anonymous is a national child abuse prevention organization dedicated to strengthening families and building caring communities that support safe and nurturing homes for children. CDC is working with Parents Anonymous to expand its leadership role in preventing child maltreatment; to foster collaborations that respond to emerging policy and program issues; and to develop a plan to guide prevention activities.

### **Prevent Child Abuse America**

Prevent Child Abuse America works to prevent child abuse and neglect in the United States. The organization took part in CDC's expert meeting to develop a plan to prevent child maltreatment. When the plan was completed, it was shared with policy makers, an action that resulted in the allocation of funds for research and programs to prevent child maltreatment.

### **SAFE KIDS Worldwide**

CDC and SAFE KIDS have conducted three projects to prevent injury among children. SAFE KIDS implemented and evaluated a drowning prevention program in two states with communities that have child drowning rates higher than the national average. SAFE KIDS, with support from CDC, implemented

a program to reduce injuries among children living in low-income housing in 10 communities across the United States and developed a low-literacy home safety brochure and a home safety PowerPoint presentation for distribution via SAFE KIDS coordinators. Additionally, SAFE KIDS was one of several cosponsors for the Panel to Prevent Pedestrian Injuries, a discussion that resulted in published strategies to improve safety for child pedestrians. CDC's Injury Center serves on the SAFE KIDS Advisory Committee.

### **Society for Public Health Education**

CDC's Injury Center works with the Society for Public Health Education (SOPHE) to provide training in injury prevention and behavioral science. A SOPHE website on behavioral science and injury emphasizes the links between behavioral science, health education, and injury and violence prevention. It offers injury facts, tips for implementing and evaluating interventions, links to CDC-funded injury control research, and information about opportunities for research funding. In addition, CDC supports the SOPHE/CDC Student Fellowship in Injury and Violence Prevention, an annual program for graduate students conducting injury research under the supervision of faculty mentors. SOPHE, comprised of health education professionals and students, stimulates research, supports performance standards, advocates policy and legislation, and develops standards for professional development in health education and health promotion.

### **Stop It Now!**

Stop It Now! is a national, public health-based organization working to prevent and ultimately eradicate child sexual abuse. Through public education, policy advocacy, and research and evaluation, STOP IT NOW! calls on abusers and potential abusers to stop their abusive behavior and seek help. CDC is working with Stop It Now! to determine risk and protective factors for perpetration of sexual abuse and to identify the immediate and long-term health consequences of child sexual abuse.

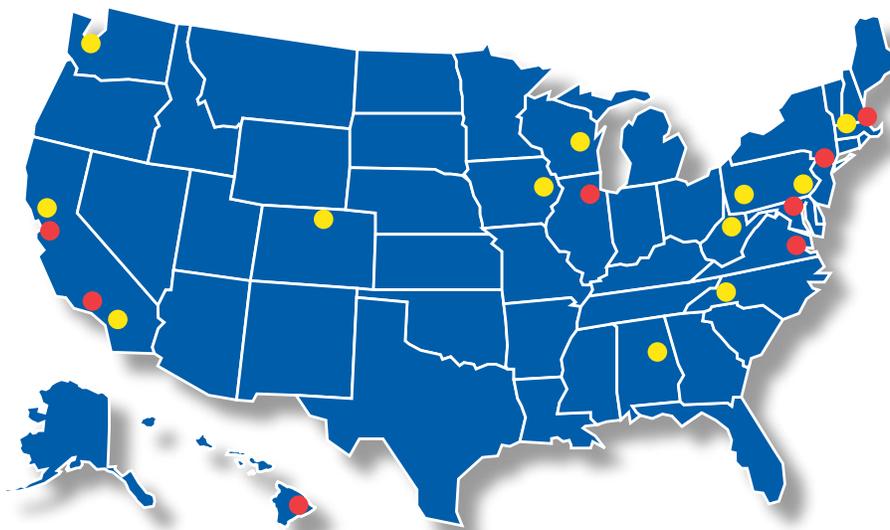
# Academic Institutions

**Academic Centers of Excellence**  
 CDC's Injury Center funds eight National Academic Centers of Excellence (ACE) on Youth Violence Prevention at colleges and universities throughout the United States. The Centers focus on the complex problem of youth violence by fostering multi-disciplinary and multi-sectoral interactions that can stimulate scientific creativity, speed new developments in youth interpersonal violence research and practice, and hasten translation of knowledge into health and community practice. Centers actively foster an environment conducive to reciprocally beneficial collaborations among health scientists, social scientists, and the affected communities with the common goal of reducing youth interpersonal violence. The programs

can be viewed at [www.cdc.gov/ncipc/res-ops/ACE/ace.htm](http://www.cdc.gov/ncipc/res-ops/ACE/ace.htm).

**Injury Control Research Centers**  
 CDC funds 12 Injury Control Research Centers (ICRCs) to conduct research in three core phases of injury control: prevention, acute care, and rehabilitation. ICRCs serve as training centers and information centers for the public. Research design in these centers is interdisciplinary and incorporates medicine, engineering, epidemiology, law, criminal justice, behavioral and social sciences, biostatistics, public health, and biomechanics. Full descriptions of current research and education projects conducted by the ICRCs may be accessed at [www.cdc.gov/ncipc/profiles/icrcs/default.htm](http://www.cdc.gov/ncipc/profiles/icrcs/default.htm).

## Examples of CDC-funded Programs for Injury Prevention and Control



● **Injury Control Research Centers** conduct research in prevention, acute care, and rehabilitation and serve as training and information centers.

Colorado Injury Control Research Center (CICRC)

Harborview Injury Prevention and Research Center (HIPRC)

Harvard Injury Control Research Center (HICRC)

Injury Research Center at the Medical College of Wisconsin (IRC-MCW)

Johns Hopkins Center for Injury Research and Policy (CIRP)

San Francisco Injury Center for Research and Prevention (SFIC)

Southern California Injury Prevention Research Center (SCIPRC)

University of Alabama at Birmingham Injury Control Research Center (UAB-ICRC)

University of Iowa (UI) Injury Prevention Research Center (IPRC)

University of North Carolina Injury Prevention Research Center (UNC IPRC)

University of Pittsburgh Center for Injury Research and Control (CIRCL)

West Virginia University Injury Control Research Center (WVU ICRC)

● **National Academic Centers of Excellence (ACE) on Youth Violence** were established in 2000. These universities and colleges foster collaboration between university researchers and communities to address the public health problem of youth violence. Universities and colleges that receive ACE funding may vary from year to year. The following centers were funded in 2005.

Columbia University

University of California-Riverside

Harvard University

University of Hawaii

Johns Hopkins University

University of Illinois-Chicago

University of California-Berkley

Virginia Commonwealth University

## Academic Organizations

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CDC works with academic organizations to ensure that universities' curricula and research address injury prevention issues. Some academic partners follow:

### **Association of Schools of Public Health**

CDC's collaboration with the Association of Schools of Public Health (ASPH) led to the development of critical partnerships between ASPH and other injury and violence organizations. For example, the Family Violence Prevention Fund helps ASPH train additional faculty in violence prevention. Through a cooperative agreement (2001–2003), CDC funded ASPH to facilitate opportunities for injury and violence prevention research, teaching, and practice in schools of public health so that public

health students and professionals could be more aware of the importance of this public health problem. In 2002–2003, ASPH inventoried the 33 accredited schools of public health to assess each school's capacity to advance the injury and violence prevention field. This inventory will be used by the schools of public health to help bolster their injury and violence training and research programs.

### **Society for Advancement of Violence and Injury Research**

SAVIR (formerly the National Association of Injury Control Research Centers, NAICRC) is dedicated to the improvement of injury and violence control research in prevention, acute care, and rehabilitation programs. SAVIR offers its institutional and professional members, and those

they serve, consultation, education, training, research dissemination, program development, and evaluation. SAVIR works to advance the public's understanding of the benefits of injury and violence control research. For more information, visit [www.savirweb.org](http://www.savirweb.org).

## Cross-cutting Partnerships

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CDC partners with groups that represent a variety of interests and that work for the common goal of injury prevention. The following is one example.

### **SafeUSA**

SafeUSA, a nonprofit organization in Washington, D.C.,



is an alliance of public agencies (including CDC's Injury Center) and private organizations whose programs include research, service, training, communications, and policy development related to injury and violence prevention. Representatives of these organizations assemble regularly to exchange information and to develop strategies that build support for injury and violence prevention.

# International Agencies



Because injuries and violence occur worldwide, not just in America, CDC's injury partners extend beyond our nation's borders. Recent collaborations with international partners are described below.

## **Pan American Health Organization**

CDC works with the Pan American Health Organization (PAHO) on the Inter-American Coalition for the Prevention of Violence (IACPV), which acts as a catalyst for the prevention of violence in the Americas. PAHO assists CDC to strengthen country and municipality capacity in injury surveillance and to establish policies and integrated programs that prevent violence and road traffic injuries. PAHO and CDC collaborated on a meeting about Road Safety at the United States–Mexico Border, working with countries in Latin America and the Caribbean to develop a set of recommendations and action plans.

## **World Health Organization**

In 2004, CDC worked closely with the World Health Organization (WHO) on the first *World Report on Road Traffic Injury Prevention*, the official launch of World Health Day celebrations “Road Safety is No Accident,” and the Injury Center's U.S. campaign “Family Road Safety: Protect the Ones You Love.” The Injury Center works with WHO's Department of Injury and Violence Prevention to develop and implement programs and policies on global injury and violence prevention. CDC assists WHO in surveillance, intervention development, training, evaluation, and dissemination. In 2002, WHO launched the first *World Report on Violence and Health* to raise awareness of violence as a global public health problem, to facilitate comparisons among nations, to summarize existing prevention strategies and policies, and to recommend future public health actions. More than 160 experts from around the world, including scientists from CDC, helped develop the report. Other projects include a five-year strategy for road traffic injury prevention, TEACH-VIP (a curriculum on injury and violence prevention), and coalition building to eliminate violence against women.