INJURY CONTROL RESEARCH CENTERS
putting research into action to prevent injuries and violence

CDC’s National Center for Injury Prevention and Control funds Injury Control Research Centers (ICRCs) to study ways to prevent injuries and violence and to work with community partners to put research findings into action. The ICRC Program forms a national network of ten comprehensive academic research centers that focus on three core functions — research, training, and outreach.

Research: Studying Ways to Prevent Injuries and Violence
ICRCs are on the scientific front line conducting cutting-edge, multidisciplinary research on the causes, outcomes, and prevention of injuries and violence. ICRC research focuses on issues of local and national importance including motor vehicle injuries; interpersonal violence and suicide; opioid overdoses; older adult falls; and traumatic brain injuries.

Outreach: Putting Research into Action
ICRCs work with states and communities to ensure research is put into action to prevent injuries and violence. They provide technical assistance to disseminate and translate research findings which leads to increased awareness and influences action.

Training: Building the Field
ICRCs play a critical role training and developing the current and next generation of researchers and public health professionals. This helps ensure there is an adequate supply of qualified practitioners and researchers to advance prevention research, address new problems, and reach new populations across the nation.

More than the Sum of their Parts
ICRCs are more than just the sum of their parts. Underlying all other ICRCs core functions is their ability to bring together multiple stakeholders from disparate disciplines, perspectives, and agencies to join forces and tackle critical public health problems. With a strong administrative core of staff and resources, they serve as a hub for coordinating networks and facilitating strong partnerships. Through leadership that combines their injury topic and core areas of expertise — research, outreach, and training— they continue to advance the field of injury and violence prevention.

Current Funded ICRCs
- Columbia University
- Johns Hopkins University
- Mount Sinai School of Medicine
- Nationwide Children's Hospital
- University of Iowa
- University of Michigan
- University of North Carolina at Chapel Hill
- University of Pennsylvania
- University of Rochester
- West Virginia University

LEARN MORE www.cdc.gov/injury/erpo/icrc
ICRCs in Action

Since their establishment in 1987, ICRCs have advanced the injury and violence prevention field. Examples of ICRC activities and achievements include the following:

Studying the Impact of Remediating Abandoned, Inner City Buildings on Crime

The University of Pennsylvania Injury Science Center studies the impact of low-cost abandoned building repairs and vacant lot greening on residents’ health, safety, and quality of life. These blight remediation programs include the removal of graffiti and trash, installation of new windows and doors, planting of grass and trees, and installation of wooden fences. Research found that areas around re-mediated abandoned buildings had a 39% drop in gun violence, a 19% drop in assaults, and a 16% drop in nuisance crimes. Vacant lot greening also led to significant, long-term reductions in gun violence (8% drop) and vandalism, as well as residents’ reporting less stress and more exercise.

Implementing a Violence Prevention Program for Juvenile Offenders

The Mount Sinai Injury Control Research Center (MS-ICRC) at the Icahn School of Medicine is working with the Texas Juvenile Justice Department to reduce criminal offenses and violent crimes among youth offenders with and without traumatic brain injury (TBI). They adapted their evidence-based cognitive rehabilitation intervention originally developed for adults with TBI to a youth population. The Youth Short-term Executive Plus (Y-STEP) intervention, which focuses on improving cognitive processing and emotional self-regulation, is being implemented and evaluated in the El Paso Juvenile Justice Center. To date, interim analysis indicates that youth participating in Y-STEP had a 44% reduction in recidivism.

Advancing Public Health Approaches to Suicide Prevention

The Injury Control Research Center for Suicide Prevention (ICRC-S) at the University of Rochester Medical Center conducts a bi-annual training to promote the study of public health approaches to suicide prevention. The 4-day Research Training Institute (RTI) equips injury and violence prevention professionals and researchers across the nation with information on suicide prevention science and research methods. The RTI also fosters collaborative links between the injury and violence prevention and suicide research communities to facilitate the sharing of perspectives, knowledge and skills. Researchers and practitioners apply as teams, proposing collaborative suicide prevention research projects that they then develop during the RTI and through an extended period of mentoring support that follows. Examples of RTI collaborative research projects include the development of community-based suicide prevention programs, investigations into the reorganization of emergency room services, and explorations of how state agencies and researchers can more effectively work together to prevent suicide. The ICRC-S has conducted three RTIs since 2013, training 63 researchers and practitioners.

Educating Stakeholders about the Opioid Overdose Epidemic and Naloxone Programs

The West Virginia University Injury Control Research Center (WWU ICRC) is supporting the implementation of take-home naloxone programs in day treatment centers, among law enforcement agencies, and substance abuse treatment programs around the state. The WVU ICRC first conducted research that demonstrated the effectiveness of naloxone programs in rural areas. They used the findings to educate key stakeholders about the opioid overdose epidemic in WV and the effectiveness of take-home naloxone programs. The Center was instrumental in informing stakeholders who then use the information to address liability concerns that were central to the successful implementation of these programs. In collaboration with key partners, the WVU ICRC is training and equipping law enforcement agencies around the state to carry and administer take-home naloxone. There were at least 25 overdose reversals in the first 9-month period the program was implemented in 16 counties.

Changing Athlete Behavior to Prevent Concussions

The University of North Carolina Injury Prevention Research Center (UNC IPRC) is testing an innovative behavior modification approach to improve player safety in contact sports. Football players from four area high schools wore special helmets equipped with sensors that captured data on the number and strength of hits to the players’ heads. Analyses of these data revealed the players at greatest risk of concussion. These players were then taught safer methods of tackling and blocking through the “BeMod” program. BeMod is a clinician-coach-player partnership that employs personal mentoring and video footage to change player behavior. In preliminary surveys, coaches and players reported that the program improved players’ use of safe playing behaviors. Once the viability of BeMod is documented, UNC IPRC plans to extend the program to other schools and other high-impact sports such as soccer, hockey, and lacrosse.