



# Injury Center Connection

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## CDC Study Shows Better Parenting Skills Decrease Key Indicators of Child Maltreatment

Anyone who is a parent knows it can be a very rewarding, yet very frustrating experience. Parents are their children's most important teachers and mentors, and they bear primary responsibility for nurturing their sons and daughters while keeping them safe. Yet parenting is one of the most underrated and least prepared for roles. But [new evidence](#), funded by the Centers for Disease Control and Prevention (CDC), shows that when parents have access to parenting information and support that address problems all families face—from tantrums

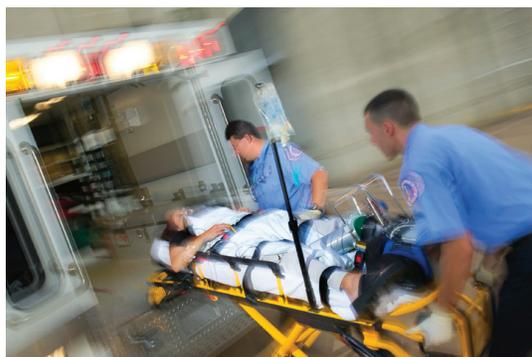


to encouraging good behavior — key measures of [child maltreatment](#) fall.

The results show lower rates of substantiated abuse cases, child out-of-home placements, and reductions in hospitalizations and emergency room visits for child injuries in nine study counties in South Carolina where parenting interventions were implemented.

Support for families enrolled in the study came through

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## Decide to Save Lives

### CDC Launches New Field Triage Decision Scheme: The National Trauma Triage Protocol

Everyday EMS providers in the United States have a substantial impact on the health and safety of Americans. On average, EMS providers respond to nearly 16.6 million transport calls every year and work in approximately 15,000 EMS systems across the country.

When an injury occurs, EMS providers have only minutes to decide which destination is best for emergency care of the injured person. This decision process is known as “field triage” and can save lives.

Research shows that if a person is severely injured and transported to a Level I trauma center, the chances of survival increase by 25%. To identify those

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## UPCOMING *injury* EVENTS

### Meetings and Conferences

- Aging in America Conference  
March 15-19 • Las Vegas, NV  
<http://www.agingconference.org/asav2/conf/jc09/index2.cfm>
- Lifesavers - National Conference on Highway Safety Priorities  
March 29-April 1 • Nashville, TN  
<http://www.lifesaversconference.org/>
- Smoke Alarm Installation and Fire-Safety Education (SAIFE) Program Grantees' Meeting  
April 1-2 • Savannah, GA
- NCIPC Partnership Strategic Directions Meeting  
April 15-16 • Atlanta, GA
- EIS Conference  
April 20-24 • Atlanta, GA  
<http://www.cdc.gov/eis/conference/conference.htm>
- American Occupational Therapy Association (AOTA) Annual Conference  
April 23-26 • Houston, TX  
<http://www.aota.org/ConfandEvents/Conf.aspx>

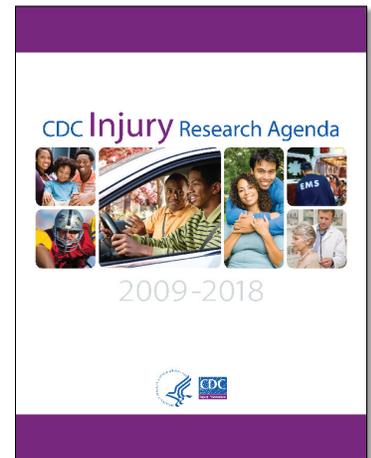
### Health Observances

- National Child Abuse Prevention Month (April, 2009)
- Sexual Assault Awareness Month (April, 2009)
- Safe Boating Week (May 16-22, 2009)
- Click It or Ticket (May 18-31, 2009)
- Water Safety Month (May, 2009)
- Older Americans Month (May, 2009)
- National Safety Month (June, 2009)

# CDC Injury Research Agenda 2009-2018

NCIPC released its newly updated *CDC Injury Research Agenda 2009-2018* on March 5th, which describes the Injury Center's research priorities. The Research Agenda expands on the 2002-2007 agenda and now includes chapters about child maltreatment and traumatic brain injury. It also places increased emphasis on evaluation research, cost studies, and dissemination and translation of research discoveries.

Please join us in spreading the word about this revised agenda as it will guide the direction of the Injury Center's research for the coming decade. The full agenda can be viewed and downloaded at [www.cdc.gov/injury/researchagenda](http://www.cdc.gov/injury/researchagenda).



## Field Triage

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at greatest risk for severe injury and determine the most appropriate facility to transport individuals with different types and severities of injury, prehospital providers use an algorithm called the Field Triage Decision Scheme.

The Decision Scheme is an essential component of the emergency care system. It helps guide EMS providers in transporting injured patients to the most appropriate facility, ensuring proper care and reducing the consequences of injury and death.

Each year, 41 million people are injured and require treatment in emergency departments. In accordance with the recommendations of the [2006 Institute of Medicine report on the state of emergency care in the U.S.](#), CDC convened a panel of experts to examine existing care and develop a vision to improve this segment of the health care system.

The Decision Scheme was developed after an extensive review of the literature by the National Expert Panel on Field Triage in collaboration with the [American College of Surgeons-Committee on Trauma](#) and with support from the [National Highway Traffic Safety Administration](#). The Panel, which included representatives from EMS, emergency medicine, trauma surgery, the automotive industry, public health, and several federal agencies, brought a wider range of disciplines and expertise into the revision process than ever before. To improve U.S. emergency care and standardize decision-making at an injury scene, the CDC, along with key stakeholders, published the development process and scientific basis for the revised field triage guidelines in the [MMWR Recommendations and Reports](#) released on January 23, 2009.

Each day EMS providers work to get every patient to the right place, at the right time, by making rapid on-scene triage decisions. In achieving this goal, they help ensure that more Americans live to their full potential. For more information, visit [www.cdc.gov/FieldTriage](http://www.cdc.gov/FieldTriage).

# Parenting Skills

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the [Triple P](#)—Positive Parenting Program. The program uses a multi-level, parenting and family support strategy that aims to prevent behavioral, emotional and developmental problems in children by enhancing the knowledge, skills and confidence of parents. Triple P incorporates a wide range of support mechanisms for parents including local media, brief public seminars, and parent consultation by specially trained providers in clinics, schools, churches, and community centers.

Researchers estimate that in an area containing 100,000 children less than eight years of age, the results found in the study could translate annually into 688 fewer cases of child maltreatment, 240 fewer out-of-home placements, and 60 fewer children with injuries requiring hospitalization or emergency room treatment.

CDC's ultimate goal is to stop child maltreatment before it starts. [Prevention strategies](#) that support parents and teach positive parenting skills are very important. Programs to prevent child maltreatment improve parent-child relationships and provide parents with social support.

For more information on this study visit [www.cdc.gov/injury](http://www.cdc.gov/injury).

## grantee *Corner*

### Injury Research in Action Child Booster Seat Research Saves Lives

The Injury Center continues to feature injury research success stories online. Read the latest [story](#) on the Harborview Injury Prevention Research Center's (HIPRC) child booster seat initiative which led to significant increases in booster seat usage. "Booster seats are inexpensive and easy to use," says Dr. Beth Ebel, HIPRC Director & Lead Research Investigator. "Our campaign let parents know that children between 4 and 8 need a booster seat so that the car's seat belt can fully protect them in a crash." Look for more success stories throughout the year on the NCIPC Extramural Research Program Office [webpage](#).



## CDC Positive Parenting Tips

Click the specific age group link below for positive parenting tips:

### Infants (0-1 year old)

<http://www.cdc.gov/ncbddd/child/infants.htm>

### Toddlers (1-2 years old)

<http://www.cdc.gov/ncbddd/child/toddlers1.htm>

### Toddlers (2-3 years old)

<http://www.cdc.gov/ncbddd/child/toddlers2.htm>

### Preschoolers (3-5 years old)

<http://www.cdc.gov/ncbddd/child/preschoolers.htm>

### Middle Childhood (6-8 years old)

<http://www.cdc.gov/ncbddd/child/middlechildhood.htm>

### Middle Childhood (9-11 years old)

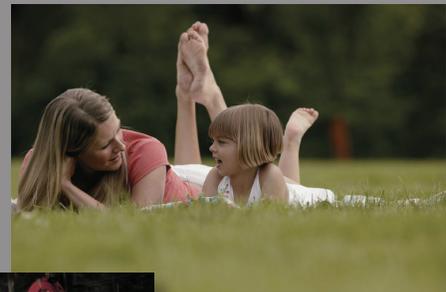
<http://www.cdc.gov/ncbddd/child/middlechildhood9-11.htm>

### Early Adolescence (12-14 years old)

<http://www.cdc.gov/ncbddd/child/earlyadolescence.htm>

### Middle Adolescence (15-17 years old)

<http://www.cdc.gov/ncbddd/child/middleadolescence15-17.htm>



# Partnerships in Prevention

## Linking Transportation Policy and Public Health Partner Meeting

In November 2008, CDC held a meeting with professionals from the transportation and public health sectors to discuss the relationship between transportation and public health policies. The purpose of this meeting was to provide an overview of transportation and health issues, discuss transportation and public health resources, and launch a mutually supportive dialogue on health and transportation. A key feature of the meeting was to present and discuss six papers on public transportation, roadways, non-motorized transportation, economic development, injury prevention, and transport of food. The papers, commissioned by the Healthy Eating, Active Living Convergence Partnership, formed the basis for the international exchange and dialogue among public health, transportation, and policy professionals.

The goals of the forum were to: bridge the information gap between transportation policy and public health; think strategically about how transportation policies affect public health; identify priorities for transportation policy and public health; and build momentum to promote transportation policies that support public health.

This meeting was attended by approximately 75 professionals from multiple organizations and has led to various linkages and continued dialogue on the relationship between these important topics.



## congressional *Update*

### NCIPC Briefings

Since January, 2009, NCIPC has participated in the following Congressional briefings:

- Sen. Christopher Dodd (D-CT)
- Sen. Richard Durbin (D-IL)
- Rep. Bobby Scott (D-VA)
- Sen. Kirsten Gillibrand (D-NY)

Briefing topics included youth violence and positive parenting.



# Partnerships in Prevention

## Unintentional Prescription Drug Overdose: Moving the Field Forward

The use and abuse of prescription drugs, including opioid pain medications, has increased dramatically in the United States over the last 15 years. Drug overdoses are now the second leading cause of unintentional injury death in the United States. Each year more than 20,000 persons in the United States die from drug overdose. Those with the highest rates are adults ages 35–44 and persons living in the South and West regions of this country.

To assess the knowledge, response, and planning regarding prescription drug misuse and overdose, in late 2007 the Association of State and Territorial Health Officials (ASTHO) and CDC conducted interviews with State and Territorial Health Officials and other senior leaders in nine states (Arkansas, Florida, Indiana, Kentucky, Montana, North Carolina, Oklahoma, Utah, and West Virginia). The resulting report, *Prescription Drug Overdose: State Health Agencies Respond*, outlines the state perceptions, partnerships, recommendations, policies, and other issues that are fundamental to understanding and responding to drug misuse. Order a [free copy](#) or download a [PDF copy](#) of the report.

To further address this emerging issue, the Injury Center recently held two meetings on the prevention and control of unintentional prescription drug overdoses.

The first meeting was held in December in conjunction with the Public Health Law Program, focusing on promising legal strategies for addressing the pharmacoepidemic. Topics presented included prescription drug monitoring programs, interstate prescription data sharing, drug courts, specialized state prescription forms, doctor shopping statutes, pain clinic legislation, return of unused pharmaceuticals, and physician prescription guidelines. Attendees included legal experts, representatives of other federal agencies, and state program representatives.

The second meeting, which focused on state strategies for preventing prescription drug overdoses, took place in January, and included state public health program and medical representatives. Presentations were given about subjects including surveillance and use of data, a Medicaid patient review program, a Department of Defense pharmacy monitoring program, medical guidelines for prescribing opioids, a community naloxone program, and management of frequent ED users.

Next steps likely include working with federal and state partners, exploration of using state scorecards to track progress, and evaluation of economic strategies at the state level to address the problem.



## RECENT *injury* PUBLICATIONS

- Klevens, J, Cox, P. Coordinated Community Responses to Intimate Partner Violence: Where Do We Go From Here? *Criminology and Public Policy* 2008;7(4):547-556.
- Katz, KA, Toblin, RL. Language matters: Unintentional strangulation, strangulation activity, and “the choking game”. *Arch Pediatr Adolesc Med.* 2009;163(1):93-94.
- Teten, AL, Sherman, MD, Han, X. Violence Between Therapy Seeking Veterans and Their Partners: Prevalence and Characteristics of Nonviolent, Mutually Violent, and One-Sided Violent Couples. *Journal of Interpersonal Violence* 2009;24(1):111-127.
- Bhalla, K, Harrison, J, Abraham, J, Borse, NN, Lyons, R, Boufous, S, Aharonson-Daniel, L on behalf of the Global Burden of Disease Injury Expert Group. Data Sources for Improving Estimates of the Global Burden of Injuries: Call for Contributors. *PLoS Medicine* 2009;6(1) [doi:10.1371/journal.pmed.1000001](https://doi.org/10.1371/journal.pmed.1000001)
- Prinz, RJ, Sanders, MR, Shapiro, CJ, Whitakera, DJ, Lutzkera, JR. Population-Based Prevention of Child Maltreatment: The U.S. Triple P System Population Trial. *Prevention Science* 2009;10(1):1-12. <http://www.springerlink.com/content/a73718k76218j7k2/?p=587ecf68cf6745058cb3e636889cdf70&pi=0>
- Sasser, SM, Hunt, RC, Sullivent, EE, Wald, MM, Mitchko, JM, Jurkovich, GJ, Henry, MC, Salomone, JP, Wang, SC, Galli, RL, Cooper, A, Brown, LH, Sattin, RW. Guidelines for Field Triage of Injured Patients; Recommendations of the National Expert Panel on Field Triage. *MMWR* 2009;58(RR01):1-35 <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5801a1.htm>.
- Dahlberg, LL, Mercy, JA. History of Violence as a Public Health Problem. *Virtual Mentor* 2009;11(2):167-172.
- Klevens, J, Saltzman, LE. The Controversy on Screening for Intimate Partner Violence: A Question of Semantics? *Journal of Women's Health* 2009;18(2):143-145.

## staff *Kudos*

### *New Deputy Associate Director of Science for the Division of Unintentional Injury Prevention*

The Injury Center's Division of Unintentional Injury Prevention is pleased to announce that Mick Ballesteros, PhD has been appointed as Deputy Associate Director of Science. In this role, he will advise on all division science issues and actively promote the quality of science in the division. His duties will include monitoring active projects, participating in research portfolio reviews, addressing human subjects protection, developing research agendas and strategic plans, and fostering translation and dissemination activities. Prior to this position, Dr. Ballesteros served as Team Leader for DUIP's Home and Recreation Team. He first came to DUIP in 2001 as an EIS officer.

### *Injury Center Staff Wins HHS Award!*

Congratulations to members of the Injury Center's Youth Sports Concussion Workgroup: Julie Gilchrist, Gail Hayes, Jean Langlois, Jane Mitchko, Kelly Sarmiento, Karen Thomas, and Marlena Wald. The team received a Hubert H. Humphrey award for Service to America for the “[Heads Up: Concussion in Youth Sports](#)” campaign.

### *NCIPC Colleague of the Month Award Recipients*

Igbo Tochukwu, January

Michele Hoover, February

Yvonne Jennings, March

## Let's Create Communities That Support Parents and Children.

We're all disturbed by the tragedy of [child maltreatment](#). We are dismayed when we see headlines informing us of yet another child's life ended or altered forever because of maltreatment by a trusted caregiver. Let's change the headlines. Together, we can create communities where our children are raised in nurturing environments that give them the opportunity to live to their full potential...

Read more at the [Director's View Blog](#)



The *Injury Center Connection* is produced quarterly by the Centers for Disease Control and Prevention's (CDC) National Center for Injury Prevention and Control (NCIPC). To find out more about CDC and NCIPC, go to [www.cdc.gov](http://www.cdc.gov) and [www.cdc.gov/injury](http://www.cdc.gov/injury).