



# Injury Center *Connection*

Volume 1 • Issue 2 • Summer 2008

## a letter from *our director*

Welcome to the second edition of *Injury Center Connection*—CDC Injury Center's quarterly update. In this issue you will read about some of the [child maltreatment prevention](#) work we've done in the last quarter.

Preventing child abuse and neglect is one of our priority areas at the Injury Center. The problem is deeply

concerning and puts the youngest members of our society at greater risk for poor health outcomes and risky health behaviors later in life. We continue to promote the importance of safe, stable, and nurturing relationships as key in stopping child maltreatment before it starts and hope you will join us in addressing this important public health problem.

As school semesters end and the warmer summer weather entices us all outdoors, remember to stay safe. A few of the injury prevention topics we are highlighting this quarter, include [safe boating](#), [concussion prevention](#), and [fireworks safety](#). Visit our website for more information and send an e-Card today!

Also, I'd like to share that CDC recently released the [2007 State of CDC](#) annual report and injury prevention was prominent on the cover. The centrality of the injury issue on the cover of the report, and several injury projects included inside of the report, is reflective of how preventing injury and violence is central to each of us living life to its fullest.



ILEANA ARIAS



## Protecting children

### PREVENTING CHILD MALTREATMENT

Child maltreatment in any form is a serious public health problem—one that should be addressed with the best science has to offer. New CDC research is helping violence prevention professionals do just that by defining the true impact of the problem, as well as identifying optimal points for intervention programs.

A joint CDC Injury Center—Administration for Children and Families (ACF) [study](#) appearing in the April 4, 2008 issue of CDC's *Morbidity and Mortality Weekly Report* (MMWR) showed of 91,278 infants who were victims of nonfatal maltreatment in the United States from fall 2005 to fall 2006, nearly 40 percent experienced documented abuse during their first month of life. Of those newborns maltreated in the first month, more than 80 percent experienced abuse in the first week of life.

see **CHILDREN** on page 3

- Upcoming injury events 2
- Recommendations for improving E-codes 2
- Congressional Update: NCIPC briefings, new injury legislation 4
- Staff kudos and recent injury publications 5

inside this *issue...*

## UPCOMING *injury* EVENTS

### Meetings and Conferences

- **National Fire Protection Association (NFPA) World Safety Conference and Expo**  
June 2-5 • Las Vegas, NV  
[www.nfpa.org/WSCE](http://www.nfpa.org/WSCE)
- **American Professional Society on the Abuse of Children (APSAC) 16th Annual Colloquium**  
June 18-21 • Phoenix, AZ  
[www.apsac.org](http://www.apsac.org)

### Health Observances

- **National Safety Month** (June)  
NCIPC will be spotlighting poisoning prevention during National Safety Month. Visit us [online](#) June 16-20 for related web features.
- **Fireworks Safety**  
NCIPC will be spotlighting fireworks safety [online](#) from June 30 - July 4.

## Improving E-codes

The CDC Workgroup for the Improvement of External Cause-of-Injury Coding recently released a [new MMWR Recommendations and Reports article](#) discussing the need for high quality external-cause-of-injury-coded (E-coded) data in state-based morbidity data systems for injury surveillance and prevention activities at the local, state, and federal levels.



This 'encyclopedia of E-coding' recommends strategies for improving communication among stakeholders about E-codes, improving the completeness and accuracy of E-coding, and improving the usefulness of E-coded data for injury prevention efforts.

These strategies call for collaboration by CDC, other federal agencies, state health agencies, health care professional organizations, insurers, and the health plan industry. This report is a first step toward improving E-coded data collected in state-based hospital discharge and ED data systems.

## grantee *Corner*

### Funded Injury Research Proves Successful

The Injury Center will be featuring injury research success stories online.



[Read the first story](#)

on the Harborview Injury Prevention and Research Center alcohol screening and brief intervention program (Research Team pictured above)—which was found to significantly reduce alcohol use and decrease the chance of repeat trauma center admissions by nearly 50%. Look for more success stories throughout the year on the Extramural Research Program Office [webpage](#).

**John Lundell**, Deputy Director of the University of Iowa Injury Prevention and Research Center (an ICRC funded by CDC Injury Center), recently received the Ellen R. Schmidt Award from STIPDA. The award recognizes a member who develops and/or implements an outstanding statewide injury prevention program or provides outstanding services to STIPDA.

## Injury Center web updates

### E-CARDS & PODCASTS & BLOGS: OH MY!

CDC Injury Center's Web Team has been busy spring cleaning the website and preparing for a new design template to be released by CDC.gov this summer.

We've recently added a new [Injury and Violence Prevention Podcasts page](#) and created new [e-Cards](#) on water safety and other seasonal injury topics.

Dr. Ileana Arias also just launched her new blog, the [Director's View](#), to create a forum for exchanging ideas and thoughts on preventing injuries and violence and reducing their consequences.



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).

# Magnitude of the problem, optimal points for prevention

from **CHILDREN** on page 1

The data showed the greatest risk for child maltreatment may be in those first days of life, and that focusing prevention efforts on the prenatal and postpartum periods could be key to preventing maltreatment.

CDC and ACF analyzed data collected in 2006 from the National Child Abuse and Neglect Data System. The study, released during National Child Abuse Prevention Month, was the first national-level examination of the risk for nonfatal maltreatment among infants less than one year old—a group with the highest rate of maltreatment compared to other ages.

Overall, child maltreatment affects an alarming number of children in the United States. In 2006, U.S. state and local child protective services (CPS) classified more than 900,000 children as substantiated victims of maltreatment, which includes physical, sexual and emotional abuse and neglect. These confirmed cases, however, represent only a fraction of the true magnitude of the problem because most cases are never reported to social service agencies or the police. National survey data of children ages 2-17 indicates that more than 1 in 8 children were estimated to have been maltreated in a year spanning 2002-2003.

Further amplifying the problem, scientists have learned more about the true long-term effects of child maltreatment in recent years. Research shows children who are abused or neglected are at greater risk for poor health outcomes, including ailments ranging from heart disease, obesity and diabetes to depression and anxiety. Child maltreatment has also been associated with an increase in risky health behaviors in adolescence and adulthood, such as smoking, substance abuse and sexual promiscuity.

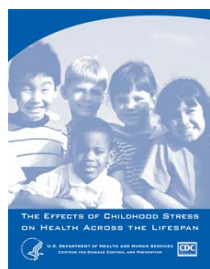


In fact, another recent study by CDC scientists found child maltreatment is associated with reductions in health-related quality of life even decades after the abuse has occurred: on average, victims lose at least two years of quality of life. The study, conducted in conjunction with the University of Georgia, appears in the June issue of the [American Journal of Public Health](#).

Exemplifying CDC's commitment to helping children grow strong and safe, CDC Injury Center has identified child maltreatment as one of its priority injury prevention areas. CDC's Injury Center supports a number of programs to prevent child maltreatment, including positive parenting programs and home visitation programs.

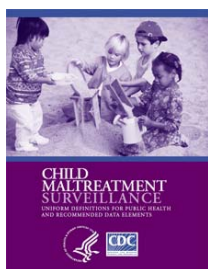
“Establishing safe, stable, and nurturing relationships (SSNR) between children and adults is the vaccine against child abuse and neglect,” said Ileana Arias, director of the CDC Injury Center. “We must support strategies that inform and provide support for parents, families, health professionals, community and state leaders, and policymakers on how to ensure protected and nurturing environments for children.”

## Recent *Child Maltreatment Prevention* Publications



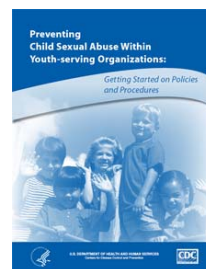
**The Effects of Childhood Stress on Health Across the Lifespan** summarizes the research on childhood stress and its implications for adult health and well-being, and provides ideas and strategies for preventing child maltreatment at each level of the social-ecological model.

Click [here](#).



**Child Maltreatment Surveillance: Uniform Definitions for Public Health and Recommended Data Elements** presents a definition of child maltreatment, its associated terms, and recommended data elements to promote and improve consistency of surveillance.

Click [here](#).



**Preventing Child Sexual Abuse Within Youth-serving Organizations: Getting Started on Policies and Procedures** identifies six key components of prevention and includes goals and strategies for each to help as organizations begin to adopt prevention strategies.

Click [here](#).

## congressional *Update*

### NCIPC Briefings

Since January 2008, NCIPC leadership has briefed the following Congressional Offices on the work of the Injury Center. The briefings included topics such as: motor vehicle safety, child maltreatment prevention, youth violence prevention, traumatic brain injury, falls prevention, and the National Violent Death Reporting System (NVDRS).

#### House

Rep. Rosa DeLauro (D-CT)  
Rep. Michael Honda (D-CA)  
Rep. Jesse Jackson, Jr. (D-IL)  
Rep. Betty McCollum (D-MN)  
Rep. David Price (D-NC)  
Rep. Lucille Roybal-Allard (D-CA)  
Rep. James Walsh (R-NY)

#### Senate

Sen. Saxby Chambliss (R-GA)  
Sen. Hillary Clinton (D-NY)  
Sen. Christopher Dodd (D-CT)  
Sen. Dick Durbin (D-IL)  
Sen. Judd Gregg (R-NH)  
Sen. Kay Bailey Hutchison (R-TX)  
Sen. Johnny Isakson (R-GA)  
Sen. Herbert Kohl (D-WI)  
Sen. Richard Shelby (R-AL)  
Sen. Gordon Smith (R-OR)

### Safety of Seniors Act 2007 Passed

Introduced earlier this year by Senators Mike Enzi (R-WY) and Barbara Mikulski (D-MD) in the Senate and Representatives Frank Pallone (D-NJ) and Ralph Hall (R-TX) in the House, S. 845, the Safety of Seniors Act will develop effective public and professional education strategies to raise awareness about elder falls, encourage research to identify at-risk populations, and support demonstration projects aimed at preventing falls among older Americans. On April 23, 2008, the President signed the bill into law.

### TBI Act of 2008 Passed

On April 28, 2008, President Bush signed into law S. 793, the "Traumatic Brain Injury Act of 2008," which authorizes appropriations and will make changes to the Department of Health and Human Services programs. These programs provide grants to state programs for increased support for tracking and reporting of brain injuries and resources for brain injury rehabilitation.

The bill authorizes ongoing CDC, NIH and HRSA TBI programs over the period of FY 2009 through FY 2012. It also authorizes a new study by CDC and NIH in collaboration with the Department of Defense and the Department of Veterans Affairs to identify the incidence of brain injury among our nation's veterans, especially veterans of Iraq and Afghanistan.

## Health Impact Awards

The second annual Injury Prevention and Control Health Impact Awards nomination process will begin soon! These awards were designed to recognize efforts in achieving greater health impact within the field of injury and violence prevention; to promote within the field of injury and violence prevention and control best practices/success stories; and, to demonstrate CDC's commitment to achieving health impact.

Awards will be made in three categories:

1. To an organization, external to CDC, that helps further the field of injury and violence prevention through its communication, collaboration, and/or programmatic efforts at the national level;
2. To an organization, external to CDC, that helps further the field of injury prevention through its communication, collaboration, and/or programmatic efforts at the state or local level; and,
3. To a researcher or public health program, external to CDC, demonstrating health impact.

Nominations will be received electronically at CDC from June 2 to July 30, 2008. Recipients will be announced in early September.

## Engage and Deliver: Upcoming health marketing conference

The second National Conference on Health Communication, Media and Marketing sponsored by the CDC's National Center for Health Marketing and the Office of Enterprise Communications will be held in Atlanta, Georgia, August 12 - 14, 2008, in downtown Atlanta.



The theme this year is "Engage and Deliver," and will explore how public health can engage with the public and partners to develop and deliver better health information and interventions.

The conference provides a scientific and professional forum for researchers and practitioners to share insights, research findings, and best practices to advance the fields of health communication, marketing and media. The conference is an excellent opportunity to meet with colleagues and shape the future of health communication and marketing practice.

Learn more about the conference and register [online](#).

## RECENT *injury* PUBLICATIONS

- Browdowski ML, Nolan CM, Gaudiosi JA, Yuan YY, Zikratova L, Ortiz MJ, Aveni MM, Leeb RT, Simon TR, Hammond WR. Nonfatal maltreatment of infants, United States, October 2005 - September 2006. *MMWR*, 2008, 57(13):336-339. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5713a2.htm>
- CDC Workgroup for the Improvement of External Cause-of-Injury Coding. Strategies to improve external cause-of-injury coding in state-based hospital discharge and emergency department data systems. *MMWR Recommendations and Reports*, 2008, 55(RR01):1-15. [www.cdc.gov/mmwr/preview/mmwrhtml/rr5701a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5701a1.htm)
- Corso PS, Edwards VJ, Fang X, Mercy JA. Health-related quality of life among adults who experienced maltreatment during childhood. *American Journal of Public Health*, 2008, 98(6):1094-1100.
- Hamburger ME, Leeb RT, Swahn MH. Childhood maltreatment and early alcohol use among high-risk adolescents. *Journal of Studies on Alcohol and Drugs*, 2008, 69(2).
- Karch DL, Lubell KM, Friday J, Patel N, Williams DD. Surveillance for violent deaths, National Violent Death Reporting System, 16 states, 2005. *MMWR Surveillance Summaries*, 2008, 57(SS03):1-43,45. <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5703a1.htm>
- Lee KC, Shults RA, Greenspan AI, Haileyesus T, Dellinger A. Child passenger restraint use and emergency department-reported injuries: A special study using the National Electronic Injury Surveillance System-All Injury Program, 2004. *Journal of Safety Research*, 2008, 39(1):25-31
- Mack KA, Gilchrist J, Ballesteros MF. Injuries among infants treated in emergency departments in the United States, 2001-2004. *Pediatrics*, 2008, 121(5):930-937.
- Rutland-Brown W, Langlois JA, Bazarian JJ, Warden D. Improving identification of traumatic brain injury after non-military bomb blasts. *Journal of Head Trauma Rehabilitation*, 2008, 23(2):84-91.
- Selassie AW, Zaloshnja E, Langlois JA, Miller T, Jones P, Steiner C. Incidence of long-term disability following traumatic brain injury hospitalization in the United States, 2003. *Journal of Head Trauma Rehabilitation*, 2008, 23(2):123-131.

## staff *Kudos*

**Lee Annest** (Director, Office of Statistics and Programming) and **Lois Fingerhut** (Special Assistant for Injury Epidemiology, National Center for Health Statistics) were recognized by STIPDA as "Partners of the Year." This award acknowledges the contributions of organizations or individuals for furthering the mission of STIPDA: strengthening the ability of state, territorial and local health departments to reduce death and disability associated with injury and violence. The award recognizes the work and leadership of Lee and Lois in the development of the roadmap for improving external cause of injury coding across the nation.

**J. Logan** (Epidemic Intelligence Service Officer, Division of Violence Prevention) won the prestigious 2008 Alexander D. Langmuir Memorial Prize for his manuscript titled, "Characteristics of Perpetrators in Homicide-Followed-by-Suicide Incidents, National Violent Death Reporting System, 17 U.S. States, 2003-2005." The ADL Prize was established in 1966 by the EIS Alumni Association.

**Robin Ikeda** (Associate Director for Science) was awarded an Outstanding Service Medal by the U.S. Public Health Service Commissioned Corps for her leadership in fostering and advancing science.

The following Injury Center staff were recently recognized at the 56th Annual CDC and ATSDR Honor Awards Ceremony:

**Communications Services (Group)**, for their work on the Heads Up: Concussion in Youth Sports tool kit:

Julie Gilchrist  
Gail Hayes  
Jean Langlois  
Jane Mitchko  
Kelly Sarmiento  
Karen Thomas  
Marlena Wald

**Public Health Statistical Research and Services (Group)**, for their work on the Brain Trauma Foundation Guidelines Workgroup:

Mark Faul  
Ernie Sullivent  
Marlena Wald

*Tell us what you think...*

We welcome your feedback on the *Injury Center Connection*. Please contact Leslie Dorigo at [ldorigo@cdc.gov](mailto:ldorigo@cdc.gov).