



NAICRC-STIPDA Joint Committee on Infrastructure Development

Committee Chairs:

Chair - **Carol Runyan**, PhD, NAICRC
Co-Chair - **Susan Hardman**, STIPDA

STIPDA members:

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Carolyn Fowler, PhD, MPH,
Baltimore County Department of Health
and The Johns Hopkins Center for
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NAICRC members:

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Wanda Hunter, MPH,
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Corinne Peek-Asa, PhD, University of Iowa
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Thomas Songer, PhD, University of Pittsburgh,
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Other participants:

Stephanie Bryn, MPH,
Maternal and Child Health Bureau, HRSA
Lynda Doll, PhD, National Center for
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Susan Gallagher, MPH, Children's Safety
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Kelly Taylor, MS, REHS, Indian Health Service

Staff:

Carol Gunther-Mohr, MA, Project Director,
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Theresa Cruz, MPH, Research Assistant,
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Overview of the National Injury and Violence Prevention Training Initiative

Our vision is to reduce mortality and morbidity from injury in the United States through enhancement of the training infrastructure for state, local, and tribal health departments and their diverse partners.

Who is the primary audience for the training?

An estimated 8,000 professionals per year can benefit from injury and violence prevention training

- Over 300 staff in state health departments and the staff of more than 1,200 local health departments who work in injury prevention, along with staff in 400 tribal health departments
- Diverse partners from other government agencies, local organizations, and community coalitions including professionals in child and adolescent health, traffic safety, emergency medical services, health care, education, law enforcement, fire prevention, social services, SAFE KIDS coalitions, and many others
- Decision-makers from state, local, and tribal governments as well as other organizations

Why is continuing education needed?

- "Injuries are a leading cause of death for Americans of all ages, regardless of gender, race or economic status." noted the CDC, [Injury Fact Book 2001-2002](#).
- The Institute of Medicine report, [Reducing the Burden of Injury](#) (1999), recognized that "... there is a yawning gap between what we already know about preventing and ameliorating injuries and what is being done in our communities, work-places and clinics... *education is the area in which the field of injury has made the least progress.*"
- According to the STIPDA Core Capacity Survey in 2000, 'Introduction to injury prevention' is a training priority for 40% of the directors and 58% of the staff in state injury prevention units. Also, the state injury units reported staff turnover rates of 84% between 1999 and 2001.
- Of the 19 schools of public health that responded, only 16% of accredited schools of public health report that students are required to take an injury course as a core requirement for a degree objective, according to a study by the Association of Schools of Public Health (2002).

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Who is leading the initiative?

The State and Territorial Injury Prevention Directors Association (STIPDA) and the National Association of Injury Control Research Centers (NAICRC) are leading the effort to enhance the injury prevention training infrastructure in the United States. STIPDA staff member, David Scharf, MPH, and Kristen Lindemer, MPH, have actively contributed to the work of the Joint Committee.

The Maternal and Child Health Bureau (MCHB) and the National Center for Injury Prevention and Control (NCIPC) at CDC have provided the initiative with planning funds.

- The Institute of Medicine report, Who Will Keep the Public Healthy? Educating Public Health Professionals in the 21st Century(2002), states "Local health departments have urgent and serious needs for upgrading the skills of those currently employed and for educating new professionals." And further, "We must also build the framework that will allow us, over the long term, to ensure that public health professionals are prepared with the skills and knowledge necessary to improve population-level health."

Strategies for enhancing the training infrastructure

1. Increase Access to Existing Training Resources

- Develop a website with a searchable database of all existing injury and violence training resources
- Increase the availability of existing training programs in state, local, and tribal settings
- Sponsor scholarships to increase participation
- Provide assessment tools to assist individuals with the selection of appropriate training resources

2. Add an "Injury Component" to Current Public Health Training Curricula

- Integrate injury prevention concepts and content, as well as specific examples, into current public health and related training programs
- Introduce mechanisms for awarding professionals credit for education and training in injury and violence prevention
- Establish injury prevention as a required component of professional certifications

3. Develop New Injury and Violence Training Programs

- Create new training programs on the essentials of injury and violence prevention, including orientation programs, introductory skills development, in-depth training for experienced staff, and best practices updates
- Implement team-based training for health department staff and community partners
- Identify "teachable moments", such as strategic planning processes, STIPDA's State Technical Assessment Team reviews, individual performance appraisals, and individuals entering the field of injury prevention, and create innovative programs and resources to support learning
- Develop mentoring programs and/or peer learning networks.
- Define new professional certification for injury and violence prevention practitioners

National Injury and Violence Prevention Training Initiative

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