

Core Competencies: Essentials for Injury and Violence Prevention

Developed by the SAVIR-STIPDA Joint Committee Infrastructure Development

Injury is a leading cause of death, disability and health care use in the United States. Although significant progress has been made in the last few decades, there remains a great need to further reduce the frequency of injury and its burden. This effort will require a workforce that is knowledgeable about injuries and violence and skilled in practices to reduce them. At present, there is no comprehensive and systematic way to ensure that those who work to prevent injury and violence possess the competencies necessary to be effective in this endeavor. 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..." To address this deficiency, the National Training Initiative for Injury and Violence Prevention (NTI) was created in 2000 to coordinate and enhance training infrastructure for injury and violence prevention professionals. One effort of this group has been the identification of a set of core competencies that are fundamental to injury and violence prevention practice.

The competencies contained within this document outline a common understanding of the essential skills and knowledge that are regarded as necessary to work in injury and violence prevention. These competencies provide a basis for professional development and are intended to guide future training and curriculum development efforts. It is not expected that an individual will have to be an expert in all of the competencies in order to effectively carry out their job. The intent is that the individual should be competent in the mix of skills that is required to best serve injury and violence prevention programs in their setting. Ultimately, with research-based training and consistent implementation of best practices, it will be possible to reduce the burden of injury.

Process of Creating the Core Competencies in Injury and Violence Prevention

In 2000, the Society for the Advancement of Violence and Injury Research (SAVIR)[§] and the State and Territorial Injury Prevention Directors Association (STIPDA) formed the National Training Initiative for Injury and Violence Prevention (NTI) and began collaborating on a process to define the essential knowledge and skills that injury prevention professionals need to reach their greatest potential in the field. The Maternal and Child Health Bureau (MCHB) and the National Center for Injury Prevention and Control (NCIPC) at the Centers for Disease Control and Prevention (CDC) have provided the funds to support this initiative. Members from other important injury programs including the Education Development Center's Children's Safety Network, Indian Health Service and the National Highway Traffic Safety Administration are also involved in NTI.

In formulating the competencies, a working group of NTI reviewed numerous needs assessmentsⁱ as well as other relevant competencies and curriculumsⁱⁱ, creating a draft set of competencies in the summer of 2003. During the fall of 2003, a group of 52 injury and violence experts from research and practice reviewed the draft competencies and provided detailed feedback to the committee. The comments from this expert panel were incorporated into the competencies before a public comment period in September of 2004. Final revisions have been made, and the competencies will be updated as needed in the coming years.

[§] Formerly the National Association of Injury Control Research Centers, NAICRC.

Challenges in Defining the Scope of the Core Competencies

In developing the core competencies, the fundamental issues that the NTI working group struggled with included the intended audience for the competencies and the level of specificity to apply to the competencies. Injury and violence prevention is a very broad field encompassing a number of different disciplines: public health, law enforcement, emergency medical services, occupational health, highway and traffic safety, etc. The diversity of practices and approaches makes it impossible to create a single competency set that is appropriately relevant for all injury and violence prevention practitioners. As a result, the competencies outlined here were developed with a primary focus on public health practitioners and will be the most useful to this audience. However, the working group recognizes that the core competencies could also be applicable to others working to reduce injury and violence. Consequently, great care was taken to limit public health jargon and influence on the core competencies, such that many aspects of the competencies will have application to other disciplines.

In addition, the competencies were also designed to provide a broad perspective on the fundamentals of injury and violence prevention. In this fashion, the listed core competencies are intended to support a variety of training opportunities and curricula. The purpose of the competencies is to provide structure and guidance to future training efforts. Specific details related to content and learning methods for the competencies will be supplied by the related training and curriculum programs.

Guiding Principles for the Core Competencies

Throughout the writing process, the NTI working group developed a perspective of what the competencies should and should not be. In the end, certain guiding principlesⁱⁱⁱ dictated the nature and content of the competencies. These are:

- Competencies are best acquired through multiple means. Training alone may not be sufficient to achieve competency. Additional work experience that complements training may be necessary.
- While all workforce development should be competency-based, there is no expectation that a single uniform curriculum is necessary to accomplish this goal. Each training opportunity is unique, and the curriculum should be matched to the needs of the audience.
- Any one competency may apply broadly to injury and violence prevention professionals or be specific to a small subset. The developers of curricula should specify the professional audience and functional level intended in the training materials.
- The core competencies for injury and violence prevention will intersect and overlap with other existing competencies developed for practicing professionals.
- Competencies need to be routinely updated as science and practice evolve and injury morbidity and mortality trends change.

Proficiency Levels

The guiding principles hint at a key aspect of the core competencies: injury and violence prevention professionals are not expected to achieve competency in all learning objectives. Different positions will require different proficiency levels and have a stronger focus on certain competencies and learning objectives. A senior manager would need to be competent in areas not required of a health educator or fire-fighter; and vice versa. Additionally, the proficiency levels will also vary depending on the workforce. The public health workforce will have different proficiency needs than those who work in emergency medical services.

These competencies were designed to address multiple issues in injury and violence prevention. They will have differing applications both across and within organizations. Competency may be developed by individuals or by groups, such as an agency or coalition. As an example, one person in the organization might be competent in competencies 1, 2, 4, and 7; while another person might be competent in 3, 5, and 6; and another person competent in 8 and 9. Thus, the combined competencies of the individuals should ideally result in an overall organizational competency.

The main purpose of the core competencies for injury and violence prevention is to systematically guide the development of training programs. Nevertheless, there are also other uses for competencies. The competencies may be used to develop tool kits for self-assessment, create job descriptions, develop needs assessments or for performance evaluation. As times and needs change in the field of injury and violence prevention, these competencies will also change. The core competencies are considered a living document: to be used, revised and continually improved.

ⁱ Needs Assessments Reviewed:

- Education Development Center, Training Needs Assessment, 1989.
- UNC Injury Prevention Research Center, Pre-VINCENT Training Needs Assessment, 1996.
- STIPDA Core Capacity Survey, 2000.
- Canadian Collaborating Centres for Injury Prevention & Control, Education Needs Assessment, 2000.
- SAVIR-STIPDA Joint Committee on Infrastructure Development, Training Survey of Health Departments, 2001.
- SAVIR-STIPDA Joint Committee on Infrastructure Development, Survey of Safe USA participants, 2001.

ⁱⁱ Relevant Competency & Objective Materials Reviewed:

- Core Competencies for Public Health Professionals, Council on Linkages between Academia and Public Health Practice.
- Core Competencies for Injury Prevention, Indian Health Service.
- State and Technical Assessment Team Review Guide, STIPDA.
- Course Objectives, Johns Hopkins Summer Institute, Principles and Practice of Injury Prevention.
- Canadian Injury Prevention and Control Curriculum, Canadian Collaborative Centres for Injury Prevention and Control (in draft).
- WHO TEACH-VIP—International injury prevention curriculum (in draft).
- Core Competencies for Effective Practice, Southern California Developing Center for Youth Violence Prevention and the University of Southern California Department of Family Medicine, 2001.

ⁱⁱⁱ Competency-to-Curriculum Tool Kit: Developing Curricula for Public Health Workers, Columbia University School of Nursing Center for Health Policy and Association of Teachers of Preventive Medicine, 2004.