

**American Public Health Association  
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CONTENTS:

SAVIR Board of Directors Election is Complete.....	2
Has Your Research Made a Difference or Do You Know Research That Has?.....	2
Road Traffic Safety in Developing Countries.....	3
Stories Requested.....	3
Register to Vote With Absentee Ballot.....	3
New Research on Intimate Partner Violence and Firearms.....	4
ICEHS Procedures Manual.....	4
Archivist's Attic.....	5

**Greetings from your new ICEHS Section Newsletter Editor John Lundell at the University of Iowa Injury Prevention Research Center. I am pleased to help share important information among the members of our section. Please send articles for future issues to me at *john-lundell@uiowa.edu*. Also thanks to Bella Dinh-Zarr and her colleagues at AAA for agreeing to distribute this electronic newsletter.**

## **SECTION NEWS**

### **SAVIR Board of Directors Election is Complete**

As Executive Director it is my pleasure to announce that the voting for six SAVIR (Society for the Advancement of Violence and Injury Research, formerly NAICRC) Director positions is completed.

The results of the voting are:

Elected to three year terms on the SAVIR Board of Directors (ending at the close of the Annual Meeting of 2008)

1. Lenora Olson
2. Charles Branas
3. Gary Lapidus

Elected to two year terms on the SAVIR Board of Directors (ending at the close of the Annual Meeting of 2007)

1. Anara Guard
2. Tom Songer
3. Huiyun Xiang

I offer my thanks to all of you who voted in this election and hope you will wish all candidates your gratitude for their assumption of this responsibility.

*~ Bill O'Connell*

*Editors Note: All the elected SAVIR board members are also ICEHS members! ~John Lundell*

### **Has your research made a difference or do you know research that has?**

The HSR Impact Award recognizes health services research that has made a positive impact on health policy and/or practice that has been successfully translated into health policy, management, or clinical practice.

Submit your nominations today!

- Lead researcher receives \$2,000
- Winning research is published and disseminated as part of the AcademyHealth "HSR Impact" series
- Award is presented at the 2007 National Health Policy Conference on February 12-13

Selection Criteria:

- Quality of research
- Effectiveness of research dissemination and translation approach
- Impact of the research

Nominations must be received by Friday, July 28, 2006.

For more information on the HSR Impact Award, please visit

<http://www.academyhealth.org/awards/hsrimpactsnominations.htm> or contact Jennifer Muldoon at 202.292.6700.

*~ Heather Smithco*

## **Road Traffic Safety in Developing Countries**

The National Academies Transportation Research Board (TRB), the Policy and Global Affairs Division, and the Institute of Medicine have released TRB Special Report 287: *Improving Road Safety in Developing Countries: Opportunities for US Cooperation and Engagement*. This prepublication summarizes presentations and discussion at a workshop held on January 26-27, 2006 in Washington, DC.

The workshop focused on the sharp increases in road traffic-related deaths and injuries in developing countries with a goal of providing a view of the diversity of U.S. interests, the scope of activities of U.S. agencies addressing this problem, and prospects for further U.S. engagement. An inventory of activities and interests of U.S. government agencies related to road safety in developing countries was prepared and preliminary findings were presented at the workshop. Information was collected from interviews conducted with the staff of 27 offices in 7 cabinet departments and independent agencies. The goals of the inventory were to help government policy makers form a comprehensive picture of U.S. government interests related to road traffic safety in other countries, to aid in comparing the magnitude of these interests with the scope of current efforts directed at the problem, and to help agencies coordinate their efforts so as to allow a more effective government-wide response. Next steps toward a more effective response were also identified.

The report can be found at: <http://onlinepubs.trb.org/onlinepubs/sr/sr287.pdf>  
*FYI: ICEHS's Sue Gallagher provided the photos for the cover of the report.*

*~ Sue Gallagher*

## **Budget Cut Impact Stories Requested**

APHA is looking for stories about how the budget cuts to public health programs have affected them/their state/their community.

How have the federal funding cuts to public health programs affected you?

"As you know, in addition to last year's devastating cuts, the President's 2007 budget proposed cutting funding for the Centers for Disease Control and Prevention (CDC) by more than 2% and the Health Resources Services Administration (HRSA) by almost 5%. His budget eliminated or entirely cut several important public health programs like the National Children's Study, the Preventive Health & Health Services Block Grant, HRSA Health Professions Grant Programs, and those that address chronic disease prevention."

There is an on-line survey at: <http://www.zoomerang.com/recipient/survey-intro.zgi?p=WEB2258SBFGKPH>

*~ Linda Degutis*

## **Register to vote with absentee ballot**

This year's Election Day (November 7, 2006) will happen during the APHA Annual Meeting in Boston, Massachusetts. Make your voice heard in the ballot box by registering to vote and requesting an absentee ballot before your state deadline! Click here for more information: <https://ssl.capwiz.com/apha/e4/?>

*~ Sharon McCarthy*

## **New Research on Intimate Partner Violence and Firearms**

The June 2006 issue of *Evaluation Review* is a special issue on intimate partner violence and firearms. Dedicated to the memory of Linda Saltzman and Susan Schechter, the issue contains information about the rationale for and the development, implementation and effect of policies designed to keep guns out of the hands of batterers. Authors from Johns Hopkins, Harvard, Duke, Boston University, and UCLA as well as local, state, and federal government contributed. The special issue contains the following articles:

Firearms use in intimate partner violence: A brief overview (Susan B. Sorenson)

Introduction – Reflections of a prosecutor (Casey Gwinn)

Disarming batterers through restraining orders: The promise and the reality in California (Paul L. Seave)

Are temporary restraining orders more likely to be issued when applications mention firearms? (Katherine A. Vittes and Susan B. Sorenson)

Gun possession among a sample of Massachusetts batterer program enrollees (Emily Rothman, Renee Johnson, and David Hemenway)

Separating batterers and guns: A review and analysis of gun removal laws in 50 states (Shannon Frattaroli and Jon Vernick)

Do laws restricting access to firearms by domestic violence offenders prevent intimate partner homicide? (Elizabeth Richardson Vigdor and James Mercy)

Understanding and informing policy implementation: A case study of the domestic violence provisions of the Maryland Gun Violence Act (Shannon Frattaroli and Stephen P. Teret)

Taking guns from batterers: Public support and policy implications (Susan B. Sorenson)

Through a grant from the Joyce Foundation, individual copies are available at no charge by contacting:

Susan B. Sorenson, Professor  
UCLA School of Public Health  
650 C.E. Young Drive South  
Los Angeles, CA 90095-1772  
e-mail: sorenson@ucla.edu

If you have any questions, please let me know. In advance, thanks.

-SBS

~ Susan Sorenson

## **ICEHS Procedures Manual**

The ICEHS Procedures Manual is a must read for those of you really interested in our section, particularly how it functions. This Procedures Manual is intended to provide the officers, committee chairpersons, and members of the Section and Governing Councils with guidelines for the responsibilities delegated to them by the members of the Section. These procedures should help provide continuity through changes of officers in order to administer the business of the Section in conformity with the provisions of the Constitution and the By-Laws of the American Public Health Association.

Although some sections of the manual may be outdated in the details, the overall framework is accurate and important for *any* member to read. This manual is necessary for all of us because, as we all are well aware, organizations function more efficiently when its operations are clearly understood—and engaged in--by its membership.

To find the Procedures Manual and other relevant ICEHS Section information, go to [www.icehs.org](http://www.icehs.org) . As of this writing, the link for the “Members Only” section is password protected. To access it, go to the ICEHS Section Members Only link on the left side of the home page. The username is ICEHS and the password is safety1st.

Check out the full [www.icehs.org](http://www.icehs.org) website; it will be well-worth your time.

*~Lois Fingerhut*

### **The Archivist’s Attic:**

APHA’s Annual Meeting. Back to the Future? : Boston and MA. Pioneering Leadership in Child Injury Prevention – 1950-19901  
( The archivist has assessed national and states’ leadership history in injury prevention ( e.g. see California ( ICEHS Newsletters June 2003, Jan 2004; Philadelphia, Nov 2002; NY State ( members only MSS, Newsletters June 2003,Sept 2003; Nationwide ( members only: Millennium and **Fisher L and Brown TM. .Donald Budd Armstrong and W. Graham Cole: Early Injury Control Advocates.** Am J Public Health, Jun 2004; 94: 941. ). In honor of our forthcoming annual meeting in Boston, here’s Boston’s and MA’s leadership history on our nation’s seminal work) :

In 1951, Massachusetts was one of the first state-funded injury prevention programs of the W.K. Kellogg Foundation of Battle Creek, Michigan.<sup>2</sup> In Cambridge, a five-year grant, to the Cambridge Health Department , research-demonstration-home accident prevention program to determine the causation and controllable factors of home accidents in Cambridge, develop practical methods for the prevention on those accidents, and to evaluate the place of local health departments in the community accident program. A number of epidemiological surveys were undertaken: 1) An analysis of all deaths due to home accidents during the past 10-15 years, 2) epidemiological investigations of all home accidents reported by hospitals in Cambridge, 3) an extensive study of the accident causation in a comparatively small and specially selected sample.

Nearby, another Kellogg-supported project of the Health Foundation of Boston, received funds from interested insurance companies, developed extensive in-service education for nurses and environmental health staffs on home accident prevention techniques in their education inspection activities and seasonal approaches large scale, campaigns with concentrated effort to eliminate specific seasonal hazards. Still another activity, was gathering data on victims of home accidents treated in the Boston municipal hospitals.

A third Kellogg project, the Massachusetts Department of Public Health’s Advisory Committee promoted "politically useful activities", e.g., the public health nursing section's development of an accident prevention module for nurses.

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1 From a longer original paper : Historical Notes on Injury Prevention in Massachusetts In Honor of 10th Anniversary Celebration and Forum Commonwealth of Massachusetts SCIPP May 18, 1988 Cambridge, MA. Les Fisher, MPH, Manager Preventive Services, Injury Control Program New York State Department of Health. (not presented, submitted after celebration ) Leslie Fisher Copyrighted 2006. Title revised Feb 2006.

2 Fisher, L., Childhood Injuries, Causes, Preventive Theories and Case Studies, Journal of Environmental Health. May/June 1988, 355

Little is available as to the outcomes of these programs. Summaries are in folders and on microfiche in the W.K. Kellogg Foundation in Battle Creek.<sup>3</sup> The general conceptual framework of the day, however, was that with a massive public awareness for humanitarian needs, "accident prevention" would receive the attention it required. The main thrust was informing the victim of faults and responsibility for changes. Today, we know better that injuries cannot always be controlled by the victim; however, a major philosophical contribution from the Cambridge program different in many respects from those other "home safety" programs was that public education was secondary to the promulgation of effective laws aimed at eliminating home hazards.

Massachusetts leaders during the 1950-60's provided national initiatives in injury prevention, as from samplings of the professional literature: John B. Gordon, Professor of Preventive Medicine and Epidemiology, Harvard School of Public Health, "The Epidemiology of Accidents", American Journal of Public Health, April 1949. In his conclusion, Gordon supported the concept of "specifically directed prevention based on the understanding of cause that has long guided the attack on communicable and other diseases. The technical method is that of the focal attack, a concentrated effort on recognized centers of infection and the causes that brought them intervened. The biological principles that govern disease as a community problem are interpreted equally well in injuries. A pattern of epidemiologic analysis is presented as a means for better understanding of accidents, and thereby through improved measures of prevention, a less cost in death or disability." Later, William Haddon, Jr. in Accident Research would critique Gordon's article for not recognizing that the true agent factors involve the transfer of energy. But, Gordon's work remains a contribution worthy of reading, even today, not only for students but researchers, educators, and practitioners.

Another leader from Massachusetts in child injury prevention and poison control, Dr. Robert Haggerty (later, the Executive Director of the W.T. Grant Foundation), in 1959, Director of Pediatrics at the Harvard Medical School and the Children's Medical Center and the Boston Poison Information Center, in the New England Journal of Medicine, June 1959, "Home Accidents in Childhood" (page 1322 ff), reviewed the nature and extent of injuries in New Bedford, MA, against the "theory of the dynamics of how home accidents take place". Children have marked differences in accident hazards at different development levels and he advocated the role of the physician's primary responsibility for promoting the prevention of accidents. As a pediatrician, he leveraged the polity of injury prevention.

"Epidemiologic Principles Applicable to the Study of Prevention of Child Accidents", by Ross McFarland, October 1955 American Journal of Public Health: Dr. McFarland was Associate Professor at the Harvard School of Public Health in Boston. The control of "accidents" falls within the province of preventive medicine and public health because of the strictly medical aspects of injuries and because of the important -role of human variables. That control, he adequately and prophetically stated for us today, requires a coalition of medical, administrative, architectural, and other professions.

While the school of Human Factors predominated as the primary cause of "accidents", the Boston area's earlier contribution had set strong "shoulders" on which others nationwide would "climb" in subsequent decades to further develop or carry out the new ideas which they had developed or modified from others: noteworthy - Dr. William Haddon Jr., Harvard Medical School Internship Program at the New York State Department of Health (1957-1961) and his NYS and national legacy!

The MA. SCIPP Program has provided a continuation of that tradition under founders Bernie Guyer and Sue Gallagher. For example, as I wrote to Cindy Rodgers, MA. DOH in 1983, we guided DHHS-MCH development of 1983 "Childhood Injury Prevention Programs: An Administrative Guide". David Heppel, the federal MCH program director, who Sue Gallagher and I met at the Boston session on the Guide, became very supportive of the need to expand training and

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<sup>3</sup> Letter to Les Fisher dated September 19, 1987 from Laura A. Davis, Vice-President, Administration and Corporate Secretary, W.K. Kellogg Foundation

funding for child injury prevention. The teaching modules and studies of SCIPP that later guided programs across the country. Injury Prevention: Meeting the Challenge prepared by Patty Molloy and the group at Education Development Center, Inc. reflect greatly on the expertise and successes of the Commonwealth. You have also guided the SPRANS CDC, and state's programs. Sue Gallagher's state and regional workshops represent the peak of knowledge and capability in this country.

We in New York State also appreciate a special linkage: In the late 1970's representatives from the Poison Control Centers in New York and I literally met for the first time in Boston at a federal DHHS training program on Regional Poison Control Centers conducted by Sylvia Micik.<sup>4</sup> From that meeting, in Boston, we agreed to develop a statewide network which led two years ago to the enactment of regional poison control network law with more than \$3 million in insurance reimbursement to fund these Centers.<sup>5</sup>

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4 Developing Regional Poison Systems, Sponsored by San Diego Regional Poison Control Center, Massachusetts Poison Control System and DHEW, June 11-14, 1979, Copley Plaza, Boston.

5 Fisher, L., "The Next Five Years: The Goals and Objectives of Regional Poison Control Center Systems in New York State", Veterinary and Human Toxicology. April 1981.