

**American Public Health Association  
Injury Control and Emergency Health Services Section  
APHA ICEHS Electronic News  
October 2005 Vol. 12 Issue 10**

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**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**

### **Notes from the Chair**

The rescheduled APHA meeting in Philadelphia is coming up shortly. Given all the events of the past few months, it will be great to convene and discuss public health and ICEHS issues. I hope many of you will be able to attend, as it is always a good opportunity to meet ICEHS members and past, present and future ICEHS leadership. In addition to the sessions organized by the section, ICEHS will be having various meetings. Please join us in the following meetings/events:

#### **Monday December 12**

*7am – 8am – New Member Breakfast*

\*\*The website says it starts at 6:30am but has been changed to 7am so that everyone sleep in just a little more

*6:30pm-7:30pm - ICEHS Social Hour*

#### **Tuesday December 13**

*4:30pm-6:00pm - ICEHS business meeting*

Open to everyone

*7:00pm – Awards Dinner*

Come to the Vietnam Palace at 222 N. 11th Street, Philadelphia to meet fellow ICEHS members and celebrate the work of two important people in the field. This event will cost \$35-\$40.

Thanks for a great year  
-Larry Cohen

Larry Cohen  
Executive Director  
Prevention Institute  
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(510) 663-1280  
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## Annual Meeting ~ Firearms Presentations

Interested in learning more about firearms research? Be sure to attend the special session on firearm injury that is being organized by ICEHS.

### **3371.2: Monday, December 12, 2005: 4:30 PM-6:00 PM Firearm Injury Research: From Research to Action (Oral)**

This special session uses the public health model in examining the state of the science in firearm injury research. The first presenter, J. Lee Annett, will describe efforts to define and monitor the extent of the firearm injury problem. Specifically, he will describe surveillance systems (e.g., NEISS special study, NVSS, NVDRS, BRFSS) that capture firearm injury, and discuss data uses and the availability of public use data files for fatal and nonfatal firearm-related injury research. The second presenters (Charles Branas and Douglas Wiebe) will provide an overview of important lines of research in understanding the causes of firearm injury. This presentation will have a particular emphasis on the research that links firearm ownership to homicide (including fatal intimate partner violence), suicide, and unintentional firearm injuries. The final presentation will profile a successful and innovative firearm-injury prevention program, CeaseFire (Chicago). The presenters (Gary Slutkin) will describe the evaluation results, as well as dissemination of the program in other cities in the United States.

In addition, there are many other firearms-relevant presentations, topics range from injury to marketing to policy. Below is a list of firearms presentations and sessions. To read abstracts, go to: <http://apha.confex.com/apha/133am/techprogram/> and enter the four digit session number, then click on the presentation you want to read about.

### **3113.0: Monday, December 12, 2005: 10:30 AM-12:00 PM Trends in Firearm Injuries and Violence (Oral)**

10:30 AM: [\*Neighborhood disorder and the risk of firearm injury\*](#). Authors: **Charles C. Branas, PhD**, Douglas J. Wiebe, PhD, Therese S. Richmond, PhD, Dennis P. Culhane, PhD.

10:47 AM: [\*Homicide and geographic access to gun dealers in the United States\*](#). Authors: **Douglas J. Wiebe, PhD**, Michael R. Elliott, PhD, Robert T. Krafty, MA, Christopher S. Koper, PhD, Michael L. Nance, MD, Charles C. Branas, PhD.

11:04 AM: [\*Storage of household firearms: An examination of women's attitudes and beliefs\*](#). **Renée M. Johnson, PhD, MPH**, Carol Runyan, PhD, Tamera D. Coyne-Beasley, MD, MPH, Megan A. Lewis, PhD, J. Michael Bowling, PhD.

11:21 AM: [\*Family, peer & neighborhood assets: Effects on perpetration of violence among urban girls\*](#). **Beth E. Molnar, ScD**, Magdalena Cerda, MPH, Andrea L. Roberts, PhD, Stephen L. Buka, ScD.

11:38 AM: [\*What a New Reporting System Tells Us about Violent Deaths\*](#). Author: **Malinda Steenkamp, DD White, MS**.

**3151.0: Monday, December 12, 2005: 12:30 PM-1:30 PM**  
**Violence Studies (Poster)**

Board 1: [Homicides in Sao Paulo City, Brazil: Planning a surveillance system.](#) Authors: **Vilma Pinheiro Gawryszewski**, Tulio Kahn, Maria Helena Prado Mello Jorge.

Board 2: [Role of the New Jersey Violent Death Reporting System in analyzing murder-suicide.](#) Authors: **Bretta Jacquemin, MPH**, Catherine Klinger, MPH, Katherine Hempstead, PhD.

Board 3: [Emergency Physicians do not adequately document intentional injuries.](#) Authors: **Brendan G. Carr, MD, MA**, Sarah E. Winters, MD, Joel Chinitz, MD, MPH, Douglas J. Wiebe, PhD.

Board 4: [Can patients' history of hospital admissions predict suicide risk?](#) Authors: **Lynne Fullerton-Gleason, PhD**, Jonathon LaValley, BS, G. Thomas Shires, MD.

Board 5: [Subsequent violent death among emergency department patients seen for firearm injuries.](#) Authors: **Cameron S. Crandall, MD**, Jonathon LaValley, BS, Roberto Agüero, MS, Lynne Fullerton-Gleason, PhD.

Board 6: [Examining contextual explanations for racial differences in interpersonal firearm violence.](#) Authors: **Chyvette T. Williams, PhD**, Douglas J. Wiebe, PhD, Charles Branas, PhD.

Board 7: [Distribution of firearm ownership in the United States: Findings from the 2004 National Firearms Survey.](#) Authors: **Lisa M. Hepburn, PhD, MPH**, Matthew Miller, MD, MPH, ScD, Deborah Azrael, PhD, David Hemenway, PhD.

Board 8: [Evaluation of a violence primary prevention training program: PREVENT workshops.](#) Authors: **Kristen A. Sullivan, MA, MBA, MSW**, Mariana Garrettson, MPH, Karl Umble, PhD, MPH, Tamera Coyne-Beasley, MD, MPH, Carol W. Runyan, PhD, MPH, Sandra L. Martin, PhD.

Board 9: [Suicide deaths and self-inflicted injuries in Kentucky: An urban-rural comparison.](#) Author: **Allison Huck, MPH**.

Board 10: [Minnesota Nurses' Study: Relation Between Nurse License Type and Violence.](#) Authors: **Nancy M. Nachreiner, PhD, MPH, BSN**, Helen E. Hansen, PhD, Akiko Okano, RN, Susan G. Gerberich, PhD, Andrew D. Ryan, MS, Patricia M. McGovern, PhD, Timothy R. Church, PhD.

**3152.0: Monday, December 12, 2005: 12:30 PM-1:30 PM**  
**Domestic and Intimate Partner Violence (Poster)**

Board 1: [Domestic violence restraining order issuance: Firearms not a determining factor.](#) Authors: **Katherine A. Vittes, MPH**, Susan B. Sorenson, PhD.

**4088.0: Tuesday, December 13, 2005: 12:30 PM-1:30 PM**  
**Emergency Health Services Research (Poster)**

Board 10: [Rates of physician counseling on gun safety in Southwestern Ohio.](#) Authors: **Shalini G. Forbis, MD, MPH**, Molinda M. Chartrand, MD, Adrienne Stolfi, MSPH, John Pascoe, MD, MPH.

**4296.0: Tuesday, December 13, 2005: 4:30 PM-6:00 PM**  
**Student Assembly Late Breaker: Current Topics in Student Research (Oral)**

4:30 PM: [Ready, aim...click: An exploration of firearms sales practices on the Internet.](#) Authors: **Morgan L. Johnson, MPH**, J. Michael Bowling, PhD, Kurt M. Ribisl, PhD.

**5002.0: Wednesday, December 14, 2005: 8:30 AM-9:30 AM**  
**Connecting Faith to Evidence Based Approaches (Poster)**

Board 1: [Faith and medicine in action: Understanding, preventing, and responding to firearm violence and suicide.](#) Authors: **Heather McCabe, JD, MSW**, Lori Lovett, MSEd, Joseph O'Neil, MD, Marilyn Bull, MD.

**5157.0: Wednesday, December 14, 2005: 2:30 PM-4:00 PM**  
**Marketing Disease: Strategies for Countering Harmful Corporate Practices (Oral)**

2:50 PM: [Gun fights: The role of public health in reducing gun violence.](#) Author: **Stephen P. Teret, JD, MPH**

3:10 PM: [Advocacy across issues: Lessons for nutrition from tobacco, alcohol, firearms, and auto hazard control.](#) Author: **Lori Dorfman, DrPH.**

~Renee M. Johnson, Chair  
*Violence & Weapon-Related Injuries Committee*

## **Violence & Weapon-Related Presentations**

There will be almost 400 presentations about violence and weapon-related injuries at the Annual Meeting in Philadelphia. Interested in finding out where and when they take place? If so, go to: <http://apha.confex.com/apha/133am/techprogram/> and enter your search terms (e.g., intimate partner violence, child maltreatment, firearms). See you at the conference!

~Renee M. Johnson, Chair  
*Violence & Weapon-Related Injuries Committee*

A special feature of the newsletter this month is the ICEHS Networking Project Form. The ultimate goal of The Project is to facilitate networking between student members and those already employed in the field of injury prevention and emergency health. Once you have filled out the form below, please return to me (Mira). My email address is [grice0001@umn.edu](mailto:grice0001@umn.edu). The information collected on this form will be compiled into a list of members who are willing to be contacted by others in ICEHS.

If you are currently working in the field and interested in helping students understand the practical link between academia and the “real world” of injury prevention, please fill out the form and be a part of The Project. Or, if you are a student and would appreciate the wisdom of someone who has “been there” and would like to know how to best prepare for your future career, fill out the attached form. Get involved and be a part of the ICEHS Networking Project!!

### **ICEHS Networking Project**

**Name:**

**Job Title:**

**Email address:**

**Current Place of Employment and/or School (for students):**

**Alma Mater (undergrad/grad):**

**Professional and/or Research Interests:**

**Briefly, how did you choose this career/area of study?**

Please e-mail form to Mira Grice at [grice0001@umn.edu](mailto:grice0001@umn.edu). Thank you.

*~ Mira Grice*

## **Archivist's Attic : Historical Diversions and Supporting The Needs of Injury Control, Not Mutually Exclusive**

From the injury control ( IC) annuals: WWI , the influenza pandemic of Oct -Nov 1918 and WWII caused a diversion from interests and efforts in our evolving IC disciplines. Nevertheless, pioneering military and aeronautical injury control work of De Haven, Stapp, MacFarland, et al were touchstones for later modern home, public and highway IC advances. (See: Baker SP. Injury Science comes of age. JAMA.1989;226:2284-5, [www.icehs.org](http://www.icehs.org): Sept 2002 ICEHS Newsletter: Injury Control Time line and MSS at Members' Only).

Current national fiscal pressures to fund the war, disaster relief, oil refineries, research on and production of influenza inoculations; with proposed cuts in social service and health programs appropriations, call on our individual leadership to contact our Congressman and our historical effective IC partners in pediatrics, state and local injury groups (today, NACCHO, ASTHO, and STIPDA) and other 'private' organizations (such as Safe Kids). The lessons of IC history also illustrate that even with comparatively less medical and public health manpower, some cuts, if not prevented can be minimized or made less severe. Like a spring, we bounce back, in a newer and better form in our fourth or fifth national IC regenerations. Leadership advocates (all of us), today, are urging Members of Congress to abandon budget reconciliation and instead broaden relief for those in need. Call your Senators and Representatives and ask them not to cut \$35 billion from vital support programs such as Medicaid and Food Stamps... and IC.

May the 1918 national and Philadelphia influenza time line events (below from the Public Broadcasting System web site), Philadelphia's IC history (at ICEHS Newsletter 2002) and our learning organization follow up from Philadelphia's Annual APHA Meetings, strengthen us to lead the future of IC.

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(The opinions expressed above are mine alone and do not represent any one else nor any organization).

### **1918 Influenza Timeline**

#### **March**

- At Fort Riley, Kansas, an Army private reports to the camp hospital just before breakfast on March 11 complaining of fever, sore throat, and headache. He was quickly followed by another soldier with similar complaints. By noon, the camp's hospital had dealt with over 100 ill soldiers. By week's end that number jumped to 500.

#### **July**

- Public health officials in Philadelphia issue a bulletin about the so-called Spanish influenza.

#### **August**

- Around the 27th of the month, sailors stationed on board the Receiving Ship at Commonwealth Pier in Boston begin reporting to sick-bay with the usual symptoms of the gripple. By August 30, over 60 sailors were sick. Soon, Commonwealth Pier was overwhelmed and 50 cases had to be transferred to Chelsea Naval Hospital. Flu sufferers commonly described feeling like they "had been beaten all over with a club."

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## September

- Dr. Victor Vaughn, acting Surgeon General of the Army, receives urgent orders to proceed to Camp Devens near Boston. Once there, what Vaughn sees changes his life forever: "I saw hundreds of young stalwart men in uniform coming into the wards of the hospital. Every bed was full, yet others crowded in. The faces wore a bluish cast; a cough brought up the blood-stained sputum. In the morning, the dead bodies are stacked about the morgue like cordwood." On the day that Vaughn arrived at Camp Devens, 63 men died from influenza.
- The Navy Radio School at Harvard University in Cambridge reports the first cases of influenza among the group of 5000 young men studying radio communications.
- On September 5, the Massachusetts Department of Health alerts area newspapers that an epidemic is underway. Dr. John S. Hitchcock of the state health department warned that "unless precautions are taken the disease in all probability will spread to the civilian population of the city."
- US Surgeon General Rupert Blue of the United States Public Health Service dispatches advice to the press on how to recognize the influenza symptoms. Blue prescribed bed rest, good food, salts of quinine, and aspirin for the sick.
- Lt. Col. Philip Doane, head of the Health and Sanitation Section of the Emergency Fleet Corporation, speaking in Washington, D.C., fuels the rumor and speculation by blaming the Germans for the deadly influenza that was striking Americans. Said Doane: "It would be quite easy for one of these German agents to turn loose Spanish influenza germs in a theater or some other place where large numbers of persons are assembled. The Germans have started epidemics in Europe, and there is no reason why they should be particularly gentle with America."
- Edward Wagner, a Chicagoan newly settled in San Francisco, falls ill with influenza on September 24. San Francisco public health officials had been downplaying the potential dangers posed by the flu. Dr. William Hassler, Chief of San Francisco's Board of Health had gone so far as to predict that the flu would not even reach the city.
- On September 28, 200,000 gather for a 4th Liberty Loan Drive in Philadelphia. Days after the parade, 635 new cases of influenza were reported. Within days, the city will be forced to admit that epidemic conditions exist. Churches, schools, and theaters are ordered closed, along with all other places of "public amusement."
- Royal Copeland, the Health Commissioner of New York City, announces, "The city is

in no danger of an epidemic. No need for our people to worry."

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## October

- Boston registers 202 deaths from influenza on October 2. Shortly thereafter, the city canceled its Liberty Bond parades and sporting events. Churches were closed and the stock market was put on half-days.
- On October 6, Philadelphia posts what would be just the first of several gruesome records for the month: 289 influenza-related deaths in a single day.
- Congress approves a special \$1 million fund to enable the U.S. Public Health Service to recruit physicians and nurses to deal with the growing epidemic. US Surgeon General Rupert Blue set out to hire over 1000 doctors and 700 nurses with the new funds. The war effort, however, made Blue's task difficult. With many medical professionals already engaged in lending care to fighting soldiers, Blue was forced to look for some recruits in places like old-age homes and rehabilitation centers.
- 851 New Yorkers die of influenza in a single day. In Philadelphia, the city's death rate for one single week is 700 times higher than normal.
- The crime rate in Chicago drops by 43 percent. Authorities attributed the drop to the toll that influenza was taking on the city's potential lawbreakers.
- On October 19, Dr. C.Y. White announces in Philadelphia that he has developed a vaccine to prevent influenza. Over 10,000 complete series of inoculations were delivered to the Philadelphia Board of Health. Whether or not the so-called vaccine played much of a role in loosening the flu's grip on the city became a matter of great debate.
- October 1918 turns out to be the deadliest month in the nation's history as 195,000 Americans fall victim to influenza.

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## November

- Celebrating the end of World War I, 30,000 San Franciscans take to the streets to celebrate. There was much dancing and singing. Everybody wore a face mask.
- Sirens wail on November 21, signaling to San Franciscans that it is safe--and legal--to remove their protective face masks. At that point, 2,122 were dead due to influenza.

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## December

- 5,000 new cases of influenza are reported in San Francisco.

*~Lee Fisher*

## **POSITION ANNOUNCEMENTS**

**Assistant Professor  
Injury Control  
Johns Hopkins University  
Bloomberg School of Public Health  
Department of Health Policy and Management**

The Johns Hopkins University Bloomberg School of Public Health, Department of Health Policy and Management, is seeking a tenure track Assistant Professor in Injury Control. This individual will join the faculty of the Johns Hopkins Center for Injury Research and Policy. The successful applicant will be awarded the Leon Robertson Career Development Chair in Injury Control, a partial endowment for the first three years of the appointment.

Candidates should have a PhD or other advanced professional degree, with research experience related to injury epidemiology and prevention. Strong methodological skills are required. We are especially interested in candidates with expertise in injury in relation to work, transportation, alcohol, and/or vulnerable populations. The new faculty member will have opportunities to collaborate with a multidisciplinary faculty whose work addresses foundational, intervention, and dissemination research. Joint appointments in other departments in the Bloomberg School of Public Health are possible. The candidate should have publications in peer-reviewed journals as well as teaching ability.

The Johns Hopkins University actively encourages interest from women and minorities, and is an affirmative action/equal opportunity employer.

Applications, including a curriculum vitae and the names of three references, should be sent to Professor Susan Baker, Johns Hopkins Bloomberg School of Public Health, 624 N. Broadway, Baltimore, MD 21205.

*~ Susan Baker*

**Senior Researcher  
UCLA Southern California Injury Prevention Research Center**

We are seeking a senior researcher at the UCLA Southern California Injury Prevention Research Center (SCIPRC). Working closely with the Director and Associate Director for Science, this individual will take a leading role in on-going project management as well as the development of new projects for grant submission. The incumbent will also interact with Ph.D. and Masters student researchers at the Center.

Ideally, applicants should have a doctorate degree in Epidemiology (or a related field) or a masters degree and relevant research experience. We also welcome qualified candidates from the Social or Behavioral Sciences or any other field related to injury prevention research.

If you know of anyone who may be interested, or if this position appeals to you, please contact me here at the SCIPRC.

Thank you.

Sincerely,  
Jess Kraus

Jess F. Kraus, M.P.H., Ph.D.  
Director, Southern California Injury Prevention Research Center  
Professor of Epidemiology  
UCLA School of Public Health  
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**Chief, Prevention Development and Evaluation Branch  
Division of Violence Prevention  
National Center for Injury Prevention and Control  
Centers for Disease Control and Prevention**

**Salary Range:** \$102,056 – \$132,678 (GS-15)  
**Location:** Atlanta, Georgia  
**Type:** Full Time

The Centers for Disease Control and Prevention is embarking upon a nationwide effort to recruit a qualified individual as Chief of the Prevention Development and Evaluation Branch, Division of Violence Prevention, National Center for Injury Prevention and Control. The employment vacancy announcement will be posted later this month at <http://www2.cdc.gov/hrmo/vsearch.asp>.

The Branch Chief provides leadership in conducting scientific research to develop and evaluate strategies to reduce injuries and deaths caused by violence. Specifically, the Prevention Development and Evaluation Branch works to determine the most effective (including cost-effective) strategies, programs, and policies to prevent violence, including, but not limited to, youth violence, intimate partner violence, sexual violence, suicide, child maltreatment, and elder abuse. Current research and evaluation activities focus on identifying the most effective primary prevention strategies at different levels of social ecology (e.g., individual, relationship, community, and society).

The Branch is comprised of 18 staff positions and 8-10 research fellows/contract staff. Branch members fulfill science and program functions and represent multiple disciplines including public health, the behavioral sciences, medicine, and health economics.

**Desired Background and Experience:**

- 1) An earned doctoral degree (e.g., PhD, DrPH, ScD, MD);
- 2) An established track record of population-based or social and behavioral-oriented research in violence prevention or a closely related area;
- 3) Experience in conducting research on the efficacy, effectiveness, and/or cost effectiveness of preventive intervention;
- 4) Demonstrated leadership in developing and administering prevention research programs;
- 5) Ability to manage a program and supervise a professional staff; and
- 6) Ability to communicate orally and in writing.

**CDC Contact:**

Interested candidates should submit a curriculum vita to:

Pamela Chin  
Deputy Director  
Division of Violence Prevention  
National Center for Injury Prevention and Control  
Centers for Disease Control and Prevention  
4770 Buford Highway, N.E., Mailstop K68  
Atlanta, GA 30341  
Voice: (770) 488-4362; Fax: (770) 488-4221  
Email: [PMC1@CDC.GOV](mailto:PMC1@CDC.GOV)  
Web: [www.cdc.gov/injury](http://www.cdc.gov/injury)

*~Sandra Bonzo*