



Injury Center Connection

Volume I • Issue I • Spring 2008

a letter from *our director*

I am excited to announce the National Center for Injury Prevention and Control's (Injury Center) new quarterly listserv update—*Injury Center Connection*.

Over the past 16 years, the Injury Center has been committed to reducing morbidity, mortality and costs associated with injuries.

In 2007, we identified three main center-wide priorities, including the prevention of child maltreatment, residential fires, and older adult falls, to provide a focal point that complements other important work occurring in the Center. In 2008, we have been working to further increase the visibility of injury and violence prevention and control and the role the Injury Center plays in the field.

We are dedicated to working with you—our partners and colleagues—to advance the field of injury and violence prevention and control. With this quarterly *Injury Center Connection*, we hope to provide you with highlights of scientific and programmatic achievements of the Injury Center, as well as that of our partners and colleagues.

We welcome your feedback regarding this listserv update. If you have comments or suggestions, please send an e-mail to Leslie Dorigo at ldorigo@cdc.gov.



ILEANA ARIAS, PhD



Living better, longer

PREVENTING FALLS & BRAIN INJURIES

A new CDC Injury Center study on older adult falls, released March 7, 2008 in CDC's Morbidity and Mortality Weekly Report (MMWR), shows about five percent of all people over age 65 had to see a health care provider or restrict their activity due to a fall during a three-month period.

As the U.S. population ages, the problem of older adult falls is expected to increase.

The Centers for Disease Control and Prevention (CDC) is committed to helping all people, and especially those at greater risk of health disparities, achieve their optimal life-span with the best possible quality of health in every stage of life. Continuing this commitment, during the annual observance of Brain Injury Awareness Month in March, the CDC Injury Center is working with various partners to help older adults live better, longer by preventing falls and their consequences, such as traumatic brain injury (TBI).

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UPCOMING *injury* EVENTS

Meetings and Conferences

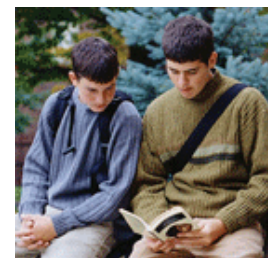
- **9th World Conference on Injury Prevention and Safety Promotion**
March 15-18 • Merida, Yucatan, Mexico
www.safety2008mx.info
- **Aging in America Conference (NCOA/ASA)**
March 26-30 • Washington, DC
www.agingconference.org
- **American Occupational Therapy Association (AOTA) Conference**
April 10-13 • Long Beach, CA
www.aota.org
- **Lifesavers Conference**
April 13-15 • Portland, OR
www.lifesaversconference.org
- **57th Annual Epidemic Intelligence Service (EIS) Conference**
April 14-18 • Atlanta, GA
www.cdc.gov/eis/conference/conference.htm

Health Observances

- **Brain Injury Awareness Month** (March)
www.cdc.gov/BrainInjuryInSeniors
- **Poison Prevention Week** (March 16-22)
www.poisonprevention.org
- **National Child Abuse Prevention Month** (April)
A resource packet is available from HHS' Administration for Children and Families.
www.childwelfare.gov/preventing/preventingmonth
- **Sexual Assault Awareness Month** (April)
The National Sexual Violence Resource Center, a NCIPC grantee, coordinates efforts. www.nsvrc.org
- **National Safe Boating Week** (May 17-23)
www.safeboatingcampaign.net
- **Click It or Ticket** (May 12 - June 1)
www.nhtsa.gov

CDC study warns of deaths due to the choking game

An article published in the February 15, 2008 Morbidity and Mortality Weekly Report (MMWR) describes an activity called “the choking game,” which has led to the death of at least 82 children and adolescents since 1995. Researchers from CDC Injury Center’s Division of Unintentional Injury Prevention analyzed media reports of deaths of children and adolescents from the choking game. Highlights from their findings address some common questions about this public health threat.



The choking game is a dangerous activity that older children and early adolescents sometimes play to get a brief high. They either choke each other or use a noose to choke themselves. After just a short time, children can pass out, which may lead to serious injury or even death from hanging or strangulation.

Boys were much more likely to die from the choking game than girls; 87% of victims were boys. Most of the children that died were 11-16 years old (89%). And nearly all of the children who died were playing the game alone when they died.

“If parents believe their child is playing the choking game, they should speak to them about the life-threatening dangers associated with the game and seek additional help if necessary,” said Robin Toblin, PhD, lead author of the study. “Risky behaviors like the choking game are public health issues that need greater recognition and ongoing commitment to prevention efforts.”

To read a research update, access the full MMWR article, and listen to a podcast about the choking game, visit www.cdc.gov/ncipc/duip/research/choking_game.htm.



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 and www.cdc.gov/injury.

grantee *Corner*

Corrine Peek-Asa, MPH, PhD, Director, Iowa Injury Prevention and Research Center (an ICRC funded by CDC Injury Center), recently published “Does Parental Physical Violence Reduce Children’s Standardized Test Score Performance?” in the *Annals of Epidemiology*.

www.annalsofepidemiology.org

Resources for caregivers, communities

from **FALLS** on page I



Falls are a threat to the health and independence of older adults. Each year, more than one-third of people 65 years and older sustain a fall. In 2005, nearly 16,000 older adults died from falls; an additional 1.8 million were treated in emergency departments for falls, of whom 433,000 were hospitalized.

Falls are also the leading cause of traumatic brain injury (TBI), and are associated with half of all fall-related deaths among older adults. TBI—which is caused by a bump or blow to the head—is a special health concern for older adults; however they are often missed or misdiagnosed among this group.

“We want to help our elders and their children or caregivers to know that there are ways to ensure older adults can live better and longer,” said Dr. Ileana Arias, director of CDC’s National Center for Injury Prevention and Control. “It’s important that people can live healthy and independent lives without fear of falling. To help, CDC has developed several new guides and resources that describe the best ways to reduce the risk of falls. We believe this will help older adults remain self-sufficient, longer.”

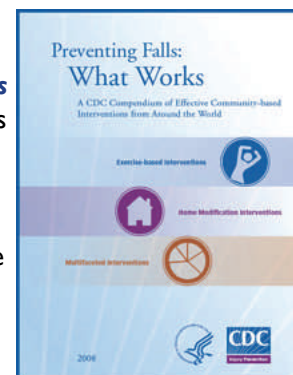
As our society ages, we must do more to address the public health problems of older adult falls and resulting TBIs. CDC’s Injury Center has created new resources for communities and caregivers. These new resources were released in early March 2008. All of the materials are available online for download or order at no cost.

We encourage you to share this information and promote it throughout your organization.

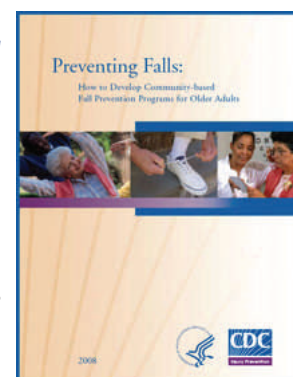
To read the new MMWR study, visit: www.cdc.gov/mmwr/preview/mmwrhtml/mm5709a1.htm.

New Fall and TBI Prevention Materials

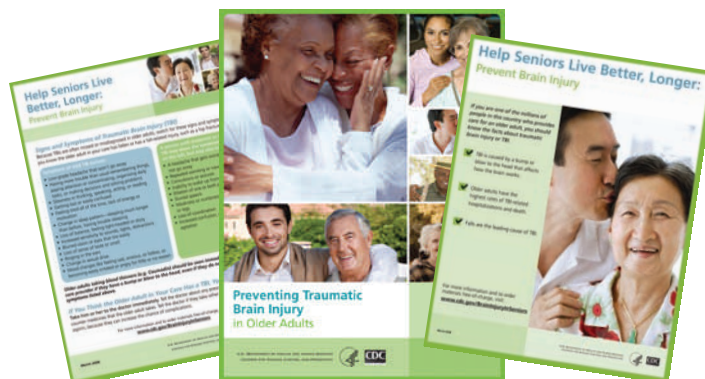
Preventing Falls: What Works. A Compendium of Effective Community-based Interventions from Around the World presents 14 randomized control intervention studies that demonstrated effectiveness in reducing falls among older adults. This resource gives public health practitioners and community-based organizations relevant operational details of these exercise-based, home modification, or multifaceted interventions. www.cdc.gov/ncipc/preventingfalls



Preventing Falls: How to Develop Community-based Fall Prevention Programs for Older Adults provides community-based organizations a guide for developing fall prevention programs. This useful ‘how-to’ describes the building blocks of effective fall prevention programs, and gives examples, resources, and tips for program creation, promotion, and evaluation. www.cdc.gov/ncipc/preventingfalls



Help Seniors Live Better, Longer: Prevent Brain Injury is an initiative to raise awareness among children of older adults and other caregivers about ways to prevent, recognize, and respond to fall-related traumatic brain injury (TBI) in older adults. This initiative features easy-to-use English and Spanish language materials and event and media guides for organizations interested in raising awareness. www.cdc.gov/BrainInjuryinSeniors



Innovative partnership to prevent residential fires

■ CDC Injury Center partners with Meals on Wheels Association of America and others to protect homebound elderly from fires.

Fires and burns are among the leading causes of unintentional injury deaths in the United States, and the majority of them occur in homes. To reduce fire-related injuries among homebound older adults, CDC partnered with [Meals On Wheels Association of America](#) (MOWAA) and the [International Association of Fire Chiefs](#) (IAFC) to develop and implement the Residential Fire Homebound Elderly Lifeline Project (Fire H.E.L.P.).

Meals On Wheels (MOW) programs have regular contact with homebound elderly clients through the home delivery of meals. [Fire H.E.L.P.](#) uses this channel to distribute smoke alarms to the older adults who need them. The project also provides senior citizens with the knowledge and skills needed to prevent a fire in the first place.

Compared to the rest of the population, older adults are at much higher risk for residential fire deaths. Other groups who are disproportionately affected include the poorest Americans and those who live in rural areas.

Fire H.E.L.P. consists of three major components: home screening for smoke alarms; education about fire risk factors and the importance of smoke alarms and escape planning; and installation and periodic testing of free smoke alarms with long-life lithium batteries.

Even though smoke alarms decrease the chance of dying in a house fire by up to 50 percent, about 25 percent of U.S. households do not have a working smoke alarm. People who are least likely to have an alarm are often those who are already at high risk of being injured in a fire.

CDC Injury Center staff assisted in the development of the Fire H.E.L.P. tool kit. The tool kit includes training curricula to teach Meals On Wheels staff and volunteers how to conduct home assessments and how to train others to do so. Educational tools and materials that instruct MOW clients in basic fire safety and prevention are also part of the tool kit. The role of IAFC was to conduct training of local fire departments that will partner with local MOW programs to install the alarms.



PHOTOS / Gail Hayes

DELIVERING FOOD & FIRE SAFETY: Freshly prepared meals ready to deliver to Meals On Wheels clients (above). San Antonio firefighter Roger Flores prepares to install a smoke alarm for a Meals On Wheels client (left).

“To me, this is as good as it gets,” says CDC Director Julie Gerberding, MD, MPH, who met with fire personnel and MOW staff during the project’s launch in San Antonio last November. “When people are cynical about government, they should check out this networked local/federal/NGO innovation. Or

they should just talk to the people who benefit, the firemen who are passionate about prevention, and the Meals On Wheels team who see their work as a conduit for accomplishing health protection for some of our most vulnerable and valu-

able citizens.” The project’s inaugural smoke alarm was installed in the home of a local MOW client in San Antonio, Texas. The alarm was the client’s first ever, and she declared herself happy to have the security.

The Fire H.E.L.P. project is being pilot-tested at MOW programs in five Texas communities. If successful, the project will likely be replicated by MOW programs in other communities throughout the country. Building on lessons learned from the Fire H.E.L.P. project, CDC is developing a version of the tool kit that can be used by other organizations and community groups to reach homebound elderly with fire safety information and smoke alarm installations.

Assistance for the Fire H.E.L.P. project was also made possible by a grant from the U.S. Department of Homeland Security.

— CDC Connects, *In a Snapshot*, 2/28/08

“To me, this is as good as it gets.”

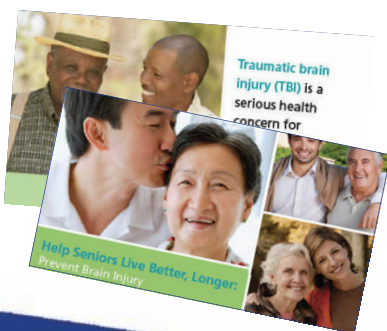
Julie Gerberding, MD, MPH

RECENT *injury* PUBLICATIONS

- Basile KC. Histories of violent victimization among women who reported coerced sex in marriages and intimate relationships: Findings from a qualitative study. *Violence Against Women*, 2008, 14(1): 29-52.
- Intimate Partner Violence and Sexual Violence Victimization Assessment Instruments for Use in Healthcare Settings: Version I. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007. www.cdc.gov/NCIPC/pub-res/images/IPVandSVscreening.pdf
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- Diekman ST, Kearney SP, O'Neil ME, Mack KA. Qualitative study of homeowner's emergency preparedness experiences, perceptions and practices. *Prehospital and Disaster Medicine*, 2007, 22(6): 494-501.
- Faul M, Wald MM, Rutland-Brown W, Sullivent E, Sattin RW. Using a cost-benefit analysis to estimate outcomes of a clinical treatment guideline: Testing the Brain Trauma Foundation Guidelines for the Treatment of Severe Traumatic Brain Injury. *Journal of Trauma – Injury Infection & Critical Care*, 2007, 63(6): 1271-1278.
- Gilchrist J, Mack K. Prevalence of pools and adequate pool fencing in the United States, 2001-2003. *International Journal of Aquatic Research and Education*, 2008, 2(1).
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- The Effects of Childhood Stress on Health Across the Lifespan. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2008. www.cdc.gov/ncipc/pub-res/pdf/Childhood_Stress.pdf
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- Stevens, JA, Mack KA, Paulozzi LJ, Ballesteros MF. Self-reported falls and fall-related injuries among persons aged ≥65 years, United States, 2006. *MMWR*, 2008, 57(09): 225-229. www.cdc.gov/mmwr/preview/mmwrhtml/mm5709a1.htm
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- Toblin R, Paulozzi LJ, Gilchrist J, Russell P. Unintentional strangulation deaths from the "choking game" among youths aged 6-19 years, United States, 1995-2007. *MMWR*, 2008, 57(06): 141-144. www.cdc.gov/mmwr/preview/mmwrhtml/mm5706a1.htm

Send an e-Card

Increase awareness of traumatic brain injury by sending an e-Card. Visit www2a.cdc.gov/ecards/



Tell us what you think...

We welcome your feedback on the new *Injury Center Connection*. Please contact Leslie Dorigo at ldorigo@cdc.gov to share your thoughts. Thank you!