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Letter from the Chair....

Eide Shomah Mobarak.

I wish you a Happy Persian New Year "Nowruz" and a Happy Spring. Despite the welcome change in season, our thoughts are undoubtedly on our friends, family, colleagues and the people of Japan who suffered from a devastating earthquake and tsunami, and who are now facing a possible nuclear disaster. This is a time when we are reminded that the work we do in injury prevention, emergency health services, disaster relief, and public health in general – whether it is in research, policy, or primary care – ultimately helps contribute to the greater good.

My letter this month to you will be primarily a reminder of the upcoming National Public Health Week - something you shouldn't miss! I hope you will take the time to participate in at least one or two of the planned events, perhaps integrating an activity into your regular work or volunteer activities.

What? National Public Health Week – theme: "Safety is No Accident"!

When? April 4-10, 2011

Where? Everywhere! Find out what your local affiliate is planning for the week and take part.

How? Go to www.nphw.org today and download a tool-kit. If you would like to be a Guest Blogger for APHA during NPHW on an injury topic, please contact me.

It is not too late to register to attend the Safe States/SAVIR/CDC injury meeting in Iowa on April 6-8, 2011! Go to: <https://m360.safestates.org/event.aspx?eventID=20417>

Also, in this issue, take note of the letter from Renee Mika, Chair of the Vision Care Section (VCS) of APHA. VCS is interested in collaborating with ICEHS, and they will begin a yearlong eye and vision health advocacy campaign next month.

And don't miss the CDC Funding Announcement in this issue – the deadline for white papers is April 6.

If you are interested in motor vehicle injury prevention,

get ready for May. May is National Youth Traffic Safety Month (www.noys.org), National Bike Month (www.bikeleague.org) and the United Nations Decade of Action for Road Safety which begins on May 11, 2011—also see: www.decadeofaction.org.

Finally, special thanks to Scientific Program Chair Fred von Recklinghausen and everyone who reviewed abstracts this past month. We couldn't have an APHA Annual Meeting without you.

Fred is just one of the many ICEHS Committee Chairs who are working quietly behind the scenes (along with excellent committee members) for the benefit of us all. To see all of these unsung heroes, go to www.icehs.org for the full listing of Committee Chairs and Officers.

Thank you, as always, for your many contributions to the field and happy reading.

- Bella Dinh-Zarr, PhD, MPH
Washington, DC



What are ICEHS Members Planning for National Public Health Week?

With National Public Health Week (NPHW) close at hand, check out planned events ICEHS members are involved with throughout the country. Students and new professionals can submit their NPHW events for a chance to win a pizza party - see the flyer in this issue of ICEHS eNews! To find local events, or to register your event with NPHW.org, visit <http://www.nphw.org/nphw11/calendar.cfm?fuseaction=submit>.

Colorado School of Public Health: 28th Annual Epidemiologic Research Exchange, University of Colorado Denver

This annual event will be focused on the NPHW's theme this year: Safety is no accident, live injury-free. On April 8, The Colorado School of Public Health will feature a day of posters and short oral presentations. The author of "In Case of Fire," Spencer Beach, will be the Plenary Speakers.

To register, check out: <http://ucdenver.edu/academics/colleges/PublicHealth/About/Events/Documents/2011%20Registration-call%20for%20abstracts.pdf>



The Metro Washington Public Health Association Annual Meeting

The 2011 Annual meeting will be a joint meeting between MWPHA (Metro Washington Public Health Association) and the George Washington University Black Public Health Student Network. The theme for the meeting is "Working towards a Healthier Generation: The Implementation of Health Reform." This theme was chosen because of the realization that the public health community is unsure of the im-

pact health reform will have on the people we serve as well as the organizations we work for. We felt it prudent to address this topic and hear from national and local state representatives.

The keynote speaker is Mayra Alvarez, MHA, the Director of Public Health Policy in the Department of Health and Human Services Office of Health Reform. The closing speaker is Dr. Robert

Zarr, President, American Academy of Pediatrics D.C. Chapter.

The MWPHA recognizes that health care reform is more than the Affordable Care Act and are looking towards a future in which healthcare will be adequate and universal.

For more information, visit: <http://mwpha.wordpress.com>.

"Health care reform is more than the Affordable Care Act."



The Oregon Health Authority, Public Health Division is hosting a week's worth of public health outreach activities, including a Safe Kids fundraiser, youth photo contests, earthquake preparedness poster contest, occupa-

tional safety sessions, community violence prevention panels, and suicide prevention trainings. Additionally, a panel discussion on prevention of domestic violence will be moderated by Oregon Health Authority Director (and ICEHS member) Dr. Mel Kohn and additional injury prevention and control talks will be presented by National and International experts:

Oregon Health Authority

- **Bike and Pedestrian Safety: Is Portland as Safe as we Think?**, Dr. William Lambert of Oregon Health Sciences University
- **Making the Connection: Intimate Partner Violence and Public Health**, Dr. Elizabeth Miller of UC Davis Children's Hospital
- **Preventing Falls: Who's Role is it?**, Lynn Beattie of the National Council on Aging

For more information visit their website: <http://public.health.oregon.gov/spotlight/phweek/Pages/ContestEvents.aspx>.



Safety is *NO* Accident: *Live Injury-Free*

National Public Health Week
April 4-10, 2011 • www.nphw.org



Win a pizza party!

To win a pizza party for you and your colleagues costing up to \$100, submit a one-page write-up describing a student/new professional-driven National Public Health Week Event. Describe event, who was involved, and the reach/impact.

Submit your write-up and photos within 10 days of your event to lenora.olson@hsc.utah.edu! Events related to the theme of NPHW are preferred-- Safety is no accident: live injury free!



Sponsored by APHA's Injury Control and Emergency Health Services Section

Safe States Alliance, The Society for Advancement of Violence and Injury Research (SAVIR), and the Centers for Disease Control and Prevention (CDC)'s Progress through Partnerships Conference, Iowa City

Over 300 injury and violence prevention researchers and practitioners from around the globe will attend the "Progress through Partnerships" conference being hosted by the University of Iowa during NPHW. APHA Executive Director Dr. Georges Benjamin will facilitate a conversation

among leaders of federal agencies to discuss successful inter-agency partnerships, raising the visibility of injury and violence prevention among policymakers and the general public and emerging opportunities for the field. Also speaking are Dr. Jeff Levi, Executive Director of the Trust for Amer-

ica's Health and Matt Richtel, a New York Times columnist who recently won a Pulitzer Prize for a series on distracted driving.

For more information visit the conference website: <http://www.safestates.org>

University of Michigan: The Play Smart Symposium - TBI Among Athletes



The University of Michigan School of Public Health & the UM Injury Center will be co-sponsoring a symposium focused on injury prevention on and off the sports field. The speakers include Dr. David Sleep from the Centers for Disease Control and Prevention, Dr. Jeffrey Kutcher, from the Michigan NeuroSport Program, and Coach

Lloyd Carr, UM head football coach from 1995-2007. This event will occur on Tuesday, April 5. (See flyer on the following page.)

Registration is requested at http://www.sph.umich.edu/iscr/news_events/event.cfm?ID=2190.

North Carolina Medical Journal Devotes Issue to Injury and Violence Prevention



The current issue of the [North Carolina Medical Journal](#) (NCMJ) is devoted to the Prevention and Control of Injury and Violence.

It is a great achievement for injury and violence prevention in North Carolina to be the focus of an issue of the NCMJ, as well as an exciting opportunity to take the information contained in the articles and share it with partners to continue to make the case of the vital importance of addressing injury and violence.

The issue contains a collection of articles written by organizations and individuals from the North Carolina injury and violence community. Authors include Dr. Carol Runyan, Dr. Tamera Coyne-Beasley, Dr. Rebecca Macy, and several others.

The articles focus on a variety of injury and violence prevention topics, as well as broader discussions of the progress, challenges, and road ahead for injury and violence prevention in North Carolina. Along with insights into the issues, the articles reflect the energy, dedication, and commitment of the North Carolina injury and violence prevention community.



PLAY SMART

INJURY PREVENTION

ON AND OFF THE FIELD

FRANK TALK ABOUT SAFE PRACTICES AND PROPER EQUIPMENT

Tuesday, April 5, 2011

3:30 p.m.

School of Public Health, Auditorium II, 1420 Washington Heights

Free and open to the public

Registration requested: www.sph.umich.edu/scr/playsmart



Speakers

Lloyd Carr

UM Football Coach 1995 - 2007

Jeffrey Kutcher

MD, Director, Michigan NeuroSport Program

David Sleet

PhD, Associate Director for Science,
CDC National Injury Prevention and Control



Centers for Disease
Control and Prevention
National Center for Injury
Prevention and Control

Measuring Bullying Experiences

Measuring Bullying Victimization, Perpetration, and Bystander Experiences: A Compendium of Assessment Tools

Bullying, particularly among school-age children, is a public health problem both domestically and internationally. In a 2009 nationally representative sample of youth in grades 9–12, 20% reported being bullied at school in the previous year. Five percent of students did not go to school because they felt they would be unsafe at school or on their way to or from school at least once in the previous 30 days.

Given that numerous measures of bullying experiences exist, researchers and practitioners may find it challenging to identify which of the available measures is appropriate for assessing a particular bullying experience. Some researchers continue to examine the risk and protective factors associated with bullying experiences. Others are working to design, implement, and evaluate bully prevention interventions aimed at reducing bully victimization and perpetration, as well as increasing prosocial bystander involvement in bullying situations.

CDC's Injury Center is pleased to announce the release of [Measuring Bullying Victimization, Perpetration, and Bystander Experiences: A Compendium of Assessment Tools](#).

This compendium provides researchers, prevention specialists, and health educators with tools to measure a range of bullying experiences: bully perpetration, bully victimization, bully-victim experiences, and bystander experiences. This compendium represents a starting point from which researchers can consider a set of psychometrically sound measures for assessing self-reported prevalence and incidence of a variety of bullying experiences.

To order copies of the compendium, please complete an [Order Form](#).

To learn more about youth violence and how you can prevent it in your community, visit the [CDC Violence Prevention website](#).

POST-DOCTORAL FELLOWSHIP IN GLOBAL ROAD SAFETY



The Johns Hopkins International Injury Research Unit (JH-IIRU) is pleased to announce a funded Post-Doctoral Fellowship in Global Road Safety for immediate availability (www.jhsph.edu/IIRU).

The fellow will be affiliated with the Department of International Health (Health Systems Program), Johns Hopkins Bloomberg School of Public Health.

Fellowship is open only to applicants interested in injury prevention and control focused on road traffic injuries, in

Russia and Central Asia. The fellow will be a member of a multi-country project and report to the director of JH-IIRU.

Setting up studies, data collection and analysis, report and paper writing are expected. The fellowship is for 1-2 years (contingent on performance and interest) and will support a stipend (commensurate with experience), tuition support, and individual health insurance coverage. Requirements include: (1) Doctorate (PhD, DrPH, ScD) in public

health or social sciences, or MD plus masters in public health degree; (2) Minimum 1 year work experience in injury prevention, public health, transport or related fields; (3) high fluency in spoken and written Russian is required.

To apply (or for more information), please send your CV, letter describing your eligibility, and names of two references to: Kathryn Falcone, kfalcone@jhsph.edu

Nominees to ICEHS Leadership Positions

Our section has vacancies for five leadership positions (Chair-Elect, Secretary-Elect, 2 Section Councilors, and Governing Councilor).

ICEHS members have been nominated to these positions, and the voting process will take place via e-mail. *And the nominees are...*

Chair-Elect

- Sara Newman; DRPH, MSPH

Secretary-Elect

- Cara Breedon; MLS
- Doug Roehler; MPH

Section Councilors (Vote for 2)

- Emmy Betz; MD, MPH
- Nancy Bill; MPH, CHES
- Kevin Borrup; JD, MPA

Governing Councilor

- Karin Mack; PhD
- Joyce Pressley; PhD, MPH

Elected candidates will assume office after the close of the 139th APHA Annual Meeting, to be held in Washington, DC October 29 - November 2, 2011.

For more information, contact Holly Shipp Salazar by e-mail at: hsalazar@sdchip.org.

Letter from the APHA Vision Care Section Chair

Dear ICEHS Members,

Thanks for your interest in the VCS's activities and for allowing us a forum to share ideas. In addition, we'd like to take this opportunity to thank you for your support of Dr. Mel Shipp's

candidacy for APHA's President-Elect this past year! The VCS is very excited about the future of APHA and we look forward to collaborating with ICEHS to achieve our mutual goals.

As you are aware, APHA's overarching goal is to be the 'go to' organization for public health. At the close of our annual meeting in November, I challenged our Vision Care Section (VCS) to ask ourselves why we should be the



(Continued on the next page)

Letter from the APHA Vision Care Section Chair

'go to' organization for eye and vision health. After all, there are any number of (much larger) organizations that focus on eyes and vision --what makes us so special? Our mission statement seemed to be a good place to start... *"to promote health and well-being with emphasis on vision and eye health through interdisciplinary partnerships. The VCS serves as an advocate to ensure equality in, and access to, vision and eye health care, and to ensure inclusion of vision in public health policy."* Our mission emphasizes **interdisciplinary partnerships, advocacy, and policy.**

Our discussion quickly turned to the roughly 30 policies that we have written or co-sponsored over the past 30+ years... and the need to do a better job translating those policies into practice. Our Advocacy Committee responded by developing a year-long Annual Advocacy Campaign, to begin during National Public Health Week. On a quarterly basis, we will distribute a template press release to various entities on a variety of issues --this year, it relates to eye safety to tie into NPHW's theme. Our first press release focuses on Sports Eye Protection, as we have an official APHA policy statement to support this effort. We'll continue to develop this campaign throughout the year and intend to meet with leadership on Capitol Hill during the annual meeting in D.C. to advocate for both general public health issues, as well as those important to our section --this year we will emphasize safety and injury prevention.

We are also eager to expand our efforts

by way of interprofessional collaboration. I hope ICEHS might be interested in collaborating at some level with our new advocacy campaign --perhaps Bella will join one of our leadership meetings to discuss the possibilities. We can learn a lot from ICEHS and certainly appreciated your thoughtful comments (all of which were approved) on the updated draft of the fireworks resolution. Consider our mutual interests in emergency preparedness, fall prevention among older adults, sports injury, and hazard control (including physical, thermal, chemical, biological, and ergonomic harm), our Sections have plenty in common!

I look forward to working with you as we all strive to make APHA the 'go to' organization for the nation's public health. Thanks again for your interest and feel free to contact me with your ideas for future collaboration.

Warm Regards,

Renée Mika, OD, FAAO

APHA-VCS Chair

mikar@ferris.edu

231.591.2182

Immediate Call for White Papers - CDC Research Funding Opportunity: Prevention of Motor Vehicle Injuries and Prescription Drug Overdoses

The Centers for Disease Control and Prevention (CDC), National Center for Injury Prevention and Control (NCIPC) is pleased to announce the availability of funding for public health research contracts by means of a Broad Agency Announcement (BAA), number **2011-N-13277**. The announcement can be accessed at: FedBizOpps.gov. Refer to link at the end of the announcement.

This BAA is open and in effect for 21 days from the date of release (March 16, 2011) and will close on April 6, 2011. **THIS IS AN IMMEDIATE CALL FOR WHITE PAPERS.** Prior to submission of a white paper offerors are strongly encouraged to contact the **CDC BAA Technical Coordinator, Mrs. Angela Salazar**, at (770) 488-3949 or asalazar@cdc.gov. White papers must be received no later than **April 6, 2011**. Offerors of competitive white papers will be requested to submit full proposals, which will undergo scientific review.

Background and Purpose

Through the FY 2011 Prevention and Public Health Fund, CDC plans to fund research in the area of public health services and systems. Per the legislation, specific requirements for research to be supported within this initiative are to:

- Examine evidence-based practices related to prevention, with a particular focus on high priority areas consistent with the National Prevention Strategy and Healthy People 2020, including comparisons of community-based public health interventions in terms of effectiveness and cost;
- Analyze the effective translation of interventions from academic settings to real world settings;
- Encourage investigators to propose research that involves intervention development, translation, and policy analysis, as well as research on methods that encourages individuals, organizations, or communities to adopt and maintain effective injury prevention strategies; and,
- Identify effective strategies to organize, finance or deliver public health services in real world community settings, including comparisons of State and local health department structures and systems in terms of effectiveness and cost.

To fulfill the intent of the legislation, CDC invites the submission of proposed public health research projects that align with the requirements stated above and that address one or more of the following CDC and National priorities outlined in the National Prevention Strategy: <http://www.hhs.gov/news/reports/nphps.html>, and Healthy People 2020: <http://www.healthypeople.gov/2020/default.aspx>:

- Motor vehicle injury prevention
- Prescription drug overdose prevention

The purpose of BAA number 2011-N-13277 is to solicit research activities that will expand and advance the methods, tools, and science needed to reduce the number of motor vehicle injuries and fatalities, and prescription drug overdoses.

For this announcement, CDC is requesting **White Papers** for 3 areas: 1) Costs and Cost Savings of Motor Vehicle Injury Prevention Evidence-Based Policy and Behavioral Interventions; 2) RCT

of Proactive Reporting by Prescription Drug Monitoring Programs (PDMP); and 3) The Effectiveness of Extending a Citywide Emergency Department Care Coordination Program to Prevent Prescription Drug Overdoses. Below is a brief description of each topic and key research questions.

Topic 1: Costs and Cost Savings of Motor Vehicle Injury Prevention Evidence-Based Policy and Behavioral Interventions. Motor vehicle-related injuries are the leading cause of death for children, adolescents, and young adults, and a major cause of death for all other ages. In 2009, 33,808 people were killed in crashes in the United States and more than 2.2 million people were injured. Medical costs and productivity losses associated with traffic injuries amounted to more than \$99 billion in 2005, equivalent to about \$500 for each U.S. licensed driver. Due to the magnitude of this injury problem and the availability of evidence-based policies and interventions to prevent it, motor vehicle injury prevention has been designated as one of the CDC's Winnable Battles.

While considerable evaluation work, led by the Task Force on Community Preventive Services and others, has identified evidence-based motor vehicle injury prevention interventions, little has been done to identify the levels of economic resources needed to implement these interventions and the potential cost savings that will result from them. Such information can help communities understand the economic benefits of specific interventions and prioritize implementation of such interventions.

This research aims to answer the following 3 research questions:

1. How much does it cost society and the government, respectively, to implement specific motor vehicle-related policies and programs at the state and/or community level?
2. How much is the economic burden of motor vehicle-related deaths and injuries at the state/and or community level?
3. How much are the potential cost savings associated with implementing specific motor vehicle-related policies and programs at the state/and or community level?

Topic 2: A Randomized Controlled Trial of Proactive Reporting by Prescription Drug Monitoring Programs (PDMP). Prescription drug monitoring programs (PDMP) collect information on all prescribed, controlled drugs dispensed in a state. Thirty-five states now have an operating PDMP. PDMPs use the prescription data to prevent diversion of drugs to non-medical use. One way of preventing such diversion is identifying persons who see multiple providers in short periods of times, obtaining large amounts of drugs that they sell in their communities. Some PDMPs wait to be asked about such patients by doctors or law enforcement staff investigating them, an approach known as "solicited reporting." About half of the PDMPs also employ "proactive" (or "unsolicited") reporting to physicians and/or law enforcement. Proactive reporting has been associated with lower state substance abuse treatment rates in one study (Simeone 2006) and no difference in state overdose mortality rates in another study (Paulozzi 2011). Wyoming has reported reductions in patient "doctor shopping" following proactive reporting. http://www.pmpexcellence.org/sites/all/pdfs/NFF_wyoming_whole.pdf.

Immediate Call for White Papers - CDC Research Funding Opportunity: Prevention of Motor Vehicle Injuries and Prescription Drug Overdoses

The current consensus is that proactive reporting is desirable as a means for reducing unintended prescription drug overdoses. The use of proactive reporting is labeled as a component of a strong PDMP by the National Alliance for Model State Drug Laws. Proactive reporting was included as a requirement when the National All Schedules Prescription Electronic Reporting (NASPER) PDMP legislation was written. The major obstacle to doing proactive reporting for all patients with inappropriate drug use, however, is the lack of information on resulting cost savings, given that in most states the process of sending out reports is labor-intensive. Cost savings could be determined by examining changes in health care expenditures following reporting. Information on expenditures could be obtained for patients enrolled in Medicaid.

This research aims to answer the following research question: *How effective is proactive reporting through PDMPs in reducing the incidence of and therefore Medicaid costs for outcomes such as prescriptions, doctor visits, emergency department visits, and hospitalizations?*

Topic 3: The Effectiveness of Extending a Citywide Emergency Department Care Coordination Program to Prevent Prescription Drug Overdoses. Emergency departments (ED) are a major source for prescription drugs diverted to non-medical use. About 39% of opioid analgesics not prescribed by phone are prescribed in EDs. Opioid analgesics are prescribed for both acute and chronic pain. They are, however, frequently abused and increasingly involved in drug overdose deaths. ED physicians are currently required by accreditation standards to see all patients with pain complaints and to assess and manage their pain. At the same time, they frequently do not have access

to their patients' past medical records. They typically do not know whether patients have been seen recently in other hospital EDs for pain complaints. ED visits from drug-seeking patients are expensive both for hospitals and insurers.

The Spokane, Washington, Consistent Care (CC) Program (<http://www.consistentcare.com/>) is a model for ED programs that manage patients who frequently come to EDs seeking drugs. The program began in 2006 in a group of area hospitals. They identified a small fraction of patients that accounted for a much larger fraction of ED visits, with the average patient making 50 ED visits per year. In concert with primary care providers in the area, social workers, and mental health professionals, they developed individualized care plans for such patients that would be used in all participating hospitals. This program has demonstrated its effectiveness in terms of declines in numbers of prescriptions and ED visits. In the year following enrollment in CC, patients experienced a 50% reduction in the number of visits to Spokane EDs, and a 33% reduction in costs to the state Medicaid program compared with the year prior to enrollment. There is a need to better understand if this approach can be effective in other communities.

This research aims to answer the following research question: *How effective is the CC Program or a similar care coordination program in reducing ED visits, prescriptions of opioids in EDs, and ED costs when introduced in a new community?*

More Information. For more detailed information regarding this announcement including submission processes, proposal content and instructions, format requirements, evaluation criteria, funding amounts, and administrative requirements, please access FedBizOpps.gov, announcement number **2011-N-13277**.

A Murder Mystery Written by Dr. Leon Roberston

Dr. Leon Robertson has published several books and more than 150 articles related to injury prevention. He has held positions at Harvard Medical School, the Insurance Institute for Highway Safety, the University of Minnesota, and Yale University.

A former Section chair, ICEHS honored him with a Distinguished Career Award, and he was also honored by Johns Hopkins Bloomberg School of Public Health, who named a professorship in his honor.

In his retirement Dr. Robertson has written two nonfiction books and, most recently, a novel called *The HOA Murders: A Novel of Suspense* (www.lulu.com, 2011). The book has gotten great reviews and is available via Kindle – think about taking it on your next vacation!



Campus Spotlight: Dr. Debra Furr-Holden and her DIVE Studies Lab



The goal of the Drug Investigations, Violence, and Environmental Studies Laboratory (the DIVE Lab) is to produce research that is desperately needed, and that can inform sustainable efforts to improve community well-being. Dr. Debra Furr-Holden of Johns Hopkins Bloomberg School of Public Health is the Director of the DIVE Lab. She explains that she and her staff work closely with community residents and other stakeholders – including community organizations, municipal and quasi-municipal agencies, and academic researchers – by using a “meeting of the minds” approach. DIVE Lab team members invest a significant portion of their time and energy in building the critical relationships necessary to conduct community-based public health research. The DIVE Lab’s research and practice activities have been greatly impacted and guided because of these solid ties with the community. In fact, community residents often come to the DIVE Lab team with problems that need immediate action.

The DIVE Lab takes an environmental approach to prevention and is known for providing needed evidence for successful community action. As an example, the team is currently involved in the “Vacants-to-Value” initiative introduced by Baltimore’s Mayor, the Honorable Stephanie Rawlings-Blake, in November of 2010. As with other low-income, urban areas, a significant problem in Baltimore neighborhoods is the correlation between injection drug use, violence, and vacant property. Areas with more vacant properties are more likely to be plagued by violence and illicit drug use, due in part to the fact that vacant houses are ideal places for “shooting galleries” (i.e., places where people gather and use injection drugs). By partner-

ing with Baltimore Housing, the DIVE Lab will provide much needed data for understanding how the Vacants-to-Value program impacts the health and well-being of communities and their residents. DIVE Lab staff will track and monitor changes over time so that city personnel can evaluate their efforts and alter the program as needed. Dr. Furr-Holden describes this as an example of “community-based participatory research in action”. This is just one example of how – along with the support of the city and other community stakeholders – the DIVE Lab has improved health and well-being of the community.

Currently, the DIVE has four full-time staff, a post-doctoral fellow and three graduate research assistants. Students frequently use data from the DIVE Lab for masters’ theses and doctoral dissertations. Undergraduate students are also involved in lab activities. The DIVE Lab has several collaborators beyond the walls of John Hopkins. Dr. Furr-Holden serves as a mentor on two NIH career development awards (K01) and has conducted environmental assessments for different three research groups. The DIVE Studies Lab is enthusiastic about forming new partnerships and expanding the dissemination of environmental strategies for prevention.

For questions/comments, contact: dholden@jhsph.edu

For more information, visit: www.divestudies.com

Congratulations to Lorann Stallones, 2011 Professor Laureate by Colorado State University's College of Natural Sciences!

For her outstanding contributions to science in scholarship, research and outreach, Lorann Stallones has been named Professor Laureate 2011 by Colorado State University's College of Natural Sciences. Dr. Jan Nerger, Dean of the College of Natural Sciences, noted that "this is the highest academic title awarded by the college to faculty for their career accomplishments." The three-year Professor Laureate title provides recipients an honorarium and three years of resources for student projects. A reception will be held at Stallones' spring lecture on April 18, where she will be honored. Stallones will speak at 4 p.m. in the Lory Student Center.

Lorann Stallones is a professor of epidemiology in the Department of Psychology and director of the Colorado Injury Control Research Center and the Institute of Applied Prevention Research. She also is director of the CSU Graduate Degree Program in Public Health, part of the inter-institutional Colorado School of Public Health.

Since joining Colorado State in 1990, Stallones has been nationally and internationally recognized as an occupational epidemiologist and has worked extensively in agricultural safety and health. In 2005, she received a research award from the National Institute for Farm Safety for major contributions to the prevention of farm injuries for an article published in *Injury Prevention*. Stallones is currently principal investigator on an NIH/Fogarty International Center funded project to train Chinese scholars to conduct agricultural injury prevention.

Lorann, we couldn't be any prouder of you!

