

An aerial photograph of a city, likely Seattle, showing a dense urban landscape with various buildings, streets, and green spaces. A large, modern hospital building with a helipad is prominent in the lower center. The text "2021 YEAR IN REVIEW" is overlaid in large, bold, dark blue letters.

# 2021 YEAR IN REVIEW



HARBORVIEW  
INJURY PREVENTION  
& RESEARCH CENTER

UNIVERSITY *of* WASHINGTON

*Together, we have the power to prevent harm  
and suffering from injury and violence.*

# Director's Reflections



Dear Friends of HIPRC,

We hope the new year finds you well as we enter the spring and summer seasons with more daylight and warmer temperatures. The University of Washington's Harborview Injury Prevention & Research Center (HIPRC) community is grateful for your continued engagement. Your commitment to the work we do strengthens our ecosystem and makes the community we live in a much better place. I am honored to have the privilege of leading this interdisciplinary organization as it continues its excellent work. This report was produced with contributions from HIPRC faculty and staff; together, we are pleased to send you the HIPRC 2021 Year in Review.

Despite the COVID-19 pandemic and the ongoing stresses incurred, we provided our internal and external partners and communities an inclusive platform, conducted rigorous science, and fostered local and national interdisciplinary collaborations to achieve our common research, training and public health goals.

Our 2021 fiscal year brought important and measurable progress towards reducing the harm from injury and violence and in addressing injury and health equity across the lifespan. We increased our research portfolio, added exceptional faculty to our team, and trained aspiring junior faculty and fellows through our pediatric injury T-32 and other educational programs. HIPRC became a recruitment hub for many UW departments.

Highlights of this year's efforts include our successful CDC site visit in December 2021, the successful launch of a new pilot leadership development program, and our development of a Health Assessment, which elucidated the equity gaps in injury and violence data collection in Washington State. We increased our communications footprint and engaged meaningfully with our Community Advisory Board. HIPRC engagements with the Department of Health at the local and state levels began with a view for forward looking partnerships to address community needs. We also conducted important studies on reducing opioid prescription after injury and violence and in improving return to learn for students with concussion. For the second year, the Rivara endowment granted awards to UW trainees and junior faculty, and the Pinder endowment supported INSIGHT students. This report shares with you some of these and other accomplishments.

2021 tested not only our resilience and flexibility, but also our stamina in our personal and professional lives. We have entered 2022 with continued resolve to be well personally, strengthen existing academic and community partnerships and to support our ecosystem at the UW. I am thankful to UW School of Medicine and Harborview Medical Center for their continued support.

Thank you again for your trust to lead this reflective, vibrant and cutting-edge organization comprised of you all. We are excited to move our work forward with even greater impact. To make a gift to the center, please visit the [Make a Gift](#) link on our [website](#).

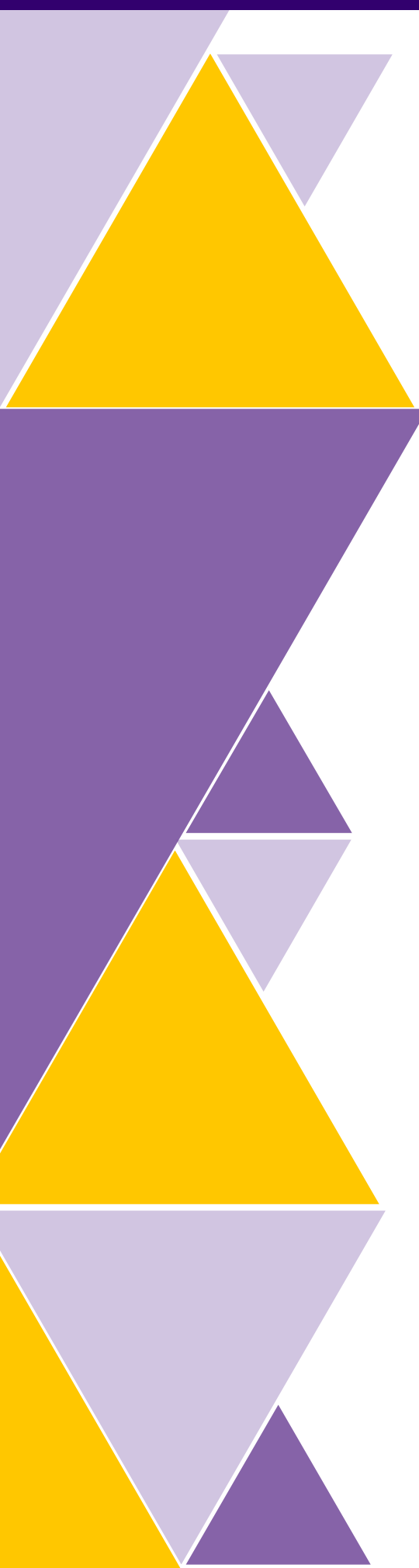
Sincerely,

A handwritten signature in black ink that reads "Monica S. Vavilala". The signature is fluid and cursive.

Monica S. Vavilala, MD

Director, Harborview Injury Prevention and Research Center  
Professor of Anesthesiology and Pediatrics, School of Medicine  
Adjunct Professor, Health Systems and Population Health, School of Public Health  
University of Washington

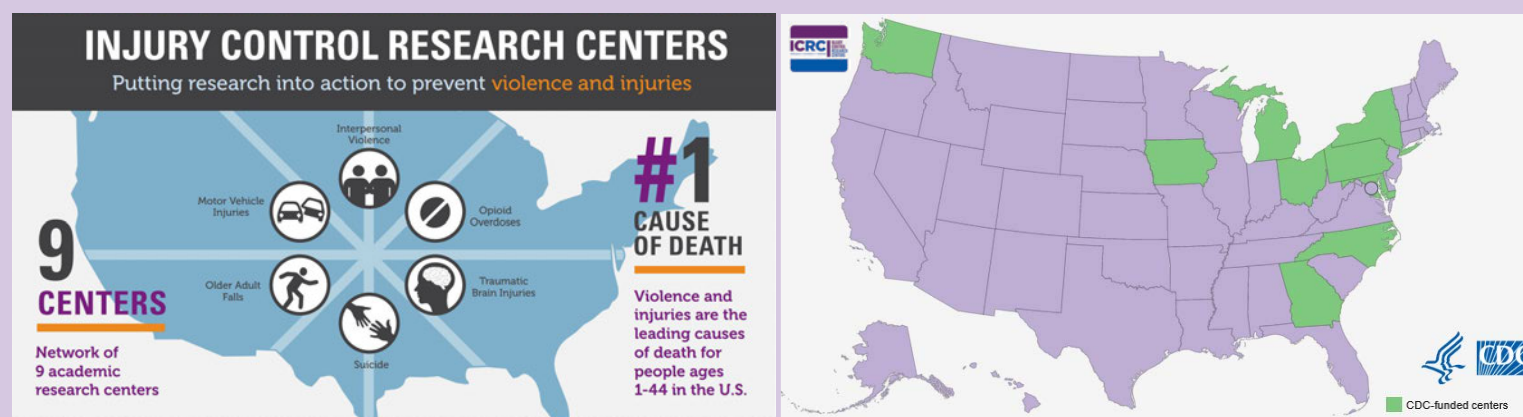
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# About HIPRC

Founded in 1987 by pediatrician Abraham Bergman, MD, and surgeons Ronald Maier, MD, and Clifford Herman, MD, HIPRC was one of the four original Centers for Disease Control and Prevention Injury Control Centers. Under the leadership of founding director and pediatrician, Professor Frederick P. Rivara, MD, MPH, HIPRC achieved international standing as a premier injury control center. For 35 years, HIPRC has conducted rigorous research in the areas of injury prevention, injury care, and public health consequences of violence. We are also a leader in interdisciplinary, socially diverse, and inclusive training of public health professionals. Our center has trained over 150 injury control researchers, most who work in academic settings. HIPRC's work results in effective policy, drives public health practice, and leads to transformational changes in the way we provide health care to injured patients. We collaborate locally, regionally, nationally, and internationally with other leading institutions and organizations dedicated to the same goals.



Graphic(s) Courtesy: Centers for Disease Control & Prevention (CDC)

## Mission and Vision

HIPRC's mission is to reduce the impact of injury and violence on all people's lives. Our vision is to achieve health equity across all ages and groups through interdisciplinary research, education, training and public awareness. To that end, we embed health equity considerations into all our efforts: all people belong in the circle of human concern.

## The Why

Together, we have the power to prevent harm and suffering from injury and violence.

## The How

We are committed to creating a respectful workspace together as we seek to identify and correct structural biases that perpetuate inequities in health and well-being. We aim to dismantle biases based on age, disability, religion, ethnicity and race, social class, sexual orientation, indigenous group membership, national origin, gender identity, and linguistic differences. We are committed to creating a respectful workspace together as we seek to identify and correct structural biases that perpetuate inequities in health and well-being. We aim to dismantle biases based on age, disability, religion, ethnicity and race, social class, sexual orientation, indigenous group membership, national origin, gender identity, and linguistic differences.

# Injury-Related Health Equity Initiatives

iHeal is the first initiative of its kind to leverage existing partnerships and build new coalitions to collaborate on the national agenda for health equity and expand our work toward measurable, large-scale, and sustained impact in reducing injury and violence. iHeal efforts are integral to shaping HIPRC's center-wide activities addressing health equity across the lifespan. As an example, in 2021, over 1/3 of our works-in-progress sessions addressed health equity.

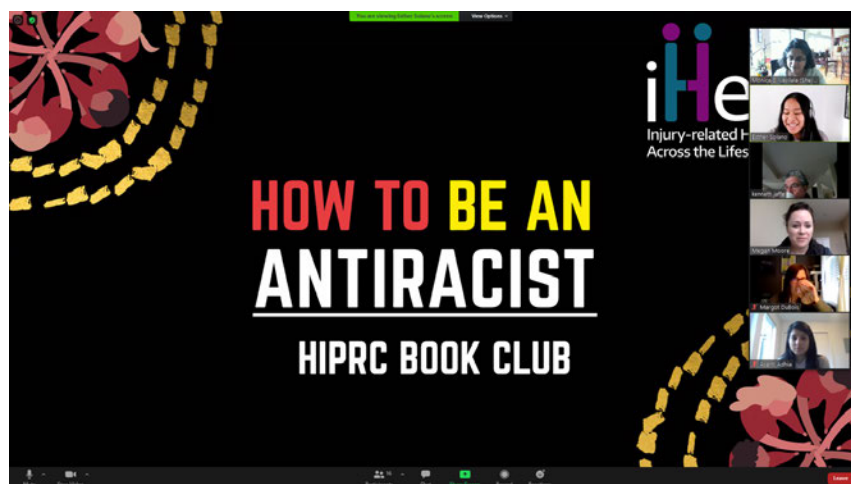
In collaboration with the Research Core this past year, iHeal launched a lecture series on equitable methods for injury research. In addition, iHeal hosted "Coffee and Chat" sessions with HIPRC students, staff, and faculty to listen to ideas for iHeal direction and engagement. We hosted a racial equity book club which was well attended where we read and discussed the Health Sciences Common Book "How to be an Antiracist" by Ibram X. Kendi. We formed a workgroup to develop equitable group norms and values for our internal research presentations and meetings and developed a framework for presenters at our research presentations to use to incorporate health equity into their presentations. iHeal worked closely with the HIPRC Community Advisory Board to develop and disseminate quarterly outreach campaigns.

We pledge to continue to improve our science, teaching and outreach –all through a health equity lens in 2022.

## Making the Invisible, Visible

This year, we completed an innovative Health Assessment addressing equity gaps in publicly available injury and violence data collection in King County, Washington State and our region. We first summarized current data on suicide, falls in older adults, opiates, and non-lethal traumatic brain injury and identified hidden burdens in injury and violence prevention where data are either missing or obscure important health inequities, and outline action steps for research, training, and outreach in injury and violence prevention through a health equity lens.

We have started sharing the report broadly with our internal and external partners and there is great interest in working together to contribute to standardized and equitable data collection such as data that are patient-centered and self-report demographic data. We will be considering recommendations for structural support for equity in data collection, supporting community partnerships to inform action-oriented research and policy agenda and developing communication strategies to reach those most affected by injury and violence. Please visit our website to learn more about the [Health Assessment](#).



- iHeal Racial Equity Book Club

**iHeal**  
Injury-related Health Equity  
Across the Lifespan

# Core Achievements

## Administrative

Our HIPRC Administrative Core provides oversight and ensures equitable strategic, academic, and fiscal responsibility and accountability for all HIPRC activities. The Core creates and maintains infrastructure that supports our mission and goals and that bridges the functions and activities of all the cores. We strive to be an active and interactive nexus for the External, Internal and Community Advisory Boards supporting our work. The Administrative Core, led by Dr. Monica Vavilala, MD and HIPRC manager, Ms. Christine Shinakov, MS, works to ensure sustainability, growth, flexibility, and impact by expanding, strengthening, and diversifying partnerships.

## Highlights

### Pilot Research Leadership Development Program

This year, we piloted a new Research Leadership Development Program at HIPRC which provided a platform for our trainees and junior faculty to learn about how an interdisciplinary injury center functions and achieves its missions. Modeled after clinical rotations, trainees rotated through the four cores of HIPRC to gain direct experience in the unique and bridging functions of the various core activities over a 6-week period. This program provided training and experience for early career scientists to develop skills and to transition to faculty positions, as well as supporting long-term goals of leadership succession that would not have been received elsewhere.

Participation in the program helped HIPRC grow our Education & Training Core by developing a best practice for Individual Development Plan (IDP) and training evaluation and helped our Administrative Core by developing a tool for us to use to ensure equitable workforce hires.

#### 2021 Pilot Research Leadership Development Program Participants:



Mark Sodders, DaOM



Laura Prater, PhD, MHA

### Resource for Region

Located in Seattle, Washington, the most populous city and county in the state, Harborview Medical Center is the only Level 1 adult and pediatric trauma center in the WWAMI region (Washington, Wyoming, Alaska, Montana, Idaho). The HIPRC co-location on the Harborview Medical Center campus offers a truly unique opportunity for the HIPRC to make clinical care contributions locally to the care of our injured patients. In 2021, we served as a resource for the King County Board of Health by engaging in a complex safety-equity discourse; we addressed the safety benefits of bicycle helmets, the important of equitable policing, and imparted the imperative to examine pro-equity approaches to prevention of traumatic brain injury. We worked closely with the Somali Health Board to understand their injury and violence prevention priorities and shared resources for falls and suicide prevention. We continued to support our communities with messaging on injury and violence prevention. Overall, we experienced increased connections with King County and Washington state by serving as scientific and content experts on many injury and violence prevention topics of high priority to our region.

# Core Achievements

## Research

HIPRC's [Research Core](#) is dedicated to leading and supporting the best in injury and violence prevention research and to embracing the notion that research and its contributions needs to be equitable. We join our communities in this endeavor, including the University of Washington, local and regional partners, and colleagues across the country and around the world. Research spans the continuum of injury prevention and response. Our work includes epidemiological research to determine injury causes and risk factors. When injury does occur, we study the spectrum of acute, rehabilitation, and long-term recovery care in the hospital, home, and community. The HIPRC Research core, led by Drs. Kushang Patel and Brianna Mills is truly state of the art.

This year, we were awarded more than 45 grants and published approximately 330 peer-reviewed publications. We developed policies and procedures and infrastructure to support our research and impactful dissemination of knowledge. In addition, we made key hires to expand our capacity in clinical informatics, spatial analysis, and research translation. Our 9-member team has significant methodological expertise in both observational and experimental research with diverse experience in the application of multiple datasets and collection systems (electronic health records, surveys, administrative data, focus groups, etc.) to complex analytic questions in the fields of burns, surgery, TBI, firearms injury prevention, active transportation, geriatric injury, and other areas. We are actively engaged in expanding our capacity in both complex quantitative approaches as well as community-engaged and equity-informed research lenses.

### Signature CDC Projects

FY2021 CDC ICRC Projects

#### ***Return to Learn after Traumatic Brain Injury***

M.S. Vavilala, MD (PI), M. Moore, PhD,  
E. Kroshus, ScD, MPH, B. Weiner, PhD,  
A. Glang, PhD

#### ***Collaborative Opioid Taper after Trauma***

M. Sullivan, MD (PI), L.M. Baldwin, MD, MPH,  
D. J. Tauben, MD, D. Gordon, DNP,  
S. Arbabi, MD, FACS

### Signature CDC Projects

FY2022 CDC ICRC Projects

#### ***Evaluation of a Healthcare Provider Suicide Prevention Training Program in Washington***

A. Rowhani-Rahbar, MD, PhD, MPH (PI),  
P. Borghesani, MD, PhD, J. Stuber, PhD,  
A. Ratzliff, MD, F. Rivara, MD, MPH\*

#### ***Development and Testing of a Toolkit to Prevent Falls in Long Term Care Facilities***

H. Thompson, PhD, RN, ARNP, CNRN,  
AGACNP-BC, FAAN (PI),  
E. Phelan, MD, MS,  
E. McGough, PT, PhD

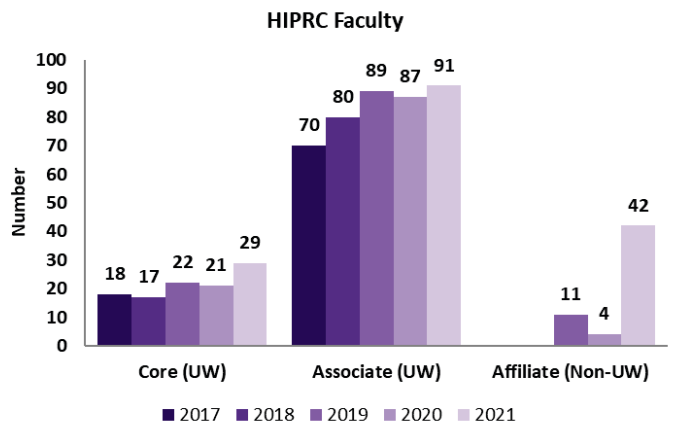
### CDC Exploratory Research Projects

#### ***Sexual Violence Reporting Among College Athletes***

A. Ellyson, PhD (Co-PI),  
A. Adhia, ScD, (Co-PI)

#### ***Adapting an Evidence-Based Exercise Program for Remote Delivery to Rural Older Adults***

K. Patel, MPH, PhD, (PI)



HIPRC Faculty growth from 2017 - 2021

# Core Achievements

## Highlights

### Cohort Development Tool: Leaf

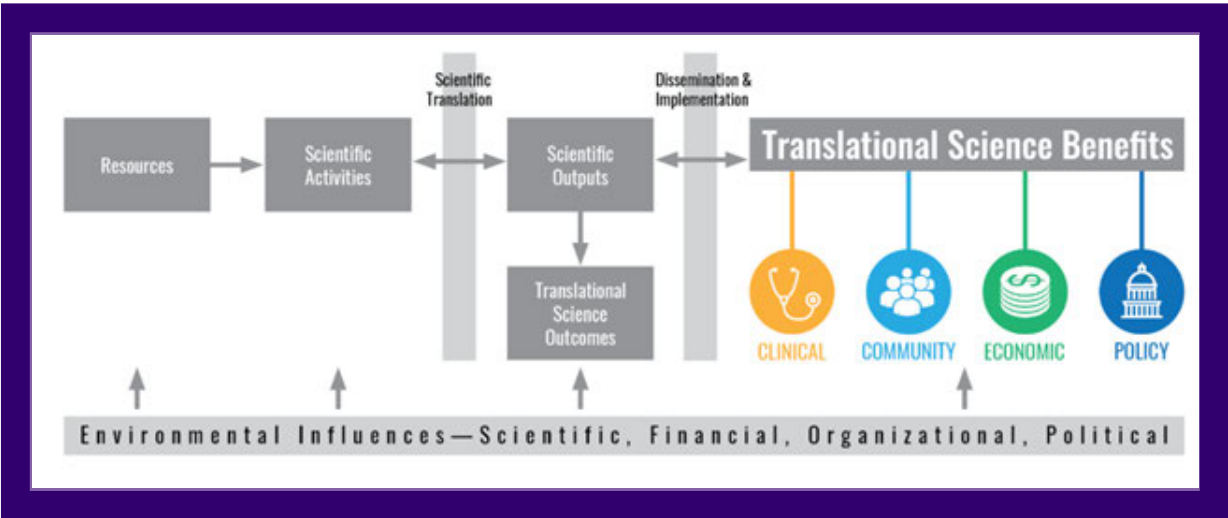
The Research Core spearheaded the addition of a race/ethnicity assessment to the Institute of Translational Health Sciences' (ITHS) cohort development tool. The cohort development tool, known as Leaf, allows for direct, real-time querying of electronic health records to facilitate cohort discovery, quality improvement assessments, recruitment, and chart abstraction. Supported by the National Center for Data to Health, the source code is available in the public domain, and UW is assisting other Clinical and Translational Science Award (CTSA) sites in piloting Leaf at other institutions.

The addition of the race/ethnicity assessment, modeled on the NIH inclusion enrollment form, allows researchers to assess the diversity of their potential study populations while they are exploring their potential inclusion and exclusion criteria, with the aim of reducing barriers to accurate assessment of participant diversity. This also saves each researcher at least 2 hours per grant submission phase since this format is required for all NIH-funded grant applications.

### Introducing a Knowledge Translation Framework

Research translation is the application of scientific output to promote discovery, progress, and societal benefit and is central to our mission at HIPRC. We are committed to making this process bidirectional, by integrating stakeholders and community members in identifying and prioritizing research benefits.

We examined and compared different models of translation, including the Translational Science Benefit Model (TSBM). The model is intended to demonstrate potential benefits of research projects in medical, economic, community/public health and legislative domains. We took this model a step further by integrating community members in the process and prioritizing benefits that have the potential to be realized. It is our hope that through this iterative process of piloting and adapting frameworks for research translation, we can work closely with the community we serve, and maximize the impact of our research. Because we included trainees in this process, they learned about the importance and process of assessing our research, and how to go about moving research out of the hands of researchers to consumers; for us this is the public who is most affected by the conditions we study.



# Core Achievements

## Education & Training

A core mission of HIPRC is to create an ecosystem of skilled, insightful, diverse and productive investigators who will advance the field of injury control science. In collaboration with HIPRC's Research Core and Outreach Cores, Drs. Hilaire Thompson and Charles Mock who lead the [Education & Training Core](#) oversee the development of researchers who are responsive to community needs and priorities.

This past year we provided direct one- on-one mentorship to 25 fellows and junior faculty across the UW health sciences and held training sessions for public health practitioners across the Pacific Northwest. Please see the '[Testimonial](#)' section for personal statements from some of our trainees. These numbers are in addition to the number of learners who participated in our other programs.

## Highlights

### 2021 INSIGHT Summer Programs

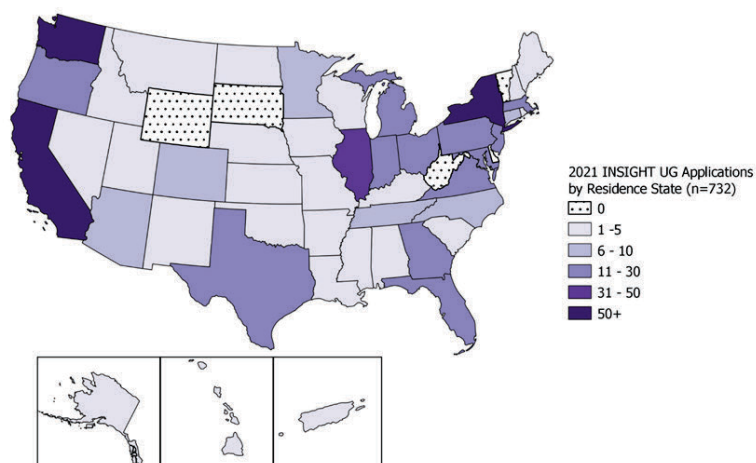
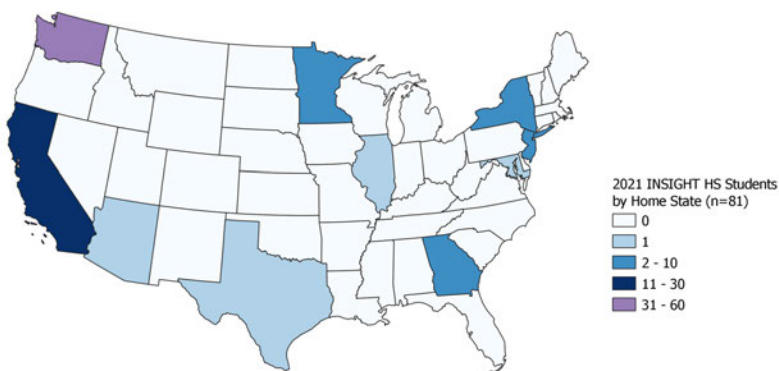
Our [undergraduate](#) and [high school](#) programs are supported by HIPRC staff, dedicated to providing state of the art education and training in injury and violence prevention.

#### INSIGHT High School

- 103 applicants from 62 high schools nationwide
- 81 participants
- 10 US states and China
- 18 scholarships
- Community partners: Zero Youth Detention, Community Passageways, Seattle Schools Foundation

#### INSIGHT Undergraduate Research Training

- 732 applicants from over 100 schools
- 22% applicants URM
- 21% applicants first generation
- Applicants from 47 US states, Puerto Rico, and Singapore, Canada, Croatia, & India
- 24 accepted trainees
- Geographic diversity 10 states/14 institutions
- Trainee diversity (60%)



# Core Achievements



INSIGHT High School (Session B Cohort)



INSIGHT Undergraduate Research Trainees

## Pediatric Injury Research T-32 Program

We are proud to have the only National Institute of Child Health and Human Development (NICHD) funded [Pediatric Injury T-32 Program](#), which provides funding to train pediatric injury and violence prevention researchers per year for the next 4 years. We connected as colleagues and supported each other in weekly works in progress sessions, journal clubs, and interdisciplinary mentorship sessions. We also trained other learners from across the University of Washington.

### 2019 – 2021 Example Trainee Awards & Focus Areas (from 11 total)

Molly Fuentes, MD: *Rehabilitation for Native Children (NIMHD K23)*

Avanti Adhia, ScD: *Intimate Partner Violence (NICHD K99/R00)*

Elizabeth Killien, MD, MPH: *Quality of Life after ICU (NICHD K23)*

Stephen Mooney, MS, PhD: *Environmental Data for Health (NLM K99/R00)*

### Current T-32 Fellows (4)

Erin Morgan, PhD: *Firearms and Drowning Prevention*

Mallory Smith, MD: *Pain and Quality of Life after Burns*

Chelsea Hicks, PhD, MPH: *Violence, Social vulnerability, and Disasters*

Keith Hullenaar, PhD: *Criminology and Health*

### Other Current Trainees at HIPRC (22)

Mark Sodders, DaOM: *Acupuncture for Trauma (KL2)*

## Collaboration with the Northwest Center for Public Health Practice

HIPRC began a partnership with the [Northwest Center for Public Health Practice](#) (NWCPHP) shortly after starting to work on the Education & Training section for the CDC grant. We consulted with HIPRC affiliate member and NWCPHP's director, Betty Bekemeier, PhD, MPH, RN, FAAN, to understand their successful structure for training public health professionals across the WWAMI region.

Following our funding as an Injury Control Research Center (ICRC), we formalized this partnership for areas where we could provide "expert resources" to address "hot topics" in public health focused on injury prevention. Guided by the NWCPHP needs assessments, we identified two priority areas, Suicide Prevention and Intimate Partner Violence. We sponsored 3 webinars in these areas: "Suicide Prevention in Rural Areas", "Prevention of Firearm Injuries in Persons with Dementia", and "Prevention of IPV in Adolescents", all featuring HIPRC experts. In addition, we provided the expertise to the NWCPHP to curate a set of best practice resources on suicide prevention that is publicly available.

# Core Achievements

## Outreach

Our HIPRC [Outreach Core](#) focuses on innovative and effective communication, equity, and impact in injury and violence prevention. In partnership with the Community Advisory Board, we respectfully engage with and are responsive to community needs. We collaborate with HIPRC investigators and the Research and Training Cores to support the translation of research to practice. Through the Outreach Core, led by Drs. Megan Moore and Beth Ebel, HIPRC researchers work with diverse communities to identify concerns and collaborate with community and policy partners to prevent injuries and violence. Using best practices from health education, behavioral science, social marketing, and communication, we support research that is responsive to community injury and violence prevention concerns. HIPRC and our partnerships work together to impact public policy and create effective programs.

## Highlights

### Developing Community Engagement

We began a partnership with public schools in King County and other King County leaders and stakeholders to address community violence prevention. Our weekly discussions have taught us a lot about the need for authentic engagements versus those that are transactional. We learned that there must be investment into communities for uplifting Black and Brown communities and we are working to better understand community needs so our outreach can be more meaningful.

### Communication Highlights

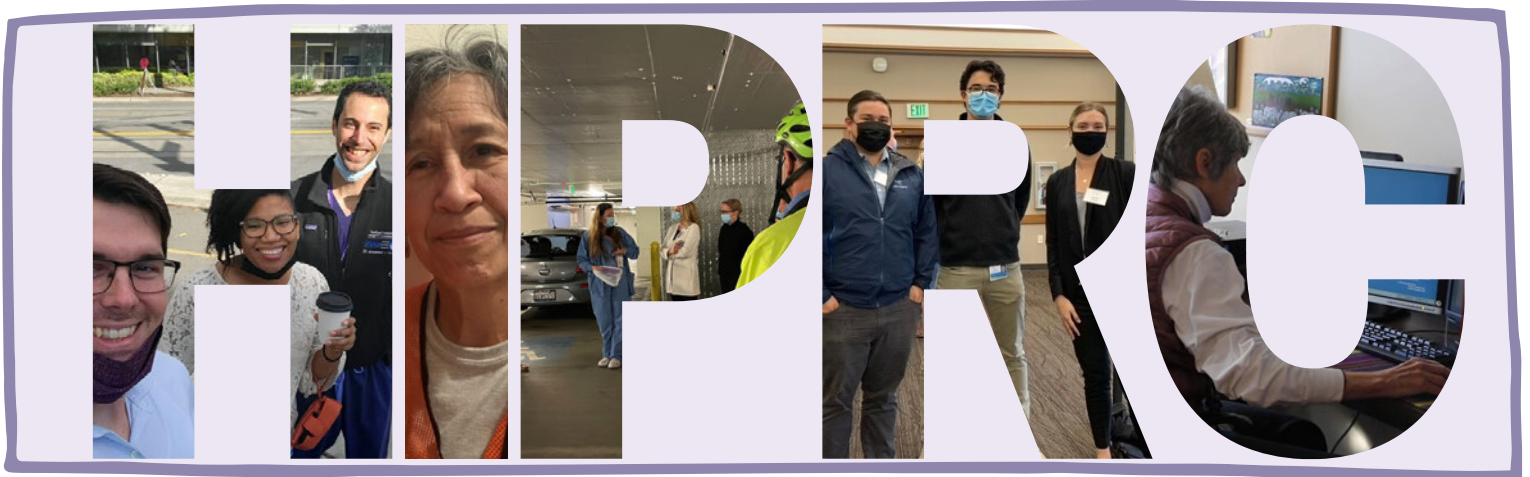
We placed significant emphasis on broadening the reach of HIPRC's communication strategies that are equitable. In 2021, over 80 successful injury prevention campaigns were launched on topics ranging the prevention of window falls, strategies for safe sledding and winter sports, suicide prevention, and an evidence-based toolkit for preventing firearm injuries. Patient voices from the trauma center were incorporated into communication strategies to add narrative, power and equitable reach. Many of these campaigns were shared with community partners, translated in various languages, and disseminated via traditional and social media channels. We worked in collaboration with other ICRC leaders from Johns Hopkins University and University of Iowa to lead an impactful presentation on equitable communication strategies and discuss opportunities for collaboration and shared learning.

We also worked with the UW School of Public Health to host an MPH Practicum Student, Nathalie Galles. Ms. Galles, who has graduated and is starting her career in public health, prepared specific seasonal injury prevention messaging and assisted in developing the "Three Firearm Interventions" toolkit, noted under the Firearm Injury & Policy Research Program below.



HIPRC Injury & Violence Prevention Campaigns

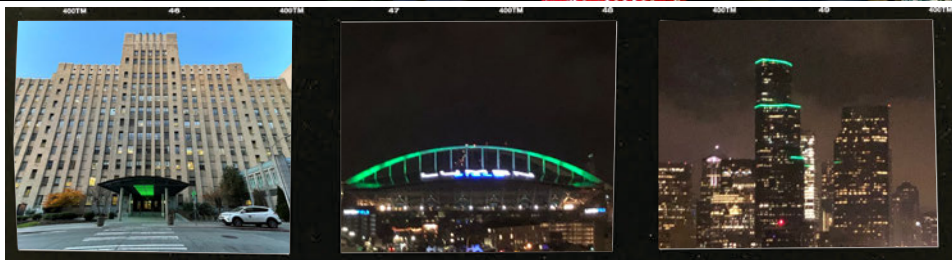
# Core Achievements



Pictured (from left to right): HIPRC Trainees Drs. Keith Hullenaar, Chelsea Hicks, Shyam Deshpande; Dr. Linda Quan wears orange for #WearOrangeDay to raise awareness about gun violence; Dr. Beth Ebel speaks about the importance of wearing a helmet to reduce TBI; HIPRC Research Assistants, Erik Philipson & Julian Takagi-Stewart and Research Coordinator, Aspen Avery, presenting at the 2021 APM Poster Session; Dr. Lynn Stansbury working on various projects.

## Release of a Teen Opioid-Use Prevention Toolkit

A notable campaign from this past year was National Injury Prevention Day. HIPRC, UW Medicine's Addictions, Drug, & Alcohol Institute, and Safe Kids Seattle South King, in partnership with the Injury Free Coalition for Kids, took part in the 2nd annual NIPD on Thursday, Nov. 18, 2021. Hospitals and trauma centers across the country were bathed in green lights to "shine a light" on opportunities to prevent serious childhood injury. This past year, HIPRC and ADAI shared a new digital toolkit on teen opioid-use prevention. The [toolkit](#), included videos and information for both teens and parents. Most importantly a unique section dedicated to how parents can initiate a conversation with their teens around opioid use. In King County, WA various buildings were illuminated in honor of NIPD including Harborview Medical Center, The Columbia Center, and Lumen Field, home of the Seattle Seahawks.



- Pictured (top): HIPRC Faculty & Staff wear green for NIPD
- Pictured (bottom): From left to right- Harborview Medical Center, Lumen Field, Columbia Center illuminated for NIPD

# Firearm Injury & Policy Research Program

The mission of the Firearm Injury and Policy Research Program (FIPRP) is to reduce the impact of firearm injury and death on people's lives through interdisciplinary research and collaboration with institutional, community, and governmental partners. FIPRP is building on a strong, successful history of investigation and collaboration in this arena. The Washington State Legislature and Governor have made Washington the third state in the country to specifically fund firearm research to "support investigations of firearm death and injury risk factors, evaluate the effectiveness of state firearm laws and policies, assess the consequences of firearm violence, and develop strategies to reduce the toll of firearm violence to citizens of the state." Established July 1, 2019 by Washington state funding with broad legislative support under the leadership of Drs. Frederick P. Rivara (Pediatrician and Director) and Ali Rowhani-Rahbar (Epidemiologist and Co-Director), the study team has increased in size and expertise, conducting a variety of projects.

## Development & Launch of a Three Interventions Toolkit

[A digital toolkit](#) featuring three interventions to address firearm injury and death: Firearm Safe Storage, Voluntary Waiver of Firearm Rights, & Extreme Risk Protection Order (ERPO).

- [Firearm Safe Storage](#) provides an effective way to keep you and your family safe. Safe storage sites provide temporary firearm storage options outside the home. HIPRC's Firearm Injury & Policy Research Program has created Washington State's first-ever "Firearm Safe Storage Map," which helps people in crisis identify local options for temporary, voluntary firearm storage.
- [Extreme Risk Protection Orders](#) (ERPOs) allow families or law enforcement to petition a judge to restrict individual possession and purchase of firearms using a civil order.
- [Voluntary Waiver of Firearm Rights](#) (Voluntary Do-Not-Sell) lets people voluntarily and confidentially restrict immediate access to firearm purchases.



Pictured (from left to right): Dr. Frederick Rivara; Kimberly Wyatt, Sr. Deputy Prosecuting Attorney, King County Prosecuting Attorney's Office; Brett Bass, Project Manager- Safer Homes, Suicide Aware, UW Forefront Suicide Prevention. Photos taken from Three Intervention Toolkit videos linked above

## Award of a New NIH R21/R33 Grant

Dr. Laura C. Prater's project titled, [\*Shared Decision-Making for Firearm Safety among Older Adults with early changes associated with Alzheimer's Disease/Alzheimer's Disease-Related Dementias \(AD/ADRD\)\*](#), received R21/R33 funding. Certain conditions, prevalent among older adults, including early cognitive changes associated with Alzheimer's Disease and Alzheimer's Disease-Related Dementias (AD/ADRD), place them at high-risk for firearm suicide. A new study at FIPRP will create a video tool which aims to help improve firearm safe storage and reduce decisional conflict among persons with early AD/ADRD and/or depression. Co-Principal Investigators Dr. Laura Prater and Dr. Elizabeth Phelan will focus on the WWAMI region targeting patients with early AD/ADRD and/or depression. The study hopes to learn more and assist AD/ADRD patients in shared decision making (in a primary care context) with their provider, to encourage safer firearm storage. This project will be funded by the National Institute of Health; National Institute on Aging. Funding total is \$1.49 million over five years.

## Addressing Rural Handgun Carrying amongst Adolescents

Dr. Ali Rowhani-Rahbar and his team of researchers will collect new data on handgun carrying by conducting focus groups among adolescents aged 14-17 currently living in rural communities in Washington State. The team will use existing data on handgun carrying among a gender-balanced and diverse panel of 4,407 youth aged 12 years in 2005 living in 24 communities that participated in a 7-state randomized community trial of the Communities That Care prevention system driven by the Social Development Model. Their study is titled, [\*Culture, Longitudinal Patterns, and Safety Promotion of Handgun Carrying Among Rural Adolescents: Implications for Injury Prevention\*](#).

## New Study focuses on Firearm Suicides among Females

This study titled, [\*Engaging Machine Learning and Data Linkage to Understand Firearm Suicide Among Females\*](#), will use the NVDRS and the Washington Violent Death Reporting System (WA-VDRS) to develop and implement a Natural Language Processing (NLP) approach to better understand and contextualize female firearm suicide. Using an NLP-enhanced WA-VDRS, linked to multiple state-level administrative datasets, Dr. Laura C. Prater and her study team will examine demographic and health care utilization patterns between cases.



The Grandmothers Against Gun Violence Foundation (GAGV) Board awards HIPRC researcher, Dr. Alice Ellyson a check for her research project

# Project Highlights by Section

## Safe & Active Transportation

The Safe and Active Transportation (SAT) section collaborates with partners to reduce traffic and transportation injury risk, encourage safe travel, and improve safety for active transportation modes (walking, biking and public transport).

### Promotion of Safe Cycling & Helmet Use

Opinion-Editorial published in [Seattle Times](#) supporting measures to encourage cycling as an active transportation strategy, promote evidence-based measures to promote helmet use, and address inequity in the historical enforcement of King County's bicycle helmet law

## Injury Care

Located in the WWAMI region's only Level 1 trauma center, HIPRC Injury Care researchers increase positive outcomes for patients. Our work has influenced trauma treatment in emergency departments across the country.

### Understanding Molecular Mechanisms which Drive Chronic Pain

Dr. Michele Curatolo and his team of researchers will use RNA sequencing on joint and nerve tissues of patients with chronic and acute neck pain, coupled with computational biology methods and careful patient phenotyping, to examine how molecules produced in the diseased tissue drive chronic pain.

## Traumatic Brain Injury

Our mission is to generate and disseminate new knowledge pertaining to Traumatic Brain Injury (TBI) prevention and treatment. We are working to study the relationship between TBI treatment guidelines & outcomes for children is transforming the way clinicians treat pediatric TBI around the globe.

### Return to Learn (RTL)

HIPRC launched a state-wide coalition to ensure that children can productively/effectively/safely "Return to Learn" after experiencing a brain injury. In our [new school-based study](#), as of the end of 2021, we have retained 14 public schools with high engagement in the study.

# Project Highlights by Section

## Violence Prevention

The Violence Prevention Section (VPS) works closely with FIPRP. Projects in VPS focus on the prevention of child maltreatment, sexual violence, youth violence, intimate partner violence, and suicide.

### Hospital Violence Intervention Program

Zero Youth Detention and Seattle/King County Public Health partnered with Harborview Medical Center, HIPRC, & several community organizations to create a [hospital violence intervention program](#) called the Regional Peacekeeper Collective.

This pilot program is for young adults, ages 16-24 years old who are seen and treated at HMC for injuries related to gun violence.

## Global Injury

HIPRC seeks to lower the burden of global injuries, including for people who live in low- and middle-income countries (LMICs). We have collaborated with partners in Ghana, India, Vietnam, multiple Latin American countries, and the World Health Organization.

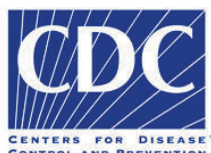
### Peter Brigham Burn Epidemiology Award

Drs. Kajal Mehta, Nikki Thrikutam and Barclay Stewart, HIPRC core member, along with partners from Ghana, Nepal, International Society for Burn Injuries and World Health Organization [were awarded the American Burn Association Peter Brigham Burn Epidemiology Award](#) for their work on cookstove-related injuries.



# Partners

We are deeply grateful [to our colleagues](#), for their partnership in supporting our primary mission to reduce the impact of injury and violence on all people's lives. Together, we address complex issues with the aim of achieving health equity across all ages and groups through interdisciplinary research, education, training and public awareness on the impact of injury and violence.



## Contact Us

## Make a Gift

We appreciate your interest in making a gift to HIPRC. Your donation supports our mission to reduce the impact of injury and violence on people's lives in the US and globally.

Donations can be made to HIPRC through the [University of Washington website](#).

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