

Forging

Paths



TO SAFETY



SAFE STATES

Annual Report 2012

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We are proud to share the 2012 Safe States Alliance Annual Report, which highlights how we served our members and the field of injury and violence prevention over the last year. Members join associations for many reasons – to network, gain access to the latest information and advances in the field, for new job opportunities, and more. What's obvious about Safe States is the commitment, passion, and energy our members have for the work we do to strengthen the practice of injury and violence prevention. Safe States and its members have made several accomplishments over the last year including:

- Increasing membership to more than 500 members, a 12% growth from 2011 and 50% growth since September 2009;
- Hosting a joint annual meeting with the CDC Injury Center, with nearly 300 attendees;
- Conducting 26 webinars reaching 1,300 IVP professionals, researchers, and students;
- Beginning a new project with the CDC and SAVIR to evaluate the Core Violence and Injury Prevention Program;
- Holding the first Leadership Development Academy with four (4) state injury and violence prevention program directors;
- Partnering with Trust for America's Health to develop and disseminate the groundbreaking report, *The Facts Hurt: A State-By-State Injury Prevention Policy Report*;
- Releasing the Injury Surveillance Workgroup report on the surveillance of poisonings, including prescription drug overdoses;
- Convening and supporting the Injury and Violence Prevention Network, a national coalition of more than 40 organizations, for networking, coordination, and collaboration on policy and advocacy efforts; and
- Strengthening our advocacy efforts through more than 40 visits by staff and members to Congressional members and White House administration officials.

These accomplishments would not have been possible without the efforts of our members. We thank our Executive Committee, members, staff, partners, and friends for all they do to advance our shared mission of a safer, healthier America.



Lori Haskett

Lori Haskett
2012 President



Amber N. Williams

Amber N.
Williams
Executive
Director

The Need for Injury & Violence Prevention Programs

In 2010 more than 173,426 people died from unintentional and violence-related injuries.*

Every minute, hospital emergency departments treat an average of 55 people for unintentional and violence-related injuries.*

However, when a public health approach is applied to the problems of injury and violence, in most cases **these events can be prevented.**

Injury and violence prevention programs have achieved impressive results with limited resources, as the public health approach allows practitioners to extend the benefits of prevention to individuals, as well as entire populations.

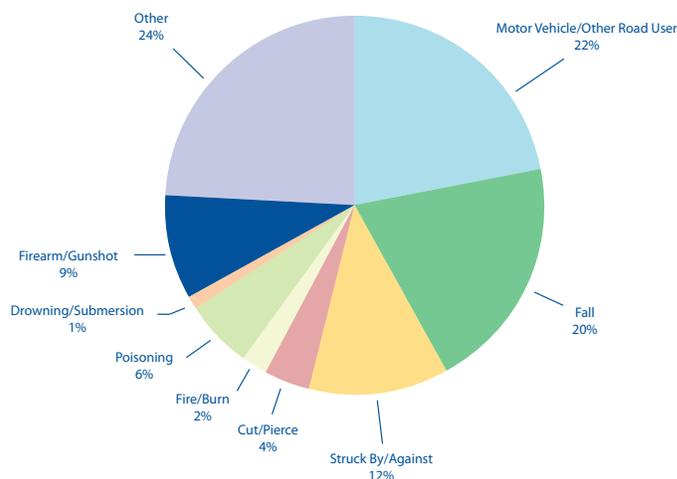
With adequate resources, injury and violence prevention programs can put proven prevention strategies into practice that can save lives and reduce the economic burden of injuries in communities, states, and throughout the nation.

Nationally, and in every state in the United States, injuries are the leading cause of death in the first 44 years of a person's life.

Injury and violence in a single year will ultimately cost the United States **\$406 billion**, including:

- \$80.2 billion in medical costs (6% of total health expenditures); and
- \$326 billion in lost productivity.

Total Cost of Injury by Mechanism (\$406 Billion)



Sources: Centers for Medicare and Medicaid (www.cms.gov) and Finkelstein, E. A., et al., *The incidence and economic burden of injuries in the United States, 2006.*

“Injury is probably the most under-recognized public health threat facing the nation today.”

The National Academy of Science

* Data sources can be found at www.cdc.gov/injury and www.safestates.org.



Programs & Services



State Technical Assessment Team (STAT)

In 2012, Vermont was the site of a State Technical Assessment Team (STAT) visit. Launched in 1999, the goal of the STAT program is to enhance the organizational capacity of state health department injury and violence prevention (IVP) programs. This is accomplished by having peers and experts conduct an on-site, point-in-time assessment, of a state IVP program and provide recommendations for improvement. The 2012 STAT team included injury and violence professionals from state and local programs, representatives from national agencies, and observers from the CDC. Including this visit with Vermont, 35 states have received a STAT visit since 1999.

The STAT assessment focuses on five (5) core components representing what is currently known and understood about creating and sustaining effective state health department injury and violence prevention programs. The core components are:

- Infrastructure
- Data: Collection, analysis and dissemination
- Interventions: Design, implementation and evaluation
- Public policy
- Technical: Assistance and training

Vermont received a report on its injury and violence prevention program that included a point-in-time assessment of each area, as well as recommendations for how to improve in each one.

Innovative Initiatives

This national award honors an innovative and creative program with the potential to substantially decrease injuries and violence throughout a state or local community.

In 2012, the Utah Violence and Injury Prevention Program won the prestigious “Innovative Initiative of the Year” Award for their efforts to better understand and prevent drug overdose deaths statewide, by incorporating new data into their Utah Violent Death Reporting System (UTVDRS). UTVDRS is a statewide system linking data from law enforcement, coroners and medical examiners, vital statistics, and crime laboratories to provide a more complete picture of the circumstances surrounding a violent death. Utah is one of 18 states contributing this information to the National Violent Death Reporting System (NVDRS), a surveillance system developed by the Centers for Disease Control and Prevention (CDC), to identify national trends in violent deaths ranging from suicides to homicides involving adults and children.

Other finalists in 2012 included:

- Colorado ProDads Project, Submitted by Colorado Children’s Trust Fund, Denver, CO
- It’s Up To Us, Submitted by EDC, Inc., Sacramento, CA
- Lethality Assessment Intervention for Intimate Partner Violence, Submitted by the Oklahoma State Department of Health, Oklahoma City, OK



Programs & Services



Core VIPP Evaluation

The Safe States Alliance, in partnership with the Society for the Advancement of Violence and Injury Research (SAVIR), has a cooperative agreement with CDC to evaluate its Core Violence and Injury Prevention Program (Core VIPP). This program funds 20 state health departments to build and maintain their capacity to disseminate, implement, and evaluate evidence-based/best practice programs and policies. This evaluation includes Core VIPP's Basic Integration Component (BIC) and three (3) of the four (4) expanded components: Regional Network Leader (RNLs), Surveillance Quality Improvement (SQI), and Motor Vehicle Child Injury Prevention Policy (MVP).

The primary purpose of the evaluation is to assess the merit, value, and worth of Core VIPP and any process improvements that can be made to the program during the current project period. During Year 1 of this five-year cooperative agreement, the Safe States/SAVIR Team worked with CDC evaluators to identify evaluation questions, develop data collection tools, and collect grantee data on achieving performance measures, building and/or maintaining violence and injury prevention capacity, and achieving measurable health impact on reducing violence and injury-related morbidity and mortality in funded states. In the upcoming year, the evaluation team will conduct interviews with each state grantee; produce a report, which will summarize Year 1 data, activities, and feedback reported by grantees; develop tools to support states' strategic planning initiatives; and, continue to develop evaluation tools as necessary.

Injury Surveillance Workgroups (ISWs)

In 2012, the Safe States Alliance released its seventh set of recommendations to improve state-based injury surveillance. Since 1998, the Safe States Alliance has brought together distinct Injury Surveillance Workgroups (ISWs). These ISWs have examined important injury surveillance issues and challenges facing state IVP programs, and have developed consensus-based recommendations to address these issues. ISW is an ongoing, collaborative effort between a host of organizations, including the Safe States Alliance, the Council of State and Territorial Epidemiologists (CSTE), the Society for the Advancement of Violence and Injury Research (SAVIR), the Centers for Disease Control and Prevention's (CDC) Injury Center, and National Center for Health Statistics. Safe States Alliance serves as the lead organization and convenes the ISW, which is supported through a cooperative agreement with CDC Injury Center.

ISW publications include:

- Consensus Recommendations for Injury Surveillance in State Health Departments (1999)
- Consensus Recommendations for Using Hospital Discharge Data for Injury Surveillance (2003)
- Consensus Recommendations for Surveillance of Falls and Fall-Related Injuries (2006)
- Consensus Recommendations for Injury Surveillance in State Health Departments (2007)
- Assessing an Expanded Definition for Injuries in Hospital Discharge Data Systems (2008)
- Consensus Recommendations for National and State Poisoning Surveillance (2012)

The development of ISW standards and recommendations are a critical step towards providing a framework for comparing injury-related risk behaviors, injury morbidity, and injury mortality by selected demographic factors and by mechanism and intent of injury within and across states. Implementation of these recommendations can help improve the usefulness of data for making decisions about injury prevention efforts and facilitating collaboration among state injury and violence prevention programs.

Programs & Services

National Violent Death Reporting System

In 2002, CDC received funding to create National Violent Death Reporting System, informally known as NVDRS. It is a state-based surveillance system collecting facts from different sources about the same incident. The information (from death certificates, police reports, and coroner or medical examiner reports) is pooled into a usable, anonymous database. As NVDRS data become available, state and local violence prevention practitioners use it to guide their prevention programs, policies, and practices.

The inaugural NVDRS Special Interest Group (SIG) met on September 10-11, 2012, prior to the Reverse Site Visit. This group was formed as a recommendation from the 2011 NVDRS Roundtable Meeting. The group discussed activities to promote more state ownership and participation in NVDRS by reviewing CDC program requirements, identifying and sharing best practices about implementing state NVDRS programs, and helping to address other technical issues as they arise. The goals of the NVDRS SIG are to raise awareness of NVDRS, promote the use of NVDRS data, and maintain existing states and expand to include unfunded states.

The Safe States Alliance, with support from CDC, coordinated the annual NVDRS Reverse Site Visit, which took place September 11-13, 2012, and welcomed over 80 attendees. This meeting provided grantees with an opportunity to share progress made towards the implementation and growth of NVDRS.



Professional Development

Web-Based Trainings

Throughout the year, Safe States offered webinars to enhance members' proficiencies in all Core Competencies for Injury and Violence Prevention as described by the National Training Initiative (NTI). The webinars offered during the 2012 fiscal year included:

- *Developing Smart Objectives*, October 2011 - Jointly sponsored with the Centers for Disease Control and Prevention (CDC) Injury Center
- *Setting Standards to Advance Injury and Violence Prevention in Local Health Departments*, October 2011 - Jointly sponsored with the National Association of County and City Health Officials (NACCHO)
- *Public Health Roles in Violence Prevention*, November 2011
- *CDC's Response to Injury: Update for Partners from Division of Injury Response (DIR)*, November 2011 - Jointly sponsored with CDC Injury Center
- *Introduction to phConnect: A Public Health Networking Website*, November 2011 - Jointly sponsored with CDC Injury Center
- *Affecting Policy: The Role of Public Health*, January 2012 - Jointly sponsored with CDC Injury Center
- *Using Policy to Prevent Teen Dating Violence*, February 2012 - Jointly sponsored with the Association of State and Territorial Health Officials (ASTHO) and NACCHO
- *WISQARS Cost of Injury Reports Enhancements: Generating Cost Estimates Using Your State-Based Data*, March 2012 - Jointly sponsored with CDC Injury Center

Professional Development

Web-Based Trainings, Cont.

- *Update on Early Childhood Home Visitation Report Guidance*, April 2012 - Jointly sponsored with CDC Injury Center
- *Injury Control Research Centers: Strengthening Partnerships*, June 2012 - Jointly sponsored with CDC Injury Center
- *Field Triage Implementation and Evaluation Update*, August 2012 - Jointly sponsored with CDC Injury Center
- *Innovative Approaches to IVP: The 2012 Innovative Initiatives Finalists*, August 2012
- *Law as a Path to Health and Safety*, August 2012 - Jointly sponsored with CDC Injury Center
- *ISW 7 Recommendations for National and State Poisoning Surveillance*, August 2012 - Jointly sponsored with the Council of State and Territorial Epidemiologists (CSTE)
- *Finding the Evidence Webinar Series*, August – October 2012 - Jointly sponsored with South by Southwest Injury Prevention Network

ASTHO, NACCHO, & Safe States Injury Prevention Webcasts

The Association of State and Territorial Health Officials (ASTHO), the National Association of County and City Health Officials (NACCHO), and the Safe States Alliance continue to offer a webcast series on various injury and violence prevention topics.

The theme for the 2012 series was “Using Communication and Media to Prevent Injuries & Violence.” Throughout the year, webcasts focused on effective and innovative communication and media strategies being implemented in states and communities to prevent injuries and violence. The central goal of the webcast series was to draw insights from state and local case studies to understand



how new and traditional media can be used to successfully to communicate with a variety of audiences and promote healthy and safe behaviors.

Webcasts in the 2012 theme included:

- *Making the Front Page: Using Media Strategies to Promote Injury & Violence Prevention Programs*, June 2012
- *#Prevention: How State and Local Health Departments Can Capitalize on Social Media*, October 2012
- *Evaluating Public Health Communication Campaigns* (To take place in early 2013)

“Safe States webinars provide the latest, cutting-edge information related to injury and violence prevention practice, as well as unparalleled professional development training opportunities. I promote the webinars widely among staff and colleagues and always get good feedback from participants.”

Shelli Stephens Stidham
Injury Prevention Center of Greater Dallas

Membership

By the end of the 2012 fiscal year, the Safe States had a total of **510** members – an overall increase of **12%** compared to 2011. While the majority of Safe States members were from state health departments, members also came from a variety of other organizations including local health departments, hospitals, universities, and other non-profit organizations.



“The Exchange provides a great venue to quickly gather and share information with your injury prevention colleagues. It is a valuable resource.”

Jessie Fernandes, MPH, CPH,
Epidemiologist/Evaluator,
Montana Injury Prevention Program

Safe States Exchange

The *Safe States Exchange* is an online community designed to facilitate networking, relationship-building, and information exchange between all Safe States members. In 2012, 216 Safe States members used the Exchange to share information and network with their fellow members.

The Safe States Knowledge Center is searchable online library of resources, information, and tools created, submitted, and utilized by Safe States members and partners nationwide. More than 250 documents and resources were accessed or added in 2012 to the wealth of information already available on the *Exchange*.

Special Interest Groups (SIGs)

SIGs are forums for Safe States Alliance members who share similar interests or specialties in the field of injury and violence prevention. They provide members with an opportunity to exchange ideas and stay informed about current developments in their fields. SIGs are semi-autonomous networks created and maintained by members. The 2012 SIGs included:

- Disaster Epidemiology
- Safe States Alliance State Designated Representatives
- Local Injury Prevention
- Smart Growth
- National Violent Death Reporting System (NVDRS) – **new in 2012!**



2012 Joint Annual Meeting

From May 1 - 4, 2012, injury and violence prevention experts from across the country convened in Atlanta, GA, to attend the Joint Annual Meeting of the Safe States Alliance and CDC Core Violence and Injury Prevention Program (Core VIPP).

As the theme of this year's meeting was "Shaping the Path to Safety," the meeting featured workshops, concurrent sessions, poster presentations, and a plenary addresses, which focused on how injury and violence prevention professionals from a variety of fields have worked tirelessly to make communities safer across the nation. During this Annual Meeting we celebrated the accomplishments of the past, while also looking forward to the achievements of the future.

Meeting highlights included: a panel session on "Federal Partnerships to Win the Winnable Battle of Motor Vehicle Injuries" with Grant Baldwin, PhD, MPH, of the Centers for Disease Control and Prevention (CDC), and Jeff Michaels, of National Highway Traffic Safety Administration (NHTSA); an engaging and participatory keynote address entitled "Storytelling as Best Practice" by Andy Goodman of the Goodman Center; and a distinguished panel of former directors of the CDC Injury Center who spoke during the session titled, "20 Years of Progress: A Panel Discussion Among the CDC Injury Center's Current and Former Directors." The meeting concluded with a powerful session: "Future Directions and Opportunities for Injury and Violence Prevention" including speakers: Larry Cohen, MSW, of The Prevention Institute; Robin Ikeda, MD, MPH, of the Centers for Disease Control and Prevention (CDC), and Nicole Kunko of the Association of State and territorial Health Officials (ASTHO).



Shaping the
Path to Safety



The 2012 theme "Shaping the Path to Safety" is credited to the ongoing journey of numerous professionals who have dedicated their life work and who unselfishly share their expertise and experiences, while collaboratively assisting new leaders to plot a course that will minimize injury and violence resulting in a safer tomorrow."

Stewart Williams, Injury Prevention Manager,
Dell Children's Medical Center of Central
Texas

2012

Safe States Awards



Alex Kelter Vision Award

This award was introduced in 2003 to recognize individuals who have brought leadership and vision to the field of injury and violence prevention.

2012 Award Winner: Larry Cohen, The Prevention Institute



Innovative Initiative of the Year Award

The only award selected exclusively by the Safe States membership, the Innovative Initiative of the Year Award is presented to a Safe States member who has implemented a unique and creative program, activity, or project that has the potential to substantially decrease injuries and violence in the communities that they serve.

2012 Award Winner: Utah Department of Health, Violence and Injury Prevention Program for “Integration of Drug Overdose Deaths into the Utah Violent Death Reporting System”



Partner of the Year Award

This award acknowledges the contributions of an organization or sponsor for furthering the mission of the Safe States Alliance. Such contributions would include, but not be limited to, providing financial support for Safe States Alliance activities or by providing states with injury prevention funding or equipment (e.g., bicycle helmets, child safety seats, etc.), or through significant partnership and collaboration throughout the past year.

2012 Award Winner: American Public Health Association



Rising Star Award

It is of vital importance to recognize new professionals making strides in the discipline of injury and violence prevention. The Rising Star Award recognizes individuals who have been working in the field for less than five years.

2012 Award Winner: Jennifer Woody, North Carolina Division of Public Health

President's Award

This award is presented to a member who has been instrumental in assisting the Safe States President in achieving the organizational priorities of Safe States.

2012 Award Winner: The Staff of Safe States Alliance

Advocacy & Policy



Injury and Violence Prevention Network Hill Day

In 2012, the Safe States Alliance took an exciting step to formalize a national group of injury and violence prevention organizations, which regularly convene to discuss important policy issues and updates. This group has now become a coalition officially known as the Injury and Violence Prevention Network (IVPN).

Including more than 40 organizations nationwide, the IVPN convenes on a monthly basis to coordinate and collaborate on joint policy and advocacy strategies. Together, the IVPN:

- Convened a meeting with the CDC Injury Center and national stakeholders in Washington, D.C. on March 12, 2012;
- Co-sponsored a Hill briefing featuring Safe States Alliance President, Lori Haskett (KS), and CDC Injury Center Director, Linda Degutis; and
- Conducted joint meetings with Congressional appropriations committee staff and administration officials.

Safe States prepared and shared new communication tools to support education and advocacy efforts.

Safe States held a Hill Day on March 13 in Washington, D.C. with members representing six (6) states. Members were able to conduct 13 visits with Congressional staff to provide education and build relationships.

The Facts Hurt: A State-By-State Injury Prevention Policy Report

Safe States collaborated with Trust for America's Health (TFAH) and the Robert Wood Johnson Foundation (RWJF) to develop and release a report, which provides the public and policymakers with information about the status of some injury prevention policies in states and provides recommendations for evidence-based strategies to reduce injuries in the United States. The report concludes millions of injuries could be prevented each year if more states adopted additional evidence-based injury prevention policies, and if programs were fully implemented and enforced.

To promote the report and its findings, Safe States participated in a host of media outreach efforts, including: 140 radio and TV spots, 16 national articles, six (6) blog posts and more than 75 state newspaper articles. Additionally, Safe States conducted outreach with Congressional offices to share the ground-breaking report.

2012 Policy Agenda

The Safe States developed and released updates to the policy agenda, identifying key advocacy priorities, as well as issues to monitor and support the efforts of partner organizations. Throughout the past year, Safe States has prepared issue briefs and fact sheets; submitted testimony to Congressional committees; and created advocacy alert messages for Safe States members to encourage grassroots outreach. Safe States utilized the topics highlighted in the policy agenda as the guidelines for advocacy activities. Additionally, Safe States sent 16 Advocacy Alerts in 2012 to share opportunities for member and partner outreach on policy priority areas.

"Safe States' advocacy voice raises awareness of the social and economic toll of violence and injures on families and is essential to bring attention to the absolute necessity of adequate funding for a problem that is preventable with cost-effective solutions."

Terry Bunn, Ph.D., Associate Professor, Preventive Medicine and Environmental Health, Director, Kentucky Injury Prevention and Research Center, University of Kentucky, College of Public Health

Looking Forward



In 2013, the Safe States Alliance looks forward to:

- Celebrating our **20th anniversary**;
- Continuing to strengthen our role as a national **advocate**, convener, and voice for injury and violence prevention;
- Releasing important new reports, including an update to the landmark Safe States publication describing the **core components** of state injury and violence prevention programs for **health departments** of the **future**;
- Increasing the **engagement** of **members** through opportunities to exchange resources, experiences, and ideas through Special Interest Groups (SIGs) and the *Safe States Exchange*;
- Providing year-round **trainings** and professional development opportunities, both in-person and through online webinars;
- Continuing the multi-year **evaluation** of the Core Violence and Injury Prevention Program;
- Joining with our partners to host a dynamic and collaborative **national meeting** with the Society for the Advancement of Violence and Injury Research (SAVIR) and the CDC Injury Center; and
- Continuing to enhance **membership** services to enhance our efforts to advance injury and violence prevention **practice**.

As the world continues to change and create new challenges for injury and violence prevention practice, Safe States is the place to discover, connect, grow, and become empowered in our shared vision of a safer and healthier America.

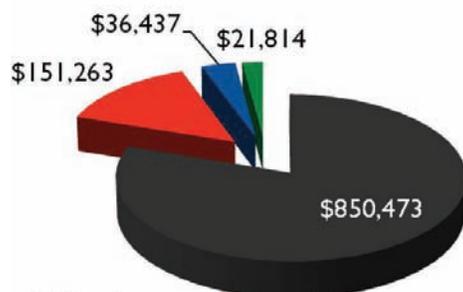
Financial Report

Safe States is committed to responsible financial management. The Safe States Executive Committee and staff work together to ensure all financial matters are addressed with care, and financial decisions are handled with integrity and made in the best interests of the organization.

A bi-annual update was made in 2012 to the accounting policies adopted by the Executive Committee, which have focused on:

- Safeguarding Safe States assets;
- Ensuring accurate record-keeping and maintenance of Safe States financial activities;
- Providing a framework of operating standards and behavioral expectations; and
- Ensuring compliance with federal, state, and local legal and reporting requirements.

Income



■ Grants

■ Conference Registration

■ Membership Dues

■ Investment & Other Income

ASSETS	2012	2011	2010
Cash & Cash Equivalents	173,382	187,497	137,191
Investments	82,434	0	0
Grants Receivable	133,686	133,196	140,278
Accounts Receivables	0	0	0
Prepaid Expenses	16,400	19,270	11,908
Property & Equipment , Net	966	1,137	289
Deposits	4,311	4,311	4,311
TOTAL ASSETS	411,179	345,411	293,977
LIABILITIES			
Accounts Payable	48,630	22,748	17,888
Accrued Expenses	44,411	33,176	62,799
Deferred Revenue	20,980	30,235	29,144
TOTAL LIABILITIES	114,021	86,159	109,831
UNRESTRICTED NET ASSETS	297,158	259,252	184,146
PUBLIC SUPPORT & REVENUES			
Grants	850,473	806,666	802,633
Conference Registration	151,263	217,374	77,775
Membership Dues	36,437	32,002	28,006
Contributions	0	0	60
Programs Service Fees	0	0	0
Investment & Other Income	21,814	6,253	3,234
TOTAL PUBLIC SUPPORT & REVENUES	1,059,987	1,062,295	911,708
EXPENSES			
Program Services	868,857	859,727	758,562
Management & General	153,224	127,462	130,516
TOTAL EXPENSES	1,022,081	987,189	889,078
CHANGE IN NET ASSETS	37,906	75,106	22,630

For 2012, revenues amounted to \$1,059,987 and net assets at year-end totaled \$297,158.

Safe States received an unqualified opinion from its independent auditors, GrossDukeNelson & Co., LLC, indicating that the organization's financial statements comply with accepted accounting procedures. Safe States continues to focus on expanding its reserves, while also balancing a commitment to membership services and funding requirements.

Safe States Leadership

2012 Safe States Executive Committee

Lori Haskett, President
Shelli Stidham Stephens, Past President
Lisa VanderWerf-Hourigan, Vice-President
Holly Hedegaard, Secretary
Linda Scarpetta, Treasurer
Michael Bauer, Member-at-Large
Peg Ogea Ginsburg, Member-at-Large
Binnie LeHew, Member-at-Large
Ellen Schmidt, Member-at-Large
Carol Thornton, Member-at-Large



2012 Safe States Committee Chairs

Membership Engagement Workgroup

Peg Ogea-Ginsburg, Chair
Bobbie Perkins, Vice-Chair

Policy Committee

Carol Thornton, Chair
Patricia Adkins, Vice-Chair

Finance/Audit Committee

John Lundell, Chair
Lori Haskett, Vice-Chair

Leadership Development

Shelli Stephens-Stidham, Chair
Robin Argue, Vice-Chair



Amber N. Williams
Executive Director



Jamila Porter
Assistant Director



Michelle Wynn
Operations Director



Stephanie Maltz
Government
Relations Consultant



Jessica Hill
Evaluation Project
Director



Amirah Patterson
Project Assistant
Intern



Olivia Taylor
Communications
& Professional
Development
Coordinator



Amy Woodward
Membership
Support & Meeting
Specialist

Safe States Staff

Not Pictured:

*Shenee Reid Bryan
Evaluation Specialist*

*Ashley Pruett
Assistant Director*



SAFE STATES

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@SafeStates



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