For more than 25 years, the Johns Hopkins Center for Injury Research and Policy has been a leader in injury research, education, policy and practice. The Center is guided by a commitment to ensuring that our high-quality research is translated into programs and policies that make a difference.

ABOUT US
The Johns Hopkins Center for Injury Research and Policy (JHCIRP) is one of the largest injury research and educational programs in the world. We are comprised of a team of scientists, teachers, and practitioners committed to reducing the burden of injuries through research, education, policy and practice. We have a long history of advancing the public’s health through the development, implementation, and evaluation of effective injury control policies and programs.

RESEARCH AREAS OF SPECIAL INTEREST
• Urban Health and Disparities
• Home Fires
• Intimate Partner Violence
• Consumer Product Safety
• Poisonings
• Motor Vehicle Safety
• Trauma Care

Research has taught us that many injuries, just like diseases, are preventable. However, each day, close to 500 Americans die from injuries resulting from motor vehicle crashes, gunfire, poisonings, fires and poisonings.

In addition to conducting new research to prevent these injuries, we believe a critically important opportunity to reduce the burden of injury lies in the translation of research into programs and policies that make a difference.

—Andrea Gielen, ScD, ScM, Center director

DEGREES, EDUCATIONAL PROGRAMS & SCHOLARSHIPS
• PhD, MPH, MSPH, MHS
• Certificate Program in Injury Prevention and Control
• Summer Institute on Principles and Practice in Injury Prevention
• The Susan P. Baker Scholarship
• The William Haddon Jr. Fellowship
• The Nancy A. Robertson Scholarship

PRIMARY SOURCES OF FUNDING
• National Center for Injury Prevention and Control, Centers for Disease Control and Prevention
• National Institutes of Health
• U.S. Department of Defense
• Private foundations and donors

COLLABORATORS AND PARTNERS
We routinely work with a variety of local, national and international organizations to help design, implement, evaluate, and disseminate innovative research and programs. Examples include:

• Active Living Research
• Baltimore City Fire Department
• Baltimore City Health Department
• CareFirst BlueCross Blue Shield
• House of Ruth Maryland
• Maryland Department of Health and Mental Hygiene
• Maryland Department of Transportation
• Safe Kids Worldwide
• Safe States Alliance
• Society for Advancement of Violence and Injury Research
• World Health Organization

EXAMPLES OF OUR IMPACT

Children’s Safety Centers: Prompted by Center research showing that low-income Baltimore families experience obstacles to keeping their kids safe, the Center partnered with the Johns Hopkins Dept. of Pediatrics to develop the Children’s Safety Center (CSC). The CSC provides visitors with personalized safety information, including car seat installations and heavily discounted safety products. The success of the CSC led to the creation of two more safety centers in Baltimore, including a mobile center, and children’s hospitals around the country have replicated the model.

Resource for State Policy Makers: The Center is committed to ensuring that decision makers have access to the best available research. Preventing Injuries in Maryland: A Resource for State Policy Makers was developed in advance of Maryland’s 2010 legislative session to provide state policy makers and their staffs with easily accessible data and policy information on leading injury problems. The Center developed 2011 and 2012 versions, and institutions around the country are currently replicating our efforts.

Improving Trauma Care: Following Center research which showed trauma patients and their families need greater psychosocial support, Center faculty worked with the American Trauma Society and trauma centers to build the Trauma Survivors Network (TSN). The TSN allows injury survivors to connect with and learn from one another. Trauma centers across the U.S. are now adopting the TSN, and research on the recovery process indicates that full implementation will have a positive impact on trauma outcomes.