ICRC Gains USDOT University Transportation Center Designation

RECOGNIZING the UAB ICRC’s track record of excellence in research and innovation, the United States Department of Transportation (DOT) has named the center one of eight new University Transportation Centers (UTC) (http://utc.dot.gov) to be funded through DOT’s Centers of Excellence initiative.

The ICRC will be the only UTC in the country affiliated with a medical school, and its biomechanical research emphasis is also unique to the UTC program. The $2 million funding will support research from FY 2006 through FY 2009. The specific research to be funded will be determined as the ICRC leadership develops a strategic plan in conjunction with the DoT UTC oversight agency, the Research and Innovative Technology Administration (http://www.rita.dot.gov).

The UTC program began in 1987, and it has grown through successive funding cycles to its present level of 33 UTCs throughout the country. By partnering with universities on research in transportation issues, DOT seeks to increase research innovation, effectively place its research dollars with top research centers, and drive undergraduate, graduate, and doctoral students into the transportation field, thereby ensuring continued passion in resolving transportation problems and issues.

The number of injury control programs and projects continues to increase at UAB, which has led to the planning for an umbrella entity known as the UAB Transportation Safety and Injury Research Institute. The institute concept developed by Drs. Russ Fine, Jay Goldman, and Loring Rue will promote the consolidation and integration of numerous center programs and projects that focus on various aspects of injury prevention and control. UAB leadership is working with Drs. Fine, Goldman, and Rue to relocate virtually all injury prevention and control-related activities into one dedicated facility.

Dr. Fine, professor of medicine, is the founder, director, and principal investigator of the UAB ICRC, and he is also the founder, principal investigator, and director of the Southern Consortium for Injury Biomechanics. Dr. Rue, professor of surgery at UAB, is chief of trauma and the founding director and PI of the UAB Center for Injury Sciences. Dr. Goldman is dean emeritus of UAB’s School of Engineering and acting associate director of the ICRC, the SCIB, and the new UTC.

UAB Injury Control Research Center
CH19 401 • 933 19th Street South
1530 3RD AVE S
BIRMINGHAM, AL 35294-2041

The Ohio State University Second Annual Injury Biomechanics Symposium
May 17-19
http://medicine.osu.edu/ibrl/4704.cfm

Prevent Child Abuse America 2006 National Conference
May 21-24
http://www.preventchildabuse.org/ConferenceEvents/conference.html

15th Annual Johns Hopkins Summer Institute: Principles and Practice of Injury Prevention
June 4-9
http://www.jhph.edu/injurycenter/

2006 Annual National Institute for Farm Safety Conference
June 25-30
http://www.marshfieldclinic.org/nfmc/

Mentors in Violence Prevention Institute for Gender Violence Prevention and Education
August 7-9
http://www.safesouth.org

National Playground Safety Week
April 24-28
http://www.unl.edu/playground

North American Occupational Safety and Health Week
April 30-May 6
http://www.iasc.org

National Safe Kids Week
May 6-13
http://www.safekids.org

National Transportation Safety Week
May 14-20
http://www.ntweek.org

Buckle Up America
May 22-29
http://www.nhtsa.dot.gov

Eye Injury Prevention Month
August 1-31
http://www.aoa.org

“You Drink and Drive, You Lose” National Crackdown
August 18-September 4
http://www.nhtsa.dot.gov

National Farm Safety and Health Week
September 17-23
http://www.nsc.org/nfcsa/

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ICRC Addresses Dangerous Habits of Young Drivers

GIVE A TEENAGER a list of things that are dangerous to do, and sometimes it seems as if they have been given a to-do list for the day.

A team of ICRC scientists is trying to understand just how to convey the dangers of driving to young people in a way that will encourage safety and not throw gasoline on the volatile flame of youth. It’s a challenging task.

“We are trying to establish the components of social influence that may contribute to the culture of risk among teens,” said Dr. Nancy Rhodes, a social psychologist at the University of Alabama and the project’s co-principal investigator. “By establishing these, hopefully [we can] attack them in a way that will enable us to make some meaningful inroads.”

The study, now in the second of its projected five years, began by looking at crash data in Alabama to determine the leading contributing factors for crashes among young drivers. The initial analysis showed two distinct patterns by age: the younger drivers (aged 16 through 20) had more crashes than drivers of any other ages, but the percent of non-DUI crashes was much higher than DUI crashes. That changed abruptly at age 21, the legal age for drinking in Alabama. In fact, the state’s crash data showed that 21-year-olds had the highest percentage of DUI crashes of any age.

Dr. Rhodes acknowledges that inexperience most likely plays a major role in the high number of crashes among younger drivers, whether or not they are under the influence of alcohol. Nevertheless, many behaviors exhibited by these drivers can be consid- ered risky-taking—excessive speed, improper passing, and failure to heed signs or signals, among others. One of the study’s goals is to tease out the relative roles risky behavior and inexperience play in young adult crashes.

Another major element of the study is understanding the role of descriptive norms in encouraging young people to drink to excess. According to Dr. Rhodes, a descriptive norm is what you think is true about a certain behavior that others are doing. “The operative word is ‘think,’” often, she said, “what young people believe to be true is not actually true.” A descriptive norm could be “everybody drinks,” she said: “That’s not true. Most who drink on college campuses are doing so responsibly. But there is a disconnect between what they perceive as happening and what is actually happening.”

In the study, drivers are divided into five groups based on their self-reported drinking behaviors: those not drinking at all; those who drink moderately; those who drink to excess; those who are too drunk to think they’re not out of line; and those who drink moderately but feel they are doing so responsibly. Those who don’t drink can feel they are better than all of those who do, those who drink moderately can think they’re more responsible than ‘all the others’ who are drinking heavily, and those who drink to excess can think that they’re not out of line because ‘everybody’s doing it at.’

The study results show that mechanical injury and the resulting cellular strain to certain layers below the surface of the brain are much greater than previously thought. Dr. LaPlaca, assistant professor of biomedical engineering within the Petit Institute for Bioengineering and Bioscience at the Georgia Institute of Technology, is a principal investigator for the SCIB.

Dr. Yang, also a SCIB-funded principal investigator, is director of the Bioengineering Center and professor of biomedical and mechanical engineering at Wayne State University.

Finally, Augusta Cash, an expert in vocational rehabilita- tion for survivors of traumatic injuries, served on a panel titled “There Is Work after Brain Injury” in addition to being part of the esteemed faculty at the conference. Ms. Cash is a recent- ly retired TBI program director from the Alabama Department of Rehabilitation Services and is a longtime associate of the ICRC.
IN 1998, Jo HN Boll AND, P
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adolescents from the poorest areas in metropolitan
Mobile, Ala., to learn about their high-risk behaviors.
The UAB Injury Control Research Center decided to
fund the analysis of one aspect of the data in 2004,
choosing Dr. Bolland to be director of the Prevention of
Youth Violence Domain.

In fall 2005, Dr. Bolland moved from the University
of Alabama to UAB, in part because of the community
of scholars fostered by Dr. Russ Fine and his manage-
mant team at the ICRC. He was welcomed into the
UAB School of Public Health and accepted a posi-
tion as associate professor within the Department of
Health Behavior.

"The major factor in my decision to move was the
strong interdisciplinary research environment at UAB," Dr. Bolland said. "ICRC is a part of that. . . . [The cen-
ter] contributes to the development of researchers as
much as the researchers help ICRC."

Dr. Bolland, a native of Seattle who earned his Ph.D.
in political science at Ohio State University in 1979,
is interested in studying the high-risk behaviors of
people in the poorest segments of society—the ones
he believes have largely been left out of the successes
of many health programs. Since the Mobile project
began, he and his team have surveyed more than
7,000 different youths, both male and female, between
10 and 18 years old.

Presently, the ICRC is funding a project evaluating the
effectiveness of the Mobile Police Department Family
Intervention Program, using the data from the Mobile sur-
veys to study results from an intervention group and two
control groups—one from Mobile and one from Pritchard,
a suburb of Mobile. The Family Intervention Program
brings social workers and other helping professionals into
local communities, where they work with at-risk youths to
help them reduce their high-risk behaviors.

Dr. Bolland believes understanding high-risk behav-
iors, many of them criminal, is an important health
issue. "The biggest problem politically in our country is
the social disenfranchisement of big segments of our
population," he said. "Anything that can improve their
environment is linked to better health."

JEFFREY KERBY, M.D., Ph.D., knows how important
field resuscitation techniques are.

As a lieutenant colonel in the United States Air Force,
Dr. Kerby provided direct surgical support to U.S. forc-
es during Operation Enduring Freedom, for which he
was awarded the Air Force Joint Service Achievement
Medal. Not only did he work on the ground with the
troops, but he also participated in the development and
validation of small, portable mobile field surgical teams,
which are currently being used by all branches of the
service to provide surgical support for troops involved
in military operations.

Dr. Kerby came to UAB in 2003, joining the
Department of Surgery's Trauma/Burns and Surgical
Critical Care section as an associate professor. Last
fall he stepped in as principal investigator of the
ICRC's Prehospital Endotracheal Intubation (ETI)
Project, which is attempting to determine the impact of
intubations performed by emergency personnel in the
field on survival and long-term functionality of people
with traumatic brain injuries.

Joining ICRC gives him the “ability to associate with
an expert team of investigators focused on injury pre-
vention and control,” said Dr. Kerby. His goal is to “work with the expertise of the ICRC to prevent traumatic
injury and improve outcomes following trauma.”

Dr. Kerby earned his medical degree from the
University of Missouri-Kansas City in 1989. He later
received a Ph.D. in biochemistry and molecular genet-
ics from UAB while serving his residency in surgery
at the School of Medicine, where he was appointed
chief resident. He is a diplomate of the American
Board of Surgery and a fellow of the American College
of Surgeons. He has published peer-reviewed jour-
nal articles, book chapters, and abstracts, and his
research interests focus on new resuscitative fluids
with an emphasis on hemoglobin-based oxygen car-
rriers, as well as improvements in field resuscitative
protocols following trauma.

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Katherine Terry Named ICRC Associate Director

AS THE OLD adage goes, ‘cream will rise to the top.’ The recent promotion of Katherine Terry to the position of ICRC associate director for education, training, and service is a case in point. She began working with the ICRC six years ago while completing a Master of Public Health degree, and she soon took on full-time duties as program coordinator. With her background in epidemiology, chemistry, and biology, she was a natural in the ICRC’s research environment. As her job evolved, she increasingly had to step into the world of communications and marketing, meeting each new task with a sense of challenge. ‘I was applying the knowledge I’d learned [in school] and cultivating other skills as well,’ she said. ‘It’s always a challenge, and I enjoy it.’

When Dr. Kurt Denninghoff, former ICRC associate director, took a faculty position in Arizona, ICRC leadership chose Ms. Terry to replace him. ‘When faced with the need to recruit Kurt’s successor, we were challenged by the importance and demands of the position, and we knew we needed a very special person with a number of finely honed skill sets, not the least of which was excellent people skills,’ said Dr. Russ Fine, who founded the ICRC in 1989 and continues as its director and principal investigator. ‘We knew that an experienced person was absolutely critical . . . Kurt’s successor had to hit the ground running and then step up the pace by more than a couple of notches. When we sat down to list the qualities and characteristics the position required, it took us about 15 seconds to realize that Katherine Terry was the perfect candidate.’

Ms. Terry, who is also the SCIB development and marketing group leader, will be handling educational programs; overseeing communications and marketing materials such as the newsletter, Web site, and annual reports; and fostering connections between private industry and injury biomechanics research within the SCIB. ‘Private industry is increasingly outsourcing biomedical and other types of research, and we have the facilities and the nation’s leading researchers to do the work private industry needs,’ she said.

The varied aspects of Ms. Terry’s job come down to ‘putting what we do in a form that can help others,’ she said, whether that is training caretakers of TBI patients, teaching educators about injury prevention, helping private industry achieve its research goals, or facilitating researchers to do the work private industry needs,’ she said. ‘It’s a great and exciting time for the ICRC, and I’m thrilled to be a part of it!’