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Authors

Swahn, Monica H
Hankin, Abigail
Houry, Debra

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Addressing Injuries in Vulnerable Populations: Research Collaborations and Partnerships

Monica H. Swahn, PhD, MPH*
Abigail Hankin, MD, MPH†
Debra Houry, MD, MPH†

* Georgia State University, Institute of Public Health, Atlanta, GA

† Emory University, Department of Emergency Medicine, Atlanta, GA

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Injury-related morbidity and mortality disproportionately impact vulnerable groups, including children under the age of 5, older adults, racial and ethnic minority populations, and people of low socioeconomic status.^{1–4} The Emory Center for Injury Control (ECIC) is a Centers for Disease Control and Prevention (CDC) Injury Control Research Center⁵ charged with reducing the health and economic impact of injuries in Atlanta, Georgia and worldwide. The ECIC seeks to achieve its mission by focusing specifically on translation research and vulnerable populations.

Moreover, the ECIC is committed to encouraging innovative, interdisciplinary collaborations in the realms of research, training, and outreach. Examples of successful interdisciplinary activities include outreach to local emergency departments (ED) to screen patients for mental health symptoms and exposure to intimate partner violence and collaboration with the Georgia Child Fatality Review Panel to evaluate its processes and identify risk factors for death among children in state custody. At the grassroots level, the ECIC serves as the research/scientific arm of the Metropolitan Atlanta Violence Prevention Partnership, providing scientific support and technical assistance to this community-level organization of partners working in inner city, disadvantaged settings.

In order to disseminate the research findings generated by faculty and researchers associated with the ECIC, a partnership with the *Western Journal of Emergency Medicine* editorial team was formed to dedicate special thematic journal issues featuring research underway by the ECIC. We are delighted to report that this is the third special issue from this partnership, and we are very excited to present the injury prevention community with new research findings to inform programs, policy, and future research.

The current special issue presents findings on a range of topics that highlight injury-related health disparities and vulnerable populations. More specifically, there is a

commentary regarding the healthcare disparities in trauma care as well as a manuscript addressing the benefit of a tiered trauma activation system.^{6,7} Another manuscript examines the predictors of post-traumatic stress disorder among trauma victims and yet another manuscript assesses ED visits for traumatic brain injuries among older adults.^{8,9} Two other manuscripts examine poisonings.^{10,11} In addition, there are several manuscripts on intimate partner violence and unwanted sexual intercourse. For example, 1 study examines the latent trajectories of intimate partner violence and seeks to determine if childhood experiences impact these trajectories.¹² Three other studies examine intimate partner violence victimization and health behaviors among women, the racial and ethnic differences in unwanted sexual intercourse among girls, and the feasibility of using social media to study intimate partner violence among gay men.^{13–15}

Another manuscript related to youth examines bystander motivation in bullying incidents.¹⁶ Moreover, one manuscript examines the associations between temperature and violent crime.¹⁷ International research included in this special issue examines intimate partner violence and social pressure among gay men across 6 countries and violence victimization and perpetration among youth in the slums of Kampala, Uganda.^{18,19}

The range of manuscripts and professional affiliations reflected among the authors of the manuscripts included in this special issue underscore the strength and breadth of the ECIC – a ‘center without walls or silos.’ The ECIC links numerous professionals and disciplines at Emory University with counterparts at Atlanta-area public universities, private colleges, government agencies, and community-based organizations. In addition to its academic partners, the ECIC is closely aligned with local hospitals (particularly Grady Memorial Hospital, Atlanta’s largest Level I trauma and burn center), and stakeholder groups directly affected by violence and unintentional injuries. Our consortium includes individuals with national and international reputations in the fields of

neuroscience, injury epidemiology, criminology, poison control, health policy, rehabilitation, prevention science, acute care, disaster preparedness, public health training, and translation research. It is through these partnerships we can build the momentum to truly reduce injuries in vulnerable populations and to strengthen our capacity to reach underserved populations.

Address for Correspondence: Monica H. Swahn, Ph.D., MPH, Associate Professor, Institute of Public Health and the Partnership for Urban Health Research, Georgia State University, P.O. Box 3995, Atlanta, GA 30302-3995. Email: mswahn@gsu.edu.

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