

The new emphasis on implementing evidence-based interventions: the end of research or a new beginning for partnerships?

Although injury remains a costly and deadly problem worldwide, the science and practice of injury prevention continues to produce effective interventions. Seat belts reduce the risk of death and injury, and primary enforcement is an effective strategy for implementing these laws. Child safety seats protect children from crash forces, and combining legislation, education and product distribution strategies increases their use. Specific multi-component exercise programmes reduce falls in older adults. These and many other examples are the result of decades of research to identify risk factors and develop and test interventions in real world settings.

It is not surprising then that implementation and dissemination of proven effective policies and programmes are high priorities for the field, given the extent of evidence-based and promising interventions now available.¹ What are, therefore, the implications for the future of injury and violence prevention research? Certainly we must continue to improve surveillance and data linkages, assess new technologies and equipment and their effect on safety, and evaluate interventions as they are implemented. However, increased investment in new lines of research is needed, specifically in community engaged research and translation research.

Community-based participatory research (CBPR) provides a framework and process for practitioners, community members and academics to work in partnership to design, conduct and implement research and to disseminate the findings. It is a valuable approach to addressing health disparities, and has already demonstrated its utility in injury issues including playground safety,² and youth violence.^{3,4} CBPR increases the likelihood that interventions ready for translation will be implemented and disseminated in ways that produce outcomes relevant to the practice community's priorities.

Translation research, focused on understanding the processes involved in implementing programmes and policies and disseminating information about them, is a natural evolution in the history of injury prevention research. We have already begun to see the value of this expanded role for research. Rigorous evaluation of intervention implementation processes has resulted in the translation of evidence-based initiatives to prevent workplace violence,⁵ domestic violence,⁶ and to promote child and adolescent injury.^{7,8}

Because so many of our proven and promising interventions depend on the support of policy makers, translation research must also address questions critical to their decision making. In addition to questions about bringing proven interventions to scale and implementing them in non-research settings, cost effectiveness questions are particularly important. Given the tight fiscal climate in which all levels of government are operating today, research on actual cost savings in terms of health-care or public safety dollars would be especially compelling.

Policy makers are also keen on cross-cutting benefits for their investments in interventions. The US federal government's Community Transformation Grants offer a new opportunity for collaborative research to demonstrate such benefits. For

example, efforts to increase physical activity should include injury prevention research.⁹ While physical activity can improve chronic conditions and reduce falls in older adults, unsafe environments or inappropriate training can reduce physical activity and increase injuries. Conducting evaluation and translation research from a broader cross-cutting perspective is likely to show more positive outcomes and thus gain more support from policy makers.

Injury and violence prevention research is entering a new phase in its history, one that has great potential for transforming communities into places where people can indeed achieve the goal of 'living injury free'.¹⁰ For this research to be relevant to practice and effectively inform interventions, partnerships with practitioners are essential, and a more flexible, responsive research infrastructure is needed to facilitate such partnerships. Real time information exchange and timely feedback of results that are relevant and actionable for practitioners and policy makers are essential to facilitate the actual translation of research into programmes and policies. The current emphasis on translating the evidence base in injury and violence prevention is an opportunity to further these research and practice connections for the benefit of the populations we serve.

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Competing interests None.

Provenance and peer review Commissioned; internally peer reviewed.

Published Online First 1 November 2011

Injury Prevention 2011;**17**:431. doi:10.1136/injuryprev-2011-040219

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Inj Prev 2011 17: 431 originally published online November 1, 2011
doi: 10.1136/injuryprev-2011-040219

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