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EXPLORING LINKS BETWEEN STATE HEALTH DEPARTMENT CAPACITY FOR INJURY AND VIOLENCE PREVENTION AND HEALTH OUTCOMES: A LOOK AT THE CORE VIPP EVALUATION PLAN

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¹Hill Jessica A, ¹Reid Shenée, ²Jones Christopher, ²Kress Howard, ¹Jamila Porter, ³Gielen Andrea, ¹Williams Amber. ¹*Safe States Alliance, 2200 Century Parkway, Suite 700, Atlanta, GA 30345, USA;* ²*Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, 4770 Buford Hwy, NE, MS F-63 Atlanta, GA 30341, USA;* ³*Johns Hopkins Bloomberg School of Public Health, Center for Injury Research & Policy, 624 N. Broadway, Baltimore, MD 21205, USA*

Background Injuries are the leading cause of death for individuals 1–44-years-old in the USA. In 2011, the Centers for Disease Control and Prevention funded 28 state health departments (SHDs) through the Core Injury and Violence Prevention Programme (Core VIPP). Core VIPP supports SHDs to build injury

and violence prevention (IVP) capacity to disseminate, implement, and evaluate evidence-informed programmes and policies. Though SHDs received core funding previously, new to this funding cycle is an enhanced focus on evaluating capacity-building and exploring the relationship between capacity-building and improved health outcomes.

Aims/Objectives/Purpose This poster will discuss approaches to tracking capacity-building activities, measuring resulting increases in IVP capacity, and monitoring progress towards health outcomes.

Methods The Core VIPP evaluation is formative and summative evaluation. Unique tools were developed to measure grantees' capacity-building progress, including a biennial survey that will measure changes in IVP capacity over time. Additional tools help grantees identify health outcome objectives and track their progress toward these goals.

Results/Outcome The Core VIPP evaluation provides structure for data collection and analysis and reporting. Ultimately, the evaluation seeks to report on SHD IVP capacity, SHD progress towards health outcomes, and what the data suggest about the link between capacity-building and achieving health outcomes.

Significance/Contribution to the Field Many public health projects focus on building organisational capacity. The Core VIPP evaluation offers a model for linking activities to measurable increases in capacity over time, as well as approaches to exploring the link between increased capacity and improved health outcomes.