

International Society for Child and Adolescent Injury Prevention

Child health providers have always been leaders in preventive medicine. The field of injury prevention and control is no exception. Hugh Jackson in the United Kingdom, Ragnar Berfenstam in Sweden, and George Wheatley in the United States, were among the first to recognize the importance of injuries as a public health problem and the need to apply scientific approaches to their prevention. From this small cadre of individuals, a field of inquiry and practice has arisen that has made significant inroads to reduce the morbidity and mortality of children and adolescents due to trauma. Car seats, seat belts, child resistant packaging, bicycle helmets, lowered tap water temperature, and smoke detectors have become accepted strategies for injury prevention around the world.

As fields of inquiry grow and mature, however, other needs arise. One of these is the need for a forum in which new ideas can be exchanged, individuals can interact, and new practitioners can be recruited and acculturated. Until recently, injury control, as a whole, has had no such organization. The First and Second (and in 1996, Third) International Injury Control Meetings helped provide some of this interaction, but the long periods in between meetings are barriers to progress. Individuals in child and adolescent injury control have again taken the lead and formed a new organization to meet these needs, the International Society of Child and Adolescent Injury Prevention (ISCAIP).

The society arose out of a meeting held on 19 May 1993 during the Second International Injury Control Meeting, held in Atlanta, Georgia, USA. The group believed that such an organization would provide a means for injury professionals to communicate more effectively among themselves and would advance child and adolescent injury prevention by leading credibility to injury control efforts in many countries. We believed that such goals could be best served by creating a new organization rather than use existing organizations that were unlikely to be able to give injury control the priority it needs.

The goal of ISCAIP, as developed and approved by the members, is to promote a significant reduction in the number and severity of injuries to children and adolescents through international collaboration. To accomplish this goal our objectives are to:

- (1) Provide a multidisciplinary forum for child and adolescent injury control activities.
- (2) Provide advocacy at national and international levels.
- (3) Foster national injury prevention initiatives.
- (4) Stimulate the translation of research findings into programs and policies.
- (5) Facilitate collaborative and interdisciplinary international research.
- (6) Liaise with relevant international organizations.

The organization has gone through a nomination and election process to elect officers and a board who will serve until the Third International Injury Control meeting in Melbourne during February 1996. Officers of ISCAIP are Fred Rivara, MD, MPH, from the Harborview Injury Prevention and Research Center (USA) as chair; Michael Hayes, PhD, from the Child Accident Prevention Trust (UK) as treasurer; and Susan Gallagher,

MPH from the Children's Safety Network, Educational Developmental Center (USA) as secretary. The executive board consists of these officers and five members, one from each of the five continents: Wim Rogmans from the Consumer Safety Institute and ECOSA (The Netherlands); David Bass from the Child Accident Prevention Foundation of South Africa; R Krishnan from the University of Malaya (Malaysia); Ian Scott from the Child Accident Prevention Foundation (Australia); and Eric Daub from National Center for Education in Maternal and Child Health (USA). Barry Pless from the Montreal Children's Hospital (Canada), as editor of *Injury Prevention*, serves *ex officio*.

ISCAIP is intended to be an inclusive organization, rather than an exclusive one. It is intended to be multidisciplinary, serving in some sense as an umbrella organization for the many disciplines that contribute to child and adolescent injury prevention. It is our hope that it will provide an equally comfortable home for those studying the epidemiology of injuries or scientifically testing the effectiveness of interventions, as for practitioners in the field implementing those interventions.

Across the world injury control is unevenly developed. In some countries, it is relatively well supported and is an accepted part both of academic medicine and public health. However, in many other countries, including industrialized and less industrialized countries, injury control efforts are in their infancy. We believe ISCAIP will help to foster the growth of injury prevention in these countries and provide much needed support and collegiality to those working in the trenches. A repeated theme at the meeting in May 1993 was the need for recognition of the efforts of people around the world working in this field. This organization was also intended to promote technology transfer and information sharing to those just beginning, particularly in developing countries.

ISCAIP was also intended to serve as an international advocate. Many of the most effective prevention strategies involve regulation of products and legislation controlling various activities. With the increasing globalization of the world's economies and the commonality of products across countries, international efforts can have substantial impacts.

Injury Prevention is the official journal of ISCAIP and will be included as part of the membership fee. We believe that the journal will serve as an important vehicle for exchange of ideas, and will allow new creative energies to be brought to the field. We hope to supplement this soon with an electronic bulletin board and/or an e-mail network as well as a directory of all those individuals working in this field.

We look forward to new members joining and thus making ISCAIP an effective player in the effort to decrease the tragic morbidity and mortality to children from injury.

FREDERICK P RIVARA
Chair, ISCAIP

Director, Harborview Injury
Prevention and Research Center,
The George Adkins Professor of Pediatrics
and Adjunct Professor of Epidemiology,
University of Washington, Seattle, USA