

Dr. Richard Volpe received his PhD from the University of Alberta. He was a Laidlaw Foundation Post Doctoral Fellow, University of Toronto, Hospital for Sick Children and the Clark Institute of Psychiatry (CAMH).

At this time, he is Professor and Projects Director, Life Span Adaptation Projects of the Institute of Child Study, Department of Human Development and Applied Psychology (OISE), University of Toronto. He chairs the Best Practices Committee of the Provincial Advisory Committee of the Ontario Injury Prevention Resource Centre (OIPRC), is a member of the Prevention Committee of the Ontario Neurotrauma Foundation, the Editorial Board of the International Journal of Children's Services and the National Advisory of the Canadian Association of Family Resource Programs, and is a Fellow of the American Orthopsychiatric Association.

He was Director of the Dr. R. G. N. Laidlaw Research Centre, University of Toronto, Chair of the Institute for the Prevention of Child Abuse, Co-Chair of Justice for Children and Youth, Director of the Laidlaw Foundation Child at Risk Program Evaluation Unit, and Senior Evaluation Expert for the Organization for Economic Co-operation and Development (OECD). He was also a member of the Graduate Department of Community Health and the Institute for Life Course and Aging of the University of Toronto.

His current research deals with applications of prevention science, knowledge mobilization, and the promotion of evidence based practice. He has written and spoken extensively on both intentional and unintentional injury.

The Prevention of Inflicted infant Head Trauma in Ontario

Dr. Richard Volpe, Dr. Erin Sheard

The Ontario Neurotrauma Foundation prevention initiative is an adaptation and extension of the Upstate New York Shaken Baby Prevention Education Program. Although many SBS information programs exist, this is the only one that has a demonstrated an almost 45% reduction of incidence in a large population study. The ONF initiative involves six Ontario sites with participating hospitals, public health units, and midwife practice groups. The core of the ONF evaluation research is the provision of the standardized program delivered in hospitals and communities.

Projects were implemented in Sudbury, North Bay, Mississauga, Kingston, Hamilton, Oshawa, London, and Toronto, Ontario. Data was gathered on how well the program works and how evidence-informed practices can be disseminated (social network analysis) and implemented (mixed method process evaluation). The intervention aims of the projects were to: 1. Provide a consistent educational message to all parents of newborns in selected catchment areas, 2. Track the dissemination of information via signed consent forms, 3. Assess parents SBS knowledge and program opinions, and 4. Assess the impact of the education at 5 to 7-month follow-up.

Although hospital based projects demonstrated overall greater compliance with the fidelity features of the best practice, community projects showed equal effectiveness in conveying awareness and memorable information to parents. Follow up interviews suggest that the quality of connection between health educators and parents needs to be considered in addition to the assessment of program materials (videos, commitment forms, posters, and pamphlets).

Education materials developed for the ONF program have been translated with the collaboration of Toronto Public Health and the Best Start Resource Centre into 21 languages. A public web site and posters and have also been part of this systematic implementation experiment that cover an unprecedented range of prenatal and post natal applications involving parents, extended families, and communities.