STATEMENT OF POLICY

Injury and Violence Prevention

Policy
The National Association of County and City Health Officials (NACCHO) supports legislation and comprehensive surveillance and prevention strategies that have the potential to (1) reduce the impact of unintentional injury and intentional injury and (2) address the historic and ongoing impacts of institutional and structural oppression and racism that result in certain communities bearing a disproportionate burden of morbidity, trauma, disability, and mortality due to injury and violence. NACCHO recognizes injury and violence as public health issues and draws attention to the critical role that local health departments play in protecting and improving community health and safety in coordination and collaboration with local, state, and national efforts.

NACCHO supports the following strategies to address the causes of injury and violence across the lifespan (e.g., children, adolescents, older adults), especially for populations impacted by specific injuries and acts of violence based on gender, income, sexual orientation, age, disability, immigration status, and race/ethnicity:

- Development, implementation, and evaluation of evidence-based practices and innovative, promising, or model practices;
- Collaborative efforts among local health departments, state, tribal, and federal public health agencies, community partners, and stakeholders;
- Increased local, state, and federal funding to develop and maintain local prevention strategies and infrastructure at all local health departments, including leadership, coalitions/partnerships, surveillance, spatial analysis using Geographic Information Systems (GIS) communication, and evaluation;
- Ongoing training and support to increase capacity of all local health departments to identify health disparities, address health inequities, monitor local data and trends, and assess and evaluate the impact of local prevention efforts;
- Coordination and integration of injury and violence prevention into other related public health efforts (e.g., maternal and child health, chronic disease prevention, infectious disease prevention);
- Education for all institutions, organizations, and policymakers to raise awareness of violence as a public health issue;
- Commitment to trauma-informed systems as demonstrated through policies, practices, language, and environments in local health departments; and
- Implementation of prevention strategies that address risk and protective factors for multiple forms of violence.
Unintentional injury and intentional injury (i.e., violence) are significant public health problems because of their impact on the health of communities, including physical and emotional trauma, premature death and disability, poor mental health, lost productivity, and the burden placed on the healthcare system. Injury and violence are predictable and preventable, and as public health professionals we must be proactive in our solutions to reduce their occurrence.\(^1\)

Injuries and violence are among the leading causes of mortality, disability, and morbidity in the United States.\(^1\) In 2017, injuries and violence, combined, were the third leading cause of death in the United States.\(^2\) More than 234,000 deaths were attributed to injury and violence in 2017, primarily due to poisoning, such as drug overdose, motor vehicle injury, firearms, and falls.\(^2\) Unintentional injury is the leading cause of death for Americans ages 1–44 and the third leading cause of death among people of all ages.\(^3\) In 2017, over 18,000 Americans were victims of homicide and over 47,000 died by suicide.\(^2\) Millions more Americans are injured and survive, only to cope with lifelong mental, physical, and financial problems.\(^4\) Trauma and Adverse Childhood Experiences (ACEs) can also contribute negatively to the health of both individuals and their communities.\(^5,6\)

The costs of injuries are staggering. In 2013, the total lifetime medical and work loss costs of injuries and violence in the United States was $671 billion.\(^4\) Fatal drug poisonings made up 27% of the fatal injury costs.\(^4\) Unintentional injury is also the number one cause of years of potential life lost (YPLL) before age 65. Suicide and homicide are the fourth and sixth leading causes of YPLL, respectively.\(^2\) Additionally, in 2016, there were over 42 million injury visits to hospital emergency departments, accounting for roughly 29.0% of all emergency department visits.\(^7\)

The prevention of injury and violence leads to improved health and well-being in all members of the community.\(^8\) Effective approaches to injury prevention include modifications of the environment, improvements in product safety, legislation and enforcement, education and behavioral change, and technology and engineering.\(^9\) Effective violence prevention strategies include fostering safe, stable, nurturing relationships and environments, changing social norms about the acceptability of violence, improving problem-solving skills, and changing policies to address the social and economic conditions that give rise to violence.\(^9\)

Local health departments are responsible for creating and maintaining conditions and partnerships that keep people healthy, including the prevention of injuries and violence. Additionally, they are responsible for addressing disproportionate impacts of injury and violence in communities. Local health departments must be supported and enabled to assess injury and violence in their communities, create action plans that include diverse partners and stakeholders, implement prevention programs at the individual, relationship, community, and societal levels, and evaluate and improve those programs. Prevention efforts should focus on addressing and reducing impacts of institutional and structural oppression (e.g., social isolation, low neighborhood cohesion, lack of economic opportunities, and unemployment) and promoting or increasing protective factors (e.g., access to mental health and substance abuse services, development of social cohesion or social connectedness and coordination of resources and services among community agencies).\(^10\)
Local health departments are responsible for assessment, policy development, and assurance, and working with their partners in schools and other educational systems, workplaces, health and human services, faith-based communities, healthcare systems, transportation, law enforcement and criminal justice, and other related community-based organizations and groups. Local health departments must engage with and use community resources in order to effectively address the causes of injury and violence across the lifespan.

References

Record of Action

Proposed by NACCHO Injury and Violence Prevention Workgroup
Approved by NACCHO Board of Directors November 14, 2012
Updated May 2016
Updated July 2019