

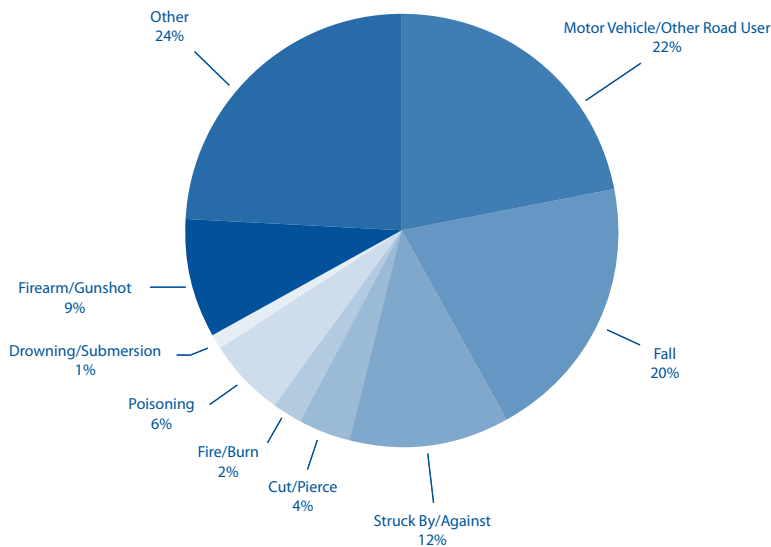
FACTS state injury and violence prevention programs

THE REALITY

- > Despite the fact that many injuries and acts of violence are preventable, they continue to be the leading killer of Americans in the first four decades of life.
- > In 2006, more than 179,000 people died from unintentional and violence-related injuries. Of these deaths, over 51,800 people died as a result of homicide or suicide.
- > Yearly, more than 29.5 million people are treated in emergency rooms as a result of injuries and violence.
- > Hospital emergency departments treat an average of 55 people for unintentional and violence-related injuries every minute.



TOTAL COST OF INJURY BY MECHANISM (\$406 BILLION)



Sources: Centers for Medicare and Medicaid (www.cms.gov) and Finkelstein, E. A., et al., *The incidence and economic burden of injuries in the United States, 2006*.

FACT FACT

In 1998, the National Academy of Science stated that “injury is probably the most under-recognized public health threat facing the nation today.” This statement still rings true today.

COSTS

Injury and violence in a single year will ultimately cost the U.S. \$406 billion:

- > \$80.2 billion in medical costs (6% of total health expenditures)
- > \$326 billion in lost productivity
- > Of the \$406 billion:
 - Fatal fire and burn injuries cost \$3.1 billion.
 - Injuries as a result of falls cost \$80.9 billion.

INJURY AND VIOLENCE PREVENTION SAVES LIVES

Over the years, public health efforts to prevent injuries have saved lives.

Between 1966 and 1990, 240,000 lives were saved because of injury prevention efforts that include improved motor vehicle and highway designs, increased use of safety belts and motorcycle helmets, and enforcement of laws regarding speeding and driving under the influence.

Violence prevention efforts, such as home visitation programs, have been integral in saving lives. Early childhood home visitation has been shown to prevent child maltreatment in high-risk families. A systematic review of published studies found that home visitation resulted in a 40% reduction in child maltreatment episodes.



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PROGRAMS IN ACTION

With adequate resources and effective collaborative partnerships, state injury and violence prevention programs can significantly lower the burden of injury. Nationwide, state programs have been successful in reducing injuries and violence through their efforts to:

- > *Implement and evaluate injury and violence prevention programs.* The Maryland Department of Health and Mental Hygiene, the Maryland State Department of Education, and individual school systems have developed the Sexual Harassment Assault Prevention Program. The collaboration improved a state-mandated school health curriculum by including sexual violence prevention in the health programs of funded schools. An evaluation of the program has shown significant increases in students' sense of safety, comfort in the school system, and general awareness of sexual violence.
- > *Educate policymakers using trend data.* States have demonstrated success in:
 - Strengthening existing state Graduated Driver's Licensing systems.
 - Defending state motorcycle helmet laws and establishing bicycle helmet laws.
 - Legislating the creation of statewide coalitions on elderly falls prevention.
 - Enabling policymakers and community leaders to make informed decisions about violence prevention needs, potential strategies, and programs by using data from the National Violent Death Reporting System.
- > *Provide technical assistance and training.* Programs in every state, Washington D.C., Puerto Rico, and seven territories provide assistance to strengthen sexual violence prevention efforts through educational programs conducted by rape crisis centers, state sexual assault coalitions, and other public and private entities.
- > *Engage the corporate community.* The Hawaii State Department of Health collaborated with retail stores and supermarkets with in-store pharmacies to conduct free medication reviews for seniors to check for medicines that could cause or contribute to a fall.

CORE COMPONENTS

The State and Territorial Injury Prevention Directors Association (STIPDA) has defined five core components for injury and violence prevention programs including:

- > Building a solid infrastructure for injury prevention.
- > Collecting and analyzing injury data.
- > Designing, implementing, and evaluating interventions.
- > Providing technical support and training.
- > Affecting public policy, including educating policy makers.

FUTURE OPPORTUNITIES

The U.S. Centers for Disease Control and Prevention currently funds injury and violence prevention programs in 30 states. Although much has been done across the United States, every state needs comprehensive injury and violence prevention programs that are grounded in a public health approach and located within a state health department. These programs are necessary to provide direction, coordinate and find common ground among partners, and make the best use of limited prevention resources. Future opportunities include:

- > Changing public perceptions so that injury and violence prevention become a recognized component of general health.
- > Expanding and stabilizing resources for state injury and violence prevention programs.
- > Disseminating proven injury and violence prevention strategies, with a focus on persons at highest risk.
- > Strengthening existing injury and violence prevention data collection and monitoring activities to inform prevention efforts.

FACT FACT

At every age, from the earliest days to the golden years, Americans are at risk for injury and the disability and death. No age is a "safe" age when it comes to injury and violence.



CONTACT CDC
Centers for Disease Control and Prevention
National Center for Injury Prevention and Control (NCIPC)
Call: 1.800.CDC-INFO (232-4636) | TTY: 1.888.232.6348

FOR MORE INFORMATION AND DATA SOURCES
www.cdc.gov/injury



Developed by the State and Territorial Injury Prevention Directors Association (STIPDA)
www.stipda.org