Shannon Cosgrove, Director of Health Policy
University of Illinois at Chicago
School of Public Health
May 2017
“We have made entire communities out to be criminals while victimizing entire other communities”
– Ben Jealous, Former NAACP President
Re-Understanding Violence

Reduces current inequity and promotes understanding

Moralism (not helpful) → Bad People → Bad Choice → Adverse Circumstances (contribute) → TRANSMISSION (exposure) → SCIENCE

CURE VIOLENCE
Violence is a Social Determinant of Health
(and violence negatively affects the other determinants)

Violence → SDOH

Education → Diminished performance, lower attendance, decreased grad. rates
Economic Conditions → Reduced business investment, reduced commercial activity
Health Care System → Higher costs from violent injuries and increased chronic conditions
Built Environment → Unsafe public spaces leading to reduced usage
Community Resources → More resources to public safety; high demand due to trauma
Community Cohesion → Reduced cohesion and sense of collective efficacy
Violence → MORE VIOLENCE

Negative effects of violence on SDOH, including itself

Plus violence causes even more violence
## Violence Disparity

### Getting WORSE

#### Heckler Report

#### Health Disparity

<table>
<thead>
<tr>
<th>Health Issue</th>
<th>1985</th>
<th>2013</th>
<th>Disparity Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer</td>
<td>30% Higher</td>
<td>30% Higher</td>
<td>No change</td>
</tr>
<tr>
<td>Cardio/Stroke</td>
<td>20% Higher</td>
<td>30% Higher</td>
<td>Up 50%</td>
</tr>
<tr>
<td>Cirrhosis</td>
<td>70% Higher</td>
<td>30% Higher</td>
<td>Down 57%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>110% Higher</td>
<td>100% Higher</td>
<td>Down 9%</td>
</tr>
<tr>
<td>Infant Mortality</td>
<td>110% Higher</td>
<td>110% Higher</td>
<td>No change</td>
</tr>
<tr>
<td>Accident (&amp; homicide)</td>
<td>70% Higher</td>
<td>10% Higher</td>
<td>Down 85%</td>
</tr>
<tr>
<td>Homicide</td>
<td>400% Higher</td>
<td>470% Higher</td>
<td>Up 18%</td>
</tr>
</tbody>
</table>
NEW YORK CITY  (as of March 31st)

Queensbridge: Currently over 365 days without a shooting

Eastchester: No shootings or homicides since the initiative began

Morrisania: No homicides in 2015 or 2016 or 2017

South Bronx: No shootings or homicides in the past 9 months
Violence is a Health Issue
Violence is among the most significant health problems not only because of death and injury, but also because of the harms, fear, and trauma caused to families and communities. It leads to a broad range of mental and physical health problems that disproportionately impact children, youth, and communities of color. In communities around the country, health approaches—integrated across sectors—are working to save lives. All communities can and should benefit from a drastic reduction of violence. This framework was created by the Violence as a Health Issue Collaborative, which is led by David Satcher, MD, MPH; Al Sommer, MD, MH; and Gary Slutkin, MD and includes representatives from over 60 cities, 40 national organizations and over 400 health and community practitioners. The framework will guide local government and organizational leaders to improve and systematize their efforts in violence prevention—making our country safer, healthier, and more equitable.

- Ensuring an Equity Lens
  - Changing perceptions
  - Increasing accountability
  - Aligning resources in partnership with communities

- Schools of Public Health
  - Preparing Movement Leaders with Curricula and Research

- Public Health Departments
  - Coordinating, Developing, and Financing the Violence as a Health Issue Movement

- Hospitals as Anchor Institutions
  - Working for Their Communities

- Community Organizations and Community Residents
  - Four Steps to Safer Neighborhoods

- Emergency Departments and Acute Care Facilities
  - Identifying and Supporting Individuals and Families at Risk

- Mental Health
  - Better Connection Strategies for Healthier Communities

- Academic Medical Centers
  - Research Done Right

- Faith-Based Institutions
  - Preaching Violence Prevention

- Social Service Providers
  - Utilizing Community-Centered Practices to Address Violence

- Community Information Systems
  - Monitoring Trends of Violence Nationwide

- Law Enforcement and the Justice System
  - Supporting Public Health Contributions and Ensuring Accountability Towards a Healthy/Equitable System

- Behavioral Health Care
  - Integrated Medical and Behavioral Health Systems

- Early Childhood Development Centers and the Child Welfare System
  - Starting off Strong

- Primary Care
  - Establishing a Safe Environment and Making Connections

- Media
  - Changing the Dominant Narrative

Outreach workers, violence interrupters, hospital responders, and community health workers
A BILL

To amend the Public Health Service Act to establish a National Center for Violence Prevention, and for other purposes.

1. Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled:

2. Section 2400. Title of measure.

3. Section 2400. Scope of continuously funded, violence prevention, legal, public, and environmental health.

4. Section 2400. Scope of funding for the Center.


7. Section 2400. Date of commencement.

8. Section 2400. Amendment of this Act.
Thank You!

CureViolence
@CureViolence
www.cureviolence.org
skc1@uic.edu