May 19, 2020

The Honorable Mitch McConnell
Majority Leader
U.S. Senate
317 Russell Senate Office Building
Washington, DC 20510

The Honorable Chuck Schumer
Minority Leader
U.S. Senate
322 Hart Senate Office Building
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
1236 Longworth House Office Building
Washington, DC 20515

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
2468 Rayburn House Office Building
Washington, DC 20515

Dear Majority Leader McConnell, Speaker Pelosi, Minority Leader Schumer, and Minority Leader McCarthy:

The undersigned members of the Injury and Violence Prevention Network ask that, as you consider the next emergency supplemental funding package to bolster our nation’s response efforts to the COVID-19 pandemic, you recognize the need to respond to and prevent injuries and violence that are adversely and inequitably impacting communities across the country since the start of the outbreak.

Drastic societal changes in everyday life – including school and office closures, “shelter in place” orders, and “social distancing” measures – have collectively led to an increased incidence of injuries and violence and have taken a tremendous toll on protective factors like economic stability, educational opportunity, community connectedness, and mental health. Reports and qualitative data provided by injury and violence prevention experts illustrate a rise in injuries (including suicides, burns, firearm-related injuries, domestic violence, and child abuse and neglect), which are disproportionately affecting vulnerable families and communities. Data compiled by Safe Kids Worldwide show that child drownings in Florida have doubled compared to this same time last year – a tragic outcome for children who have in some cases been unsupervised while their parents work during the pandemic.

The federal government’s injury and violence prevention agenda is led by the Centers for Disease Control and Prevention’s (CDC) National Center for Injury Prevention and Control (NCIPC). Existing programs such as the Core State Violence and Injury Prevention Program (Core SVIPP), Suicide Prevention, Child Maltreatment Prevention, Child Sexual Abuse Prevention, Adverse Childhood Experiences, National Violent Death Reporting System (NVDRS), Injury Control Research Centers, and Elderly Falls Prevention are uniquely positioned to expand their reach and impact in communities that today are at increased risk of injuries and violence.

NCIPC-funded programs are critical to our nation’s ability to prevent injuries and violence. Collectively, they advance public health surveillance, program implementation, and evaluation efforts. The COVID-19 pandemic has highlighted the need to strengthen national investments in injury and violence prevention programs. We must ensure that all states and territories have the staff, resources, and readiness necessary to undertake critical public health actions to respond to and prevent injuries and violence, including: conducting timely public health surveillance of fatal and non-fatal injuries; collaborating with
local, tribal, state, and national partners; and implementing and evaluating strategies focused on health equity and based on the best available prevention science.

Efforts to address injury and violence prevention have long garnered bipartisan and bicameral support. Annually, injuries and violence cost the U.S. $840 billion, which is equal to 85% of the annual federal deficit. Investments can be made today to ensure that the COVID-19 pandemic does not further exacerbate the socioeconomic toll of injuries and violence.

The IVPN calls on you to recognize and support ongoing efforts to address the increased prevalence of injuries and violence that are inequitably impacting communities across the country, particularly during the outbreak. Please feel free to contact Paul Bonta, Director of Government Relations for the Safe States Alliance, at paul.bonta@safestates.org should you have any questions or wish to discuss this further.

Sincerely,

American Academy of Pediatrics
American Foundation for Suicide Prevention
American Psychological Association
American Public Health Association
Association of Maternal & Child Health Programs
Association of State and Territorial Health Officials
American Trauma Society
Brain Injury Association of America
Child Injury Prevention Alliance
Children’s Hospital Association
Committee for Children
KidsAndCars.org
Kids In Danger
Moore Center for the Prevention of Child Sexual Abuse at the Johns Hopkins Bloomberg School of Public Health
National Alliance to End Sexual Violence
National Association of State Emergency Medical Services Officials
National Association of State Head Injury Administrators
National Center on Domestic and Sexual Violence
National Prevention Science Coalition
National Safety Council
Prevent Child Abuse America
Prevention Institute
Safe Kids Worldwide
Safe States Alliance
Society for Public Health Education
YMCA of the USA