

Progress has been made in reducing rates of violence in US; overall numbers remain high

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Even though homicide and assault rates have decreased in the U.S. in recent years, the number of these and other types of violent acts remains high, according to a report in the August 4 issue of *JAMA*, a violence/human rights theme issue. The authors write that multiple strategies exist to improve interpersonal violence prevention efforts, and health care providers are an important part of this solution.

Interpersonal violence is a pervasive public health, social, and developmental threat that affects millions of U.S. residents each year. It is a leading cause of death in the U.S., particularly among children, adolescents and young adults. Exposure to violence can cause immediate physical wounds that clinicians recognize and treat but can also result in long-lasting mental and physical health conditions that are often less apparent to <u>health care providers</u>. Surveillance systems, programs, and policies to address violence often lack broad, cross-sector collaboration, and there is limited awareness of effective strategies to prevent violence, according to background information in the article.

Steven A. Sumner, M.D., M.Sc., of the Centers for Disease Control and Prevention, Atlanta, and colleagues examined the burden of <u>interpersonal violence</u> in the United States and challenges to violence prevention efforts and sought to identify prevention opportunities. The researchers reviewed data from various health and law enforcement <u>surveillance systems</u> (listed at the end of this news release).

The researchers found that homicide rates have decreased from a peak



of 10.7 per 100,000 persons in 1980 to 5.1 per 100,000 in 2013. Aggravated assault rates have decreased from a peak of 442 per 100,000 in 1992 to 242 per 100,000 in 2012. Despite the decrease in these rates, annually there are more than 16,000 homicides and 1.6 million nonfatal assault injuries requiring treatment in emergency departments. More than 12 million adults experience intimate partner violence annually and more than 10 million children younger than 18 years of age experience some form of maltreatment from a caregiver, ranging from neglect to sexual abuse, but only a small percentage of these violent incidents are reported to law enforcement, health care clinicians, or child protective agencies.

The researchers write that exposure to violence increases vulnerability to a broad range of mental and physical health problems over the life course; for example, meta-analyses indicate that exposure to physical abuse in childhood is associated with a 54 percent increased odds of depressive disorder, a 78 percent increased odds of sexually transmitted illness or risky sexual behavior, and a 32 percent increased odds of obesity.

Rates of violence vary by age, geographic location, sex, and race/ethnicity, and significant disparities exist. Homicide is the leading cause of death for non-Hispanic blacks from age 1 through 44 years, whereas it is the fifth most common cause of death among non-Hispanic whites in this age range. Additionally, efforts to understand, prevent, and respond to interpersonal violence have often neglected the degree to which many forms of violence are interconnected at the individual level, across relationships and communities, and even intergenerationally.

The authors write that the most effective violence prevention strategies include parent and family-focused programs, early childhood education, school-based programs, therapeutic or counseling interventions, and public policy. For example, a systematic review of early childhood home



visitation programs found a 39 percent reduction in episodes of child maltreatment in intervention participants compared with control participants.

"The scientific literature indicates quite clearly that preventing interpersonal violence is strategic from a health and public health perspective. It is strategic because of the consistently documented high levels of violence to which young children, adolescents, and young adult women and men are exposed. Furthermore, exposure to violence plays an important role, not just in causing physical injuries and homicide, but also in the etiology of mental illness, chronic disease, and infectious diseases such as HIV. Thus, preventing exposure to violence can have downstream effects on a broad range of health problems."

"Finally, there is a substantial and rapidly growing evidence base on what works to prevent violence. This evidence suggests that priority should be given to interventions that can affect multiple forms of violence, particularly those that seek to prevent violence among children and youth. The effects of violence and the probability of involvement in future <u>violence</u> are dose dependent; thus, considerable gains can be made by early intervention," the authors write.

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