**Testimony from Paul Bonta, Chair, National Violence Prevention Network**
**Concerning the Center for Disease Control and Prevention FY2017 Appropriations**

*Submitted for the Record to the House Appropriations Subcommittee on*
*Labor, Health and Human Services, Education, and Related Agencies – April 15, 2016*

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Thank you for this opportunity to submit testimony in support of increased funding for the National Violent Death Reporting System (NVDRS), which is administered by the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention (CDC). The National Violence Prevention Network, a broad and diverse alliance of health and welfare, suicide and violence prevention, and law enforcement advocates supports increasing the FY 2017 funding level to $25 million to allow for nationwide expansion of the NVDRS program including all 50 states, District of Columbia and U.S territories. FY 2016 NVDRS funding is $16 million.

## BACKGROUND

Each year, about 57,000 Americans die violent deaths.[1] In addition, an average of 117 people[2] (22 of which are military veterans[3]) take their own lives each day. Violence-related death and injuries cost the United States $107 billion in medical care and loss in productivity.[4]

The NVDRS program makes better use of data that are already being collected by health, law enforcement, and social service agencies. The NVDRS program, in fact, does not require the collection of any new data. Instead it links together information that, when kept in separate compartments, is much less valuable as a tool to characterize and monitor violent deaths. With a clearer picture of why violent deaths occurs, law enforcement, public health officials and others can work together more effectively to identify those at risk and target effective preventive services.

Currently, NVDRS funding levels only allow the program to operate in 32 states[5] with 9 additional states having expressed an interest in joining once new funding becomes available. While NVDRS is beginning to strengthen violence and suicide prevention efforts in the 32 participating states, non-participating states continue to miss out on the benefits of this important public health surveillance program.

## NVDRS IN ACTION

Opioid deaths are a serious public health issue. Drug overdose deaths are the leading cause of injury deaths in American.[6] It is important to invest in surveillance of opioid addiction to determine the extent of the problem and implement treatment options and community-based prevention strategies. NVDRS has already proven to be an invaluable tool in many states like Alaska, Indiana and Utah that collect information, through toxicology reports, about prescription-opioid overdose associated with violent deaths. Combined 2010 NVDRS data showed that 24% of violent deaths tested were positive for opiates.[7] Importantly, surveillance is included as one of the primary recommendations in a report published by Johns Hopkins

Bloomberg School of Public Health that promotes an evidence-based response to the prescription-opioid epidemic. [8]

Children are often the most vulnerable as they are dependent on their caregivers during infancy and early childhood. Sadly, NVDRS data has shown that young children are at the greatest risk of homicide in their own homes. Combined NVDRS data from **17 of the 32 states that currently participate in NVDRS,** showed that African American children aged four years and under are more than three times as likely to be victims of homicide than Caucasian children,[9] and that homicides of children aged four and under are most often committed by a parent or caregiver in the home. The data further notes that household items, or "weapons of opportunity," were most commonly used, suggesting that poor stress responses may be factors in these deaths. Knowing the demographics and methods of child homicides can lead to more effective, targeted prevention programs.

Intimate partner violence (IPV) is another issue where NVDRS is proving its value. While IPV has declined along with other trends in crime over the past decade, thousands of Americans still fall victim to it every year. An analysis of intimate partner homicide based on NVDRS data from 16 states shows **that intimate partners represented 80% of intimate partner violence-related homicides victims** and corollary victims (family members, police officers, friends etc…) represented the remaining 20% of victims.[10]

Despite being in its early stages in several states, NVDRS is already providing critical information that is helping law enforcement and public health officials target their resources to those most at risk of intimate partner violence. For example, NVDRS data shows that while occurrences are rare, most murder-suicide victims are current or former intimate partners of the suspect or members of the suspect's family. In addition, NVDRS data indicate that women are about seven times more likely than men to be killed by a spouse, ex-spouse, lover, or former lover, and most of these incidents occurred in the women's homes.[7]

## NVDRS & VA SUICIDES

Although it is preventable, every year more than 42,773 Americans die by suicide and another one million Americans attempt it, costing more than $42 billion in lost wages and work productivity.[2] In the United States today, there is no comprehensive national system to track suicides. However, because NVDRS includes information on all violent deaths – including deaths by suicide – the program can be used to develop effective suicide prevention plans at the community, state, and national levels.

A 2015 study showed that 19.9 % of all veteran deaths between 2001 and 2007 were suicide, with male veterans three times as likely as female veterans to commit suicide.[11] The central collection of such data can be of tremendous value for organizations such as the Department of Veterans Affairs that are working to improve their surveillance of suicides. The types of data collected by NVDRS including gender, blood alcohol content, mental health issues and physical health issues can help prevention programs better identify and treat at-risk individuals.

In addition to veteran suicides, NVDRS data has been crucial in many states like Oregon, Utah, New Jersey and North Carolina in understanding the circumstances surrounding elder suicide. This has allowed the states to collaborate locally and implement programs that target those populations at greatest risk.

## FEDERAL ROLE NEEDED

At an estimated annual cost of $25 million for full implementation, NVDRS is a relatively low-cost program that yields high-quality results. While state-specific information provides enormous value to local public health and law enforcement officials, data from all 50 states, the U.S. territories and the District of Columbia must be obtained to complete the national picture. Aggregating this additional data will allow us to analyze national trends and also more quickly and accurately determine what factors can lead to violent death so that we can devise and disseminate strategies to address those factors.

## STRENGTHENING AND EXPANDING NVDRS IN FY2017

The 2014 Consolidated Appropriations Act recognized the public health utility of NVDRS in preventing violent deaths and increased NVDRS funding by roughly $8 million to facilitate continued expansion of the NVDRS program. The program received an additional $4.7 million in FY2016 for a total of $16 million. The additional $5 million will allow for as many as seven new states to join the current 32 states that participate in NVDRS. The time is now to complete the nation-wide expansion of NVDRS by providing an appropriation of $25 million in FY2017 to place NVDRS in all 50 states and U.S. territories.

We thank you for the opportunity to submit this statement for the record. The investment in NVDRS has already begun to pay off, as NVDRS-funded states are adopting effective violence prevention programs. We believe that national implementation of NVDRS is a wise public health investment that will assist state and national efforts to prevent deaths from domestic violence, veteran suicide, teen suicide, gang violence and other violence that affect communities around the country. We look forward to working with you to complete the nationwide expansion of NVDRS by securing an FY2017 appropriation of $25 million.

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