

Regional Action Plan for Violence and Injury Prevention in the Western Pacific (2016–2020)



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WHO Library Cataloguing-in-Publication Data

Regional action plan for violence and injury prevention in the Western Pacific: 2016–2020

- 1. Guideline. 2. Regional health planning. 3. Violence. 4. Wounds and injuries.
- I. World Health Organization Regional Office for the Western Pacific.

ISBN 978 92 9061 754 9 (NLM Classification: WA420)

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Publications of the World Health Organization are available on the WHO website (www.who.int) or can be purchased from WHO Press: World Health Organization – 20, avenue Appia – 1211 Geneva 27, Switzerland (tel.: +41 22 791 3264; fax: +41 22 791 4857; e-mail: bookorders@who.int).

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ABBREVIATIONS

BAC Blood Alcohol Concentration

CEDAW Convention on the Elimination of All Forms of Discrimination

against Women

CRC Convention on the Rights of the Child

CRPD Convention on the Rights of Persons with Disabilities

ICD International Classification of Diseases

GDP gross domestic product

GSHS Global school-based health survey

SDG Sustainable Development Goals

UHC universal health coverage

VIP Violence and injury prevention

WHO World Health Organization

STEPs Stepwise approach to surveillance

FOREWORD

Violence and injuries kill more than one million people each year in the Western Pacific Region. As the leading cause of death among people 5 to 49 years old, violence and injuries claim more lives than diabetes, diarrhoeal diseases, HIV/AIDS, malaria, respiratory infections and tuberculosis — all together.

Sadly, efforts to prevent and respond to violence and injuries have not matched the magnitude of the problem. Too often injuries are viewed as unforeseeable "accidents" when, in reality, violence and injuries can be predicted and prevented by addressing modifiable risk factors and unsafe environments.

To guide Member States in accelerating evidence-based action to prevent violence and injuries, the sixty-sixth session of the Regional Committee for the Western Pacific endorsed this first-ever *Regional Action Plan for Violence and Injury Prevention in the Western Pacific (2016–2020).* The plan aligns prevention efforts with the Sustainable Development Goals (SDGs) and national public health agenda, calling for national actions that are backed by quality data and coordinated across sectors.

Preventive efforts vary greatly from country to country in the Region. For this reason, some countries have mortality rates for violence and injuries that are among the highest in the world, while others are among the lowest. This disparity makes sharing experiences and lessons learnt between countries crucial to maximize opportunities to scale up violence and injury prevention across the Region.

If Member States do not redouble efforts, the spiral of needless pain and suffering from violence and injury will continue to chip away at productivity and health. We have seen encouraging drops in fatal violence from 2000 to 2014 and in road traffic deaths from 2010 to 2013. But we still have a long way to go to keep the Region's 1.8 billion people safe from preventable violence and injury.

Shin Young-soo, MD, Ph.D.

U. Elin

Regional Director

EXECUTIVE SUMMARY

In the Western Pacific Region, violence and injuries kill more than one million people every year. The major causes include road traffic injuries, falls, drowning, poisoning, interpersonal violence and burns, with 85% of fatal injuries occurring in low- and middle-income countries.

Despite the lives lost, especially among the young and economically active age groups, and the economic consequences associated with these deaths and other non-fatal injuries, the prevention of and response to violence and injuries have not been given adequate priority. The complacency stems from a perception that injuries are "accidents" or the result of "fate" and, therefore, are unlikely to be prevented. Far from being unpredictable, violence and injuries have well-examined determinants and predictors, and violence and injuries can be prevented by addressing modifiable risk factors. Yet, despite evidence from highly cost-effective injury prevention programmes, efforts to protect populations from violence and injuries in most countries are fragmented and poorly resourced. The lack of clarity on institutional mandates results in inadequate capacities and systems (for example for risk assessment and epidemiologic surveillance), impinges on collaboration, and may also be preventing strong leadership on violence and injury prevention.

There is a range of evidence-based approaches that can be adapted by Member States, particularly in low- and middle-income countries.

These interventions include:

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