

Violence Prevention

1979	The United States Surgeon General's Report, <i>Healthy People</i> , identifies violence as one of the 15 priority areas for the nation. The report states that violence can be prevented and should not be ignored in the effort to improve the nation's health.
1980	A landmark Department of Health and Human Services Report – <i>Promoting Health/Preventing Disease: Objectives for the Nation</i> – establishes the first violence prevention objectives for the nation.
1981	CDC epidemiologists begin one of the first collaborative efforts with law enforcement to investigate a series of child murders in Georgia.
1983	CDC establishes the Violence Epidemiology Branch to focus public health efforts on violence prevention.
1985	The Surgeon General's Workshop on Violence and Public Health focuses the attention of the public health world on violence and encourages all health professionals to become involved.
1985	CDC investigates a pattern of suicides in Texas, the first demonstrated use of field epidemiological techniques to identify suicide clusters.
1985	The Report of the Secretary's Task Force on Black and Minority Health is released. The Report underscores the importance of addressing interpersonal violence as a public health problem and identifies homicide as a major contributor to health disparities among African-Americans.
1986	CDC establishes the Division of Injury Epidemiology and Control.
1986	CDC establishes extramural research program to study injuries and violence.
1989	Report of the Secretary's Task Force on Youth Suicide is released.
1990	"Violent and Abusive Behavior" is included as 1 of 22 public health priority areas in Healthy People 2000. It calls for "cooperation and integration across public health, health care, mental health, criminal justice, social service, education, and other relevant sectors."
1990	The Youth Risk Behavior Surveillance System is established by CDC to monitor priority health risk behaviors among adolescents, including violence-related behaviors that contribute markedly to the leading causes of death and disability in the United States.
1992	CDC receives its first congressional appropriations for youth violence prevention.
1993	A special issue of <i>Health Affairs</i> addresses violence as a public health issue – the first special issue to examine violence as a public health problem.
1993	CDC establishes the Division of Violence Prevention, one of three within the newly created National Center for Injury Prevention and Control. The Division leads CDC's efforts to prevent injuries and deaths caused by violence.
1993	CDC publishes <i>The Prevention of Youth Violence: A Framework for Community Action</i> to mobilize communities to effectively address the epidemic of youth violence sweeping the nation.

1994	CDC and the National Institute of Justice collaborate on the National Violence against Women Survey. The survey, implemented in 1995-1996, provides the first national data on the incidence and prevalence of intimate partner violence, sexual violence, and stalking.
1994	Congress passes the Violence Against Women Act which authorizes coordinated community responses to prevent intimate partner violence and state block grants for rape prevention and education. CDC receives appropriations in 1996 to support both efforts.
1996	The World Health Assembly passes a resolution and declares that “violence is a leading worldwide public health problem.”
1996	The National Research Council recommends establishing a Federal Task Force on Violence Against Women with CDC as the lead agency.
1999	The U.S. Surgeon General releases the <i>Call to Action to Prevent Suicide</i> report.
2000	The World Health Organization (WHO) creates the Department of Injuries and Violence Prevention.
2000	CDC receives a congressional appropriation to establish 10 National Academic Centers of Excellence for Youth Violence Prevention.
2001	The U.S. Surgeon General releases a comprehensive report synthesizing the state of knowledge on youth violence and its prevention.
2001	The National Strategy for Suicide Prevention is released by the Department of Health and Human Services.
2001	CDC receives first congressional appropriation for child maltreatment prevention.
2002	CDC and WHO produce the first <i>World Report on Violence and Health</i> – the first comprehensive report on violence as a global public health problem.
2002	CDC establishes Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA), a program to focus on primary prevention of intimate partner violence (IPV).
2002	CDC receives appropriation to establish the National Violent Death Reporting System – the first state-based surveillance system to link data from multiple sources with the goal of enhancing violence prevention efforts. By 2004, the system is in 17 states.
2004	CDC begins placing a greater emphasis on the social ecological model to guide violence prevention efforts.
2006	CDC launches Choose Respect, the first national communication initiative designed to prevent unhealthy relationship behaviors and dating abuse.
2007	CDC publishes a study that estimated the medical and productivity-related costs of violence in the United States exceed \$70 billion each year.
2007	CDC conducts a national survey on violence against children in Swaziland and publishes the findings in <i>The Lancet</i> . Findings become a catalyst for change that lead to a global public-private partnership to end violence against children with a focus on sexual violence against girls (Together for Girls).
2009	CDC launches the VetoViolence website – a free, online, interactive, and engaging site with violence prevention tools, trainings, and resources based on the best available evidence and research. One year later, the VetoViolence Facebook page is launched and becomes the fifth largest CDC Facebook page with nearly 17,000 fans.
2009	CDC launches <i>Dating Matters</i> – a comprehensive teen dating violence prevention initiative for 11-14 year olds living in high-risk urban communities.
2011	CDC releases a report on intimate partner violence, sexual violence and stalking in the United States. The report is based on data from a new surveillance system, the National Intimate Partner and Sexual Violence Survey (NISVS). NISVS was launched by CDC in 2010 with the support of the National Institute of Justice and the Department of Defense.

2010	CDC's Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA) program is reauthorized under the Family Violence and Prevention Services Act. The reauthorizing language formally uses the DELTA name for the first time.
2012	The U.S. Surgeon General and the National Action Alliance release the <i>2012 National Strategy for Suicide Prevention</i> to guide prevention efforts over the next decade.
2013	CDC releases <i>Essentials for Childhood</i> – its strategic framework for creating safe, stable, and nurturing relationships and environments for all children. Five states are funded to implement the framework; 24 other states see the short- and long-term benefits of <i>Essentials</i> and begin implementing the framework without CDC funding.
2014	“Preventing Suicide: A Global Imperative” is released by the World Health Organization. The report is the first of its kind to draw attention to the global problem of suicide.
2014	CDC receives an appropriation to expand the National Violent Death Reporting System from 18 to 32 states. In 2016, with an additional appropriation, the system is expanded to 40 states, DC, and Puerto Rico.
2014	CDC releases <i>Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence</i> to share research on the connections between different forms of violence and how these connections affect communities. In 2016, CDC releases its <i>Strategic Vision for Connecting the Dots</i> in its program, practice, policy, research and communication efforts.
2016	CDC releases a suite of technical packages to help states and communities take advantage of the best available evidence to prevent child abuse and neglect, sexual violence, and youth violence. Technical packages to prevent suicide and intimate partner violence are released the following year.
2016	CDC, in collaboration with multiple UN and international agencies, releases <i>INSPIRE: Seven Strategies for Ending Violence Against Children</i> to advance the adoption of effective strategies to prevent violence against children in countries around the world.
2017	CDC releases a comprehensive report to help states better understand the extent of intimate partner, sexual violence and stalking victimization in their state to guide prevention efforts.
2017	CDC scientists estimate the economic burden of rape in the United States. The results show a staggering lifetime cost to society of \$122,461 per victim for a total lifetime cost to society of nearly \$3.1 trillion (in 2014 dollars).

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