By implementing the priority actions outlined in Safe States Alliance’s Blueprint for a National Injury and Violence Prevention Program, we can start down a path toward eliminating health inequities, increasing resilience, and fulfilling a vision of a nation free from injuries and violence.

1. **Establish a dedicated focus on injury and violence prevention and expand the Core Program to every state and territory in the country to bolster states’ abilities to address ongoing and emerging injury and violence-related priorities.**

   Every state and territory should have the infrastructure to protect communities from the threats of injury and violence. A dedicated, coordinated, and consistent focus on injury and violence prevention can provide critical stability for states and allow them to implement prevention strategies that address the highest areas of burden.

2. **Create a program structure that ensures states of different capacities can start, build upon, and enhance public health actions necessary to prevent injuries and violence.**

   States and territories differ in their public health infrastructure and capabilities and injury and violence priorities. Over the next 10 years, it will be essential to expand the Core Program by providing the resources needed to establish a common baseline of support across states and territories to support robust, coordinated injury and violence prevention efforts.

3. **Integrate health equity as a foundation for the Core Program to address social determinants of health, shared risk and protective factors, and injury conditions that drive inequities.**

   Injuries and violence are inequitably distributed across communities, primarily and adversely impacting vulnerable communities that have been historically marginalized. These communities are more likely to be communities of color that endure high rates of poverty, poor access to education, substandard housing and frequent traumatizing events throughout their lives. By establishing reliable foundational elements, states and territories can focus on reducing the burden of these injury and violence health disparities for these at-risk populations. Communities that lack access to resources and face greater social and economic stressors stand to benefit from better coordinated, more sophisticated public health programming built and delivered through the actions described in this blueprint.
4. Increase federal and state coordination across injury and violence prevention to support the efficient and effective implementation of core components.

Support for injury and violence prevention efforts is available from multiple branches and divisions within the CDC Injury Center, other federal agencies, and some states. Currently, there is opportunity for the Injury Center to coordinate this support and increase the likelihood of maximized outcomes. By increasing coordination, sharing research and knowledge, and aligning strategic approaches and outcomes for injury and violence prevention across sources, stakeholders can more quickly build a national program with a much broader reach and positive impacts on public health infrastructure and preparedness.

5. Ensure states and territories have critical staff roles and the skills needed to lead and support community-based injury and violence prevention efforts.

A well-trained, effective and sustained workforce that reflects the communities it serves – whether hired internally within the health department or contracted as external support – is the foundation for success in reaching injury and violence prevention program objectives.

6. Given its purpose and goal, Core Program evaluation must measure infrastructure improvements and state and territorial readiness.

A national injury and violence prevention program grounded on the Core Program should be measured by its ability to ensure states and territories have the essential components necessary to strengthen and expand their work.

7. Incorporate requirements for policy evaluation and other essential activities within the Core Program to allow states to investigate and convey relationships between policy strategies and population health outcomes.

The role of federal, state and local government in public health is inextricably linked to policy. Policies are most likely to have positive, population-level impacts on injury and violence-related morbidity and mortality compared to other strategies. As the Core Program evolves into a national program, it should prioritize policy evaluation and build an evidence base for the most effective and efficient methods of improving population health.

8. Develop a plan to drive strategic communication focused on the value of injury and violence prevention infrastructure in addressing ongoing and emerging public health threats.

Coordinated organizing and communication efforts based on clear priorities, goals, and program outcomes will be key to engaging a wide range of audiences and stakeholders in a national injury and violence prevention program. Safe States Alliance, state health departments, and other stakeholders should partner to develop clear and consistent messages regarding the potential of a national program to prevent injuries and violence in every state and territory to decrease suffering, lower costs, and address health inequities in injury and violence prevention.