RECOMMENDATIONS

Based on the key findings of the evaluation, the Safe States Alliance developed the following recommendations for national partners, health departments, and IVP programs to buoy IVP professionals as they continue to navigate the COVID-19 pandemic and ensure IVP is better-positioned to navigate future public health emergencies.

1. Develop an IVP standard definition of equity and actionable guidance to promote upstream, collaborative solutions to address systemic health inequities

**Actions for National Partners (Safe States, CDC, and Policymakers)**

- Collaborate multi-sector partners to develop an IVP standard definition of equity and actionable guidance to address inequities
- Integrate health and racial equity into all federally-funded programs that support IVP (e.g., Core State Violence Program, Rape Prevention and Education Program, National Violent Death Reporting System, Essentials for Childhood, Overdose Action, etc.)
- Develop and advocate for policies that provide funds or mandate reimbursement for efforts to address inequities
- Infuse health equity as a foundation for ongoing and planned activities across organizational portfolios
- Provide technical assistance on how to make equity a foundational component, including prioritizing lived experiences and community voices for planned activities across organizations

**Actions for State/Local Health Departments and Community Partners (Hospital-based IVP and Community-based Organizations)**

- Implement guidance as appropriate given local contextual conditions
- Share guidance across regional, state, and local stakeholders to maximize buy-in and coordination
- Infuse health equity as a foundation for ongoing and planned activities across organizational activities
Advocate for adequate and consistent IVP funding so every state, territory, and corresponding local and tribal entities can build a coordinated, stable, and sustainable infrastructure.

**Actions for National Partners (Safe States, CDC, and Policymakers)**

- Strategically and proactively advocate for adequate and consistent funding for IVP in every state and territory
- Deliver funding in manner that allows states and territories of different capacities to start, build upon, and enhance public health actions necessary to prevent injuries and violence in their unique contexts
- Develop a plan to dedicate financial and human resources to driving strategic communication focused on the role, potential impact, and value of IVP infrastructure in addressing ongoing and emerging public health threats.

**Actions for State/Local Health Departments and Community Partners (Hospital-based IVP and Community-based Organizations)**

- Educate policymakers and national stakeholders on the scope of IVP efforts, needs, and uses for expanded support
- Disseminate stories of success and challenges met throughout the spectrum of IVP service delivery to highlight critical need for ongoing and sustained expansion
- Coordinate with stakeholders across regional, state, and local jurisdictions to align efforts as they grow
- Develop policies and practices to ensure funding is distributed equitably and sustainably from state to local entities

Recruit and retain a robust and diverse IVP workforce that can sustain core functions while responding to public health emergencies

**Actions for National Partners (Safe States, CDC, and Policymakers)**

- Develop and advocate for policies that facilitate the maintenance of a well-resourced and diverse workforce

**Actions for State/Local Health Departments and Community Partners (Hospital-based IVP and Community-based Organizations)**

- Ensure staff roles and skills enable states and territories to lead and support community-based injury and violence prevention
- Prioritize prevention, particularly at the community level, rather than trauma mitigation or clinical cost reduction
- Facilitate availability, access, and delivery of professional development for IVP workers
- Cultivate positive workplace culture that prioritizes worker safety and self-care
- Identify the causes of short- and long-term impacts of burnout and implement strategies to ameliorate them.
Support the IVP system to adapt to changing conditions in the workplace and the communities it serves.

Actions for National Partners (Safe States, CDC, and Policymakers)

- Develop mechanisms to rapidly facilitate uptake of effective adaptations in workplace environments and community programs.
- Fund evaluation of adaptations so states and territories can learn how to apply them efficiently and effectively.
- Expeditiously deliver guidance and support to navigate public health emergencies.

Actions for State/Local Health Departments and Community Partners (Hospital-based IVP and Community-based Organizations)

- Increase state and local/regional coordination across IVP programs to facilitate dissemination of locally developed adaptations.
- Support workers to function in, and transition seamlessly between, face-to-face and virtual formats.
- Ensure organizational policies give staff the tools, resources, and flexibility to succeed across changing conditions.
- Provide continuous professional development and resources to increase IVP staff capacity to understand the root causes of inequities and implement upstream solutions.