

Healthy People 2020 Summary of Objectives

Injury and Violence Prevention

Number Objective Short Title

Injury Prevention

IVP-1	Total injury
IVP-2	Traumatic brain injury
IVP-3	Traumatic spinal cord injury
IVP-4	Child fatality review of child deaths due to external causes
IVP-5	Child fatality review of sudden and unexpected infant deaths
IVP-6	Emergency department routine E-code collection
IVP-7	Hospital discharge routine E-code collection
IVP-8	Trauma care access
IVP-9	Poisoning deaths
IVP-10	Nonfatal poisonings
IVP-11	Unintentional injury deaths
IVP-12	Nonfatal unintentional injuries
IVP-13	Deaths from motor vehicle crashes
IVP-14	Nonfatal injuries from motor vehicle crashes
IVP-15	Safety belt use
IVP-16	Age-appropriate child restraint use
IVP-17	Graduated driver licensing laws
IVP-18	Pedestrian deaths
IVP-19	Nonfatal pedestrian injuries
IVP-20	Pedalcyclist deaths
IVP-21	Bicycle helmet laws
IVP-22	Motorcycle helmet use

- IVP-23 Deaths from falls
- IVP-24 Unintentional suffocation deaths
- IVP-25 Drownings
- IVP-26 Sports and recreation injuries
- IVP-27 Protective gear in school physical activities
- IVP-28 Residential fire deaths

Violence Prevention

- IVP-29 Homicides
- IVP-30 Firearm-related deaths
- IVP-31 Nonfatal firearm-related injuries
- IVP-32 Nonfatal physical assault injuries
- IVP-33 Physical assaults
- IVP-34 Physical fighting among adolescents
- IVP-35 Bullying among adolescents
- IVP-36 Weapon carrying by adolescents on school property
- IVP-37 Child maltreatment deaths
- IVP-38 Nonfatal child maltreatment
- IVP-39 Intimate partner violence
- IVP-40 Sexual violence
- IVP-41 Nonfatal intentional self-harm injuries
- IVP-42 Children's exposure to violence
- IVP-43 Violent death surveillance system

Topic Area: Injury and Violence Prevention

Injury Prevention

IVP-1: Reduce fatal and nonfatal injuries.

IVP-1.1.Reduce fatal injuries.

Target: 53.3 deaths per 100,000 population.

Baseline: 59.2 deaths per 100,000 population were caused by injuries in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP-1.2 Reduce hospitalization for nonfatal injuries.

Target: 555.8 hospitalizations per 100,000 population.

Baseline: 617.6 hospitalizations for nonfatal injuries per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Hospital Discharge Survey (NHDS), CDC, NCHS.

IVP-1.3 Reduce emergency department visits for nonfatal injuries.

Target: 7,533.4 emergency department visits per 100,000 population.

Baseline: 8,370.4 emergency department for nonfatal injuries per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data sources: National Hospital Ambulatory Medical Care Survey (NHAMCS), CDC, NCHS.

IVP-2: Reduce fatal and nonfatal traumatic brain injuries.

IVP-2.1 Reduce fatal traumatic brain injuries.

Target: 15.6 deaths per 100,000 population.

Baseline: 17.3 deaths per 100,000 population were caused by traumatic brain injuries in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS-M), CDC, NCHS.

IVP–2.2 Reduce hospitalization for nonfatal traumatic brain injuries.

Target: 77.0 hospitalizations per 100,000 population.

Baseline: 85.6 hospitalizations for nonfatal traumatic brain injuries per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Hospital Discharge Survey (NHDS), CDC, NCHS.

IVP–2.3 Reduce emergency department visits for nonfatal traumatic brain injuries.

Target: 366.5 emergency department visits per 100,000 population.

Baseline: 407.2 emergency department visits for nonfatal traumatic brain injuries per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data sources: National Hospital Ambulatory Medical Care Survey (NHAMCS), CDC, NCHS.

IVP–3: Reduce fatal and nonfatal spinal cord injuries.

IVP–3.1 Reduce fatal spinal cord injuries.

Target: 0.48 deaths per 100,000 population.

Baseline: 0.53 deaths per 100,000 population were caused by spinal cord injuries in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–3.2 Reduce hospitalization for nonfatal traumatic spinal cord injuries.

Target: 3.2 hospitalizations per 100,000 population.

Baseline: 3.6 hospitalizations for nonfatal spinal cord injuries per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Hospital Discharge Survey (NHDS), CDC, NCHS.

IVP-4: (Developmental) Increase the number of States and the District of Columbia where 90 percent of deaths among children aged 17 years and under that are due to external causes are reviewed by a child fatality review team.

Potential data sources: National Center for Child Death Review; National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP-5: (Developmental) Increase the number of States and the District of Columbia where 90 percent of sudden and unexpected deaths to infants are reviewed by a child fatality review team.

Potential data sources: National Center for Child Death Review; National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP-6: Increase the proportion of States and the District of Columbia with statewide emergency department data systems that routinely collect external-cause-of injury codes for 90 percent or more of injury-related visits.

Target: 85.0 percent.

Baseline: 75.0 percent of States had statewide emergency department data systems that routinely collected external-cause-of injury codes for 90 percent or more of injury-related visits (21 of 28 participating States in HCUP SEDD) in 2008.

Target setting method: Threshold analysis.

Data source: Healthcare Cost and Utilization Project State Emergency Department Databases (HCUP SEDD).

IVP-7: Increase the proportion of States and the District of Columbia with statewide hospital discharge data systems that routinely collect external-cause-of injury codes for 90 percent or more of injury-related discharges.

Target: 85.0 percent.

Baseline: 66.7 percent of States had statewide hospital discharge data systems that routinely collect external-cause-of injury codes for 90 percent or more of injury-related discharges (28 of 42 participating States in HCUP SID) in 2008.

Target setting method: Threshold analysis.

Data source: Healthcare Cost and Utilization Project State Inpatient Databases (HCUP SIDS).

IVP–8: Increase access to trauma care in the United States.

IVP–8.1 Proportion of the population residing within the continental United States with access to trauma care.

Target: 91.4 percent.

Baseline: 83.1 percent of the population residing within the continental United States had access to trauma care in 2009.

Target setting method: 10 percent improvement.

Data sources: Trauma Information Exchange Program, American Trauma Society.

IVP–8.2 Proportion of the land mass of the continental United States with access to trauma care.

Target: 31.6 percent.

Baseline: 28.7 percent of the land mass of the continental United States had access to trauma care in 2009.

Target setting method: 10 percent improvement.

Data sources: Trauma Information Exchange Program, American Trauma Society.

IVP–9: Prevent an increase in the rate of poisoning deaths.

IVP–9.1 All persons.

Target: 13.1 deaths per 100,000 population.

Baseline: 13.1 deaths per 100,000 population were caused by poisonings in 2007 (age adjusted to the year 2000 standard population).

Target setting method: Maintain the baseline rate.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–9.2 Persons aged 35 to 54 years.

Target: 25.5 deaths per 100,000 population.

Baseline: 25.5 deaths per 100,000 population aged 35 to 54 years were caused by poisonings in 2007.

Target setting method: Maintain the baseline rate.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–9.3 Unintentional or undetermined intent among all persons.

Target: 11.1 deaths per 100,000 population.

Baseline: 11.1 deaths per 100,000 population were caused by unintentional and undetermined poisonings in 2007 (age adjusted to the year 2000 standard population).

Target setting method: Maintain the baseline rate.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–9.4 Unintentional or undetermined intent among persons aged 35 to 54 years.

Target: 21.6 deaths per 100,000 population.

Baseline: 21.6 deaths per 100,000 population aged 35 to 54 years were caused by unintentional and undetermined poisonings in 2007.

Target setting method: Maintain the baseline rate.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–10: Prevent an increase in the rate of nonfatal poisonings.

Target: 304.4 nonfatal poisonings per 100,000 population.

Baseline: 304.4 nonfatal poisonings per 100,000 population occurred in 2008 (age adjusted to the year 2000 standard population).

Target setting method: Maintain the baseline rate.

Data source: National Electronic Injury Surveillance System–All Injury Program (NEISS–AIP), CDC, NCIPC, US Consumer Product Safety Commission (CPSC).

IVP–11: Reduce unintentional injury deaths.

Target: 36.0 deaths per 100,000 population.

Baseline: 40.0 deaths per 100,000 population were caused by unintentional injuries in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–12: Reduce nonfatal unintentional injuries.

Target: 8,297.4 injuries per 100,000 population.

Baseline: 9,219.3 emergency department visits for nonfatal unintentional injuries per 100,000 population occurred in 2008 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Electronic Injury Surveillance System–All Injury Program (NEISS–AIP), CDC, NCIPC, US Consumer Product Safety Commission (CPSC).

IVP–13: Reduce motor vehicle crash-related deaths.

IVP–13.1 Deaths per 100,000 population.

Target: 12.4 deaths per 100,000 population.

Baseline: 13.8 deaths per 100,000 population were caused by motor vehicle crashes in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–13.2 Deaths per 100 million vehicle miles traveled.

Target: 1.2 deaths per 100 million vehicle miles traveled.

Baseline: 1.3 motor vehicle crash-related deaths per 100 million vehicle miles traveled occurred in 2008.

Target setting method: 10 percent improvement.

Data source: Fatality Analysis Reporting System (FARS), DOT, NHTSA.

IVP–14: Reduce nonfatal motor vehicle crash-related injuries.

Target: 694.4 nonfatal injuries per 100,000 population.

Baseline: 771.5 nonfatal injuries per 100,000 population were caused by motor vehicle crashes in 2008.

Target setting method: 10 percent improvement.

Data source: General Estimates System (GES), DOT, NHTSA.

IVP–15: Increase use of safety belts.

Target: 92.4 percent.

Baseline: 84.0 percent of motor vehicle drivers and right-front seat passengers used safety belts in 2009.

Target setting method: 10 percent improvement.

Data sources: National Occupant Protection Use Survey (NOPUS), DOT, NHTSA..

IVP-16: Increase age-appropriate vehicle restraint system use in children.

IVP-16.1 Birth to 12 months.

Target: 95 percent.

Baseline: 86 percent of children aged 0 to 12 months were restrained in rear-facing child safety seats in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey of the Use of Booster Seats (NSUBS), DOT, NHTSA.

IVP-16.2 Children aged 1 to 3 years.

Target: 79 percent.

Baseline: 72 percent of children aged 1 to 3 years were restrained in front-facing child safety seats in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey of the Use of Booster Seats (NSUBS), DOT, NHTSA.

IVP-16.3 Children aged 4 to 7 years.

Target: 47 percent.

Baseline: 43 percent of children aged 4 to 7 years were restrained in booster seats in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey of the Use of Booster Seats (NSUBS), DOT, NHTSA.

IVP-16.4 Children aged 8 to 12 years.

Target: 86 percent.

Baseline: 78 percent of children aged 8 to 12 years used safety belts in 2008.

Target setting method: 10 percent improvement.

Data source: National Survey of the Use of Booster Seats (NSUBS), DOT, NHTSA.

IVP-17: Increase the number of States and the District of Columbia with “good” graduated driver licensing (GDL) laws.

Target: 51 States (including the District of Columbia).

Baseline: 35 States (including the District of Columbia) had “good” graduated driver licensing laws in 2009.

Target setting method: Trend analysis and total coverage.

Data source: U.S. Licensing Systems for Young Drivers, Insurance Institute for Highway Safety.

IVP-18: Reduce pedestrian deaths on public roads.

Target: 1.3 deaths per 100,000 population.

Baseline: 1.4 pedestrian deaths per 100,000 population occurred on public roads in 2008.

Target setting method: 10 percent improvement.

Data source: Fatality Analysis Reporting System (FARS), DOT, NHTSA.

IVP-19: Reduce nonfatal pedestrian injuries on public roads.

Target: 20.3 injuries per 100,000 population.

Baseline: 22.6 nonfatal pedestrian injuries per 100,000 population occurred on public roads in 2008.

Target setting method: 10 percent improvement.

Data source: General Estimates System (GES), DOT, NHTSA.

IVP-20: Reduce pedalcyclist deaths on public roads.

Target: 0.22 deaths per 100,000 population.

Baseline: 0.24 pedalcyclist deaths per 100,000 population occurred on public roads in 2008.

Target setting method: 10 percent improvement.

Data source: Fatality Analysis Reporting System (FARS), DOT, NHTSA.

IVP-21: Increase the number of States and the District of Columbia with laws requiring bicycle helmets for bicycle riders.

Target: 27 (including District of Columbia).

Baseline: 19 States (including the District of Columbia) had laws requiring bicycle helmets for bicycle riders under age 15 years in 2009.

Target setting method: Trend analysis.

Data source: Bicycle Helmet Safety Institute.

IVP–22: Increase the proportion of motorcycle operators and passengers using helmets.

Target: 73.7 percent.

Baseline: 67.0 percent of all motorcycle operators and passengers used helmets in 2009.

Target setting method: 10 percent improvement.

Data sources: National Occupant Protection Use Survey (NOPUS), DOT, NHTSA

IVP–23: Prevent an increase in the rate of fall-related deaths.

IVP–23.1 All persons.

Target: 7.0 deaths per 100,000 population.

Baseline: 7.0 deaths per 100,000 population were caused by falls in 2007 (age adjusted to the year 2000 standard population).

Target setting method: Maintain the baseline rate.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–23.2 Adults aged 65 years and older.

Target: 45.3 deaths per 100,000 population.

Baseline: 45.3 deaths per 100,000 population aged 65 years and older were caused by falls in 2007 (age adjusted to the year 2000 standard population).

Target setting method: Maintain the baseline rate.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–24: Reduce unintentional suffocation deaths.

IVP–24.1 All persons.

Target: 1.7 deaths per 100,000 population.

Baseline: 1.9 deaths per 100,000 population were caused by unintentional suffocation in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–24.2 Infants 0 to 12 months.

Target: 20.3 deaths per 100,000 population.

Baseline: 22.5 deaths per 100,000 infants 0 to 12 months were caused by unintentional suffocation in 2007.

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–24.3 Persons aged 65 years and older.

Target: 7.2 deaths per 100,000 population.

Baseline: 8.0 deaths per 100,000 population aged 65 years and older were caused by unintentional suffocation in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–25: Reduce drowning deaths.

Target: 1.1 drownings per 100,000 population.

Baseline: 1.2 drownings per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–26: Reduce sports and recreation injuries.

Target: 41.0 injuries per 1,000 population.

Baseline: 45.6 medically consulted injuries per 1,000 population resulted from engaging in sports and exercise or leisure activities in 2008 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Health Interview Survey (NHIS), CDC, NCHS.

IVP–27: Increase the proportion of public and private schools that require students to wear appropriate protective gear when engaged in school-sponsored physical activities.

IVP–27.1 Physical education.

Target: 84.5 percent.

Baseline: 76.8 percent of public and private schools required students to wear appropriate protective gear when engaged in physical education in 2006.

Target setting method: 10 percent improvement.

Data source: School Health Policies and Programs Study (SHPPS), CDC, NCCDPHP.

IVP–27.2 Intramural activities or physical activity clubs.

Target: 94.4 percent.

Baseline: 85.8 percent of public and private schools required students to wear appropriate protective gear when engaged in school-sponsored intramural activities or physical activity clubs in 2006.

Target setting method: 10 percent improvement.

Data source: School Health Policies and Programs Study (SHPPS), CDC, NCCDPHP.

IVP–28: Reduce residential fire deaths.

Target: 0.86 deaths per 100,000 population.

Baseline: 0.95 deaths per 100,000 population were caused by residential fires in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

Violence Prevention

IVP–29: Reduce homicides.

Target: 5.5 homicides per 100,000 population.

Baseline: 6.1 homicides per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–30: Reduce firearm-related deaths.

Target: 9.2 deaths per 100,000 population.

Baseline: 10.2 firearm-related deaths per 100,000 population occurred in 2007 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Vital Statistics System–Mortality (NVSS–M), CDC, NCHS.

IVP–31: Reduce nonfatal firearm-related injuries.

Target: 18.6 injuries per 100,000 population.

Baseline: 20.7 nonfatal firearm-related injuries per 100,000 population occurred in 2007.

Target setting method: 10 percent improvement.

Data source: National Electronic Injury Surveillance System (NEISS), US Consumer Product Safety Commission (CPSC).

IVP–32: Reduce nonfatal physical assault injuries.

Target: 462.7 injuries per 100,000 population.

Baseline: 514.1 emergency department visits for nonfatal physical assault injuries per 100,000 population occurred in 2008 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Electronic Injury Surveillance System—All Injury Program (NEISS-AIP), CDC, NCIPC, US Consumer Product Safety Commission (CPSC).

IVP–33: Reduce physical assaults.

Target: 14.7 physical assaults per 1,000 population.

Baseline: 16.3 physical assaults per 1,000 population aged 12 years and older occurred in 2008.

Target setting method: 10 percent improvement.

Data source: National Crime Victimization Survey (NCVS), DOJ, BJS.

IVP–34: Reduce physical fighting among adolescents.

Target: 28.4 percent.

Baseline: 31.5 percent of students in grades 9 through 12 reported that they engaged in physical fighting in the previous 12 months in 2009.

Target setting method: 10 percent improvement.

Data source: Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.

IVP–35: Reduce bullying among adolescents.

Target: 17.9 percent.

Baseline: 19.9 percent of students in grades 9 through 12 reported that they were bullied on school property in the previous 12 months in 2009.

Target setting method: 10 percent improvement.

Data source: Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.

IVP–36: Reduce weapon carrying by adolescents on school property.

Target: 4.6 percent.

Baseline: 5.6 percent of students in grades 9 through 12 reported that they carried weapons on school property during the past 30 days in 2009.

Target setting method: Trend analysis.

Data source: Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.

IVP–37: Reduce child maltreatment deaths.

Target: 2.2 deaths per 100,000 children.

Baseline: 2.4 child maltreatment deaths per 100,000 children under age 18 years occurred in 2008.

Target setting method: 10 percent improvement.

Data source: National Child Abuse and Neglect Data System (NCANDS), ACYF, ACF, HHS.

IVP–38: Reduce nonfatal child maltreatment.

Target: 8.5 maltreatment victims per 1,000 children aged 17 years and under.

Baseline: 9.4 victims of nonfatal child maltreatment per 1,000 children under age 18 years were reported in 2008.

Target setting method: 10 percent improvement.

Data source: National Child Abuse and Neglect Data System (NCANDS), ACYF, ACF, HHS.

IVP–39: (Developmental) Reduce violence by current or former intimate partners.

IVP–39.1 (Developmental) Reduce physical violence by current or former intimate partners.

Potential data source: National Intimate Partner and Sexual Violence Surveillance (NISVS) System, CDC, NCIPC.

IVP–39.2 (Developmental) Reduce sexual violence by current or former intimate partners.

Potential data source: National Intimate Partner and Sexual Violence Surveillance (NISVS) System, CDC, NCIPC.

IVP–39.3 (Developmental) Reduce psychological abuse by current or former intimate partners.

Potential data source: National Intimate Partner and Sexual Violence Surveillance (NISVS) System, CDC, NCIPC.

IVP–39.4 (Developmental) Reduce stalking by current or former intimate partners.

Potential data source: National Intimate Partner and Sexual Violence Surveillance (NISVS) System, CDC, NCIPC.

IVP–40: (Developmental) Reduce sexual violence.

IVP–40.1 (Developmental) Reduce rape or attempted rape.

Potential data source: National Intimate Partner and Sexual Violence Surveillance (NISVS) System, CDC, NCIPC.

IVP–40.2 (Developmental) Reduce abusive sexual contact other than rape or attempted rape.

Potential data source: National Intimate Partner and Sexual Violence Surveillance (NISVS) System, CDC, NCIPC.

IVP–40.3 (Developmental) Reduce non-contact sexual abuse.

Potential data source: National Intimate Partner and Sexual Violence Surveillance (NISVS) System, CDC, NCIPC.

IVP–41: Reduce nonfatal intentional self-harm injuries.

Target: 112.8 injuries per 100,000 population.

Baseline: 125.3 emergency department visits for nonfatal intentional self-harm injuries per 100,000 population occurred in 2008 (age adjusted to the year 2000 standard population).

Target setting method: 10 percent improvement.

Data source: National Electronic Injury Surveillance System—All Injury Program (NEISS–AIP), CDC, NCIPC, US Consumer Product Safety Commission (CPSC).

IVP-42: Reduce children’s exposure to violence.

Target: 54.5 percent.

Baseline: 60.6 percent of children were exposed to any form of violence, crime and abuse measured in 2008.

Target setting method: 10 percent improvement.

Data Source: National Survey of Children’s Exposure to Violence (NatSCEV), DOJ, OJJDP.

IVP-43: Increase the number of States and the District of Columbia that link data on violent deaths from death certificates, law enforcement, and coroner and medical examiner reports to inform prevention efforts at the State and local levels.

Target: 51 States (including the District of Columbia).

Baseline: 16 States linked data on violent deaths from death certificates, law enforcement, and coroner and medical examiner reports to inform prevention efforts at the State and local levels in 2009.

Target setting method: Total coverage.

Data source: National Violent Death Reporting System (NVDRS), CDC, NCIPC.