

April 30, 2024

The Honorable Patty Murray
Chair
Senate Committee on Appropriations
S-128 The Capitol
Washington, DC 20515

The Honorable Susan Collins
Ranking Member
Senate Committee on Appropriations
S-146A The Capitol
Washington, DC 20515

The Honorable Tammy Baldwin
Chair
Senate Appropriations Subcommittee
on Labor, Health and Human Services,
Education, and Related Agencies
Washington, DC 20510

The Honorable Shelley Moore Capito
Ranking Member
Senate Appropriations Subcommittee
on Labor, Health and Human Services,
Education, and Related Agencies
Washington, DC 20510

Dear Chairs Murray and Baldwin, and Ranking Members Collins and Capito:

As public health and health-based organizations committed to ensuring that all communities are free from violence, and as safe and healthy as possible, **we strongly urge you to include \$268.1 million—with \$250 million dedicated to the Community Violence Intervention (CVI) Initiative—for Community and Youth Violence Prevention through the Division of Violence Prevention (DVP) at the Centers for Disease Control and Prevention (CDC) in the FY 2025 Labor, Health and Human Services, Education and Related Agencies appropriations bill.** This critical investment would allow the CDC to support actionable, proven community-driven public health strategies that can prevent and reduce violence in communities facing the highest burden of violence.

While all communities experience the long-lasting effects of violence on physical and mental health and social wellbeing, communities of color remain disproportionately impacted by community violence, including gun violence. According to a CDC analysis of provisional firearm homicide data for 2022, while the national rate decreased from 2021 to 2022, it remains higher than in 2019—with rates among non-Hispanic Black or African American persons, American Indian or Alaska Native, and Hispanic or Latino persons “notably higher during the period from 2020 through 2022 compared with 2019.”¹ The analysis also found that firearm homicide rates increased for American Indian or Alaska Native persons in 2022 compared to 2021 and 2020.

Importantly, community violence is preventable, not inevitable, when we invest in a robust public health approach. Communities can be made safer by implementing policies and practices

¹ Kegler SR, Simon TR, Sumner SA. Notes from the Field: Firearm Homicide Rates, by Race and Ethnicity — United States, 2019–2022. MMWR Morb Mortal Wkly Rep 2023;72:1149–1150. DOI: <http://dx.doi.org/10.15585/mmwr.mm7242a4>

that address the root causes of violence through a public health approach. This approach relies on local community data to develop comprehensive strategies that are designed to contribute to community safety while decreasing and eliminating the risk factors for violence. It is also highly collaborative and driven by local needs, bringing together community members most impacted by violence with different sectors—including health care, public health, schools, parks, housing, law enforcement, social services, local businesses, faith-based institutions, and others—to collectively implement strategies based on the priorities and needs of each community.

Treating violence as a public health issue must include resourcing the CDC to build on their 20+ years of evidence-based violence prevention efforts. Our recommended investment of \$268 million for Community and Youth Violence Prevention, which includes a \$250 million dedicated CVI investment, is an opportunity to begin to do just that. These funds will support the implementation and scale up of existing community violence and youth violence prevention and intervention efforts. Through the dedicated CVI funds, up to 75 communities that experience disproportionate rates of violence will be able to select strategies based on their needs and priorities, including but not limited to hospital-based interventions and street outreach, which have already been shown to have positive impacts. For example, hospital-based violence prevention programs have shown promise in reducing the risk for violence among youth by reaching them during a “teachable moment.” CDC has a long history of partnering effectively with the health care sector and is therefore uniquely positioned to house and fund hospital-based violence intervention activities and research.

These funds also allow CDC to support selected communities by funding community-based organizations that have expertise in partnering with those most impacted by violence to provide training and technical assistance. Further, increased funding allows CDC to expand on its strong track record of applying data to inform action through increased research and evaluation activities and enhanced data collection, to further build the evidence base for preventing violence in communities experiencing the greatest burden of violence.

Congress increased the CDC’s Community and Youth Violence Prevention funding line to \$18.1 million (including \$3 million for CVI) in the FY 2023 Consolidated Appropriations Act (and maintained level funding for FY24) while having previously created a dedicated program within the Department of Justice to support CVI programs through the FY 2022 Consolidated Appropriations Act. While these investments are critical, they are not sufficient to move the needle in communities most impacted by violence and they do not yet constitute the full elements of a public health approach. By increasing the resources available through the CDC—including resources dedicated to CVI—we can more fully reap the benefits of a public health approach to community safety and violence prevention.

Everyone deserves a safe community where they can live, work, learn, and play without fear of violence or harm toward themselves and their loved ones. Public health strategies for preventing violence are achievable and necessary for all of us to flourish. **The undersigned groups strongly urge you to prioritize \$268.1 million for Community and Youth Violence Prevention—including a dedicated \$250 million CVI Initiative—at the CDC as part of FY 2025 appropriations.**

Please contact Sana Chehimi, Prevention Institute at sana@preventioninstitute.org or 510-681-3534 with any questions.

Sincerely,

50 Fathers Movement Credible Messenger USA
AFT: Education, Healthcare, Public Services
American Academy of Pediatrics
American Public Health Association
Association of American Medical Colleges
Association of Maternal & Child Health Programs
Association of State and Territorial Health Officials
Big Cities Health Coalition
Center for Civic and Public Policy Improvement
CenterLink: The Community of LGBTQ Centers
ChangeLab Solutions
Chinese Community Center, Houston
Community Justice
Congregation of Our Lady of Charity of the Good Shepherd, U.S. Provinces
Cultiva La Salud
Enough of Gun Violence
Equality California
Families USA
Family Service Center
Ginger Lee Global Health Consulting Group
Hartford Communities That Care, Inc.
Health Communication Partners LLC
Healthy Teen Network
Housing Works
Human Impact Partners
Institute for Civic Education in Vietnam (ICEVN)
Jewish Women International
Kids and Car Safety
Latino Commission on AIDS
LaUnidad11
Legacy Community Health
Life Paths Research Center

March for Our Lives
McKinleyville Family Resource Center
Mental Health America of Greater Houston
Micronesian Islander Community
National Advocacy Center of the Sisters of the Good Shepherd
National Association of County and City Health Officials
National Association of Pediatric Nurse Practitioners
National Hispanic Medical Association
National League for Nursing
National Network of Public Health Institutes
National Nurse-Led Care Consortium
National Prevention Science Coalition to Improve Lives
Nature and Eclectic Outdoors and Healthy Outdoor Communities
OST/SU Health Improvement Partnership (OHIP)
Partners In Health
Peace Through Action USA
Positive Women's Network-USA
Prevention Institute
ProSalud
Protest, Organize, Participate/ P.O.P.
Public Health Institute
Reaching Richmond Community Collaborative
RYSE
SAFE Illinois
Safe States Alliance
Sandy Hook Promise Action Fund
Santa Clara County Public Health Department
Scrubs Addressing the Firearm Epidemic, Inc. (SAFE)
Sisters of St. Joseph Healthcare Foundation
Society for Public Health Education
Southern Nevada Health District
The California Alliance of Academics and Communities for Public Health Equity
The Future is US
The Health Alliance for Violence Intervention
The Institute for Community Research
The Pride Center at Equality Park
Union for Reform Judaism
VALOR
Vera Institute of Justice
Where Do We Go From Here Inc
YMCA of the USA