

# Prescriptions for Prevention: A Health and Human-Centered Approach to Reducing SALW Violence

17 January 2006

Conference Room Paper Submitted by the IANSA Public Health Network

---

## **Issue Background: Why Do We Need a Public Health Approach to Small Arms?**

Worldwide, small arms are involved in wars and crimes, suicides and accidents that result in hundreds of thousands of deaths and millions of injuries each year. In 1996, the 49<sup>th</sup> World Health Organization (WHO) Assembly identified violence as a leading public health problem worldwide. Subsequently, the WHO developed the landmark document *Small Arms and Global Health* prepared for the first UN Conference on Illicit Trade in Small Arms and Light Weapons in 2001. In it the WHO states that “Violence is.....an important health problem – and one that is largely preventable. Public health approaches have much to contribute to solving it.”

Small arms and light weapons have been recognized as a humanitarian crisis but the dimensions of the problem are poorly understood. Despite the comprehensive nature of the UN Programme of Action (UNPoA) on small arms, the implementation of efforts around this document have been rather narrowly focused on arms management issues. The result has been a largely exclusive process, where the technical competencies of entire disciplines such as health that are centrally important to the issue have either not been leveraged or only supported by a minority of progressive donors.

Sustained high mortality rates for violent injury requires a commitment to develop and support action-oriented research in order to address these injuries from a public health perspective. It is important to understand the context in which homicides occur in different countries. It has been recognized that several modalities of interpersonal violence occur in a complex interplay of individual, relationship, social, cultural and environmental factors. This approach for understanding the multiple levels of interaction has been defined as the ‘ecological model’. Among the universal risk factors identified that are associated with higher rates of armed violence are ready access to firearms, drug abuse or use of alcohol, and socioeconomic disparities.

A public health approach to small arms injury focuses on the risk factors driving armed violence and the health effects of gun violence, and brings into the arena the public health community's emphasis on scientific methodologies and prevention. Public health groups work with many sectors of society promoting a variety of measures that can reduce the frequency and severity of shooting injuries. The methods used are ones that have been developed and refined in preventing infectious and chronic diseases and injuries including polio and malaria, HIV infection, smallpox, and automobile fatalities in many countries. The same underlying approach can also reduce gun deaths and injuries, and there is documented evidence of this.

Public health methods begin with information gathering. Data on gun-related injuries will guide the identification of the risk factors that contribute to these injuries. Possible interventions can then be developed that address those factors, targeted at high risk areas and groups, tested for feasibility, and evaluated for effectiveness. Results can be used by health professionals to bring awareness to the magnitude of the problem, and to advocate for public policies and health strategies to reduce violence. To date, the public health perspective on preventing small arms injuries has been largely invisible at the international policy-making level, despite the WHO call to action and statement that capacity building for injury prevention is one of the main challenges facing the injury prevention area today.

## **How Does the Programme of Action Address the Problem?**

Specific reference to health is made in two places in the Programme of Action:

- The Preamble section 15 that references the challenge to human health posed by SALW;
- And further in Part III (Implementation, International Cooperation and Assistance) paragraph 18 that states: "*States, regional and sub regional and international organisations, research centres, **health and medical institutions**, the United Nations System, international financial institutions and civil society are urged as appropriate, to develop and support action-oriented research aimed at facilitating greater awareness and better understanding of the nature and scope of the problems associated with the illicit trade in small arms and light weapons...*"

**However, the PoA does not prescribe specific actions to accomplish this goal.**

Indirect references to health are found in a number paragraphs including:

- Reference to humanitarian consequences; reducing human suffering; assistance to victims; (Preamble 2, 4, 5)
- The need for public awareness and confidence-building programmes on the problems and consequences of the illicit trade in small arms (II. 20)
- The focus on disarmament, demobilisation, and reintegration (DDR) of ex-combatants (II.21, 30, 34, 35, III. 16)
- The emphasis on the special needs of children (Preamble 6, II.18, 22)
- Impact on women and the elderly (Preamble 6)
- The recognition of the need to promote conflict prevention and resolution, and to 'promote dialogue and a culture of peace' (Preamble 15; II. 20, 41; III. 4)
- The recognition of the need to make 'greater efforts to address problems related to human and sustainable development' (III.17)

**However, again, the PoA does not prescribe specific actions to address these issues.**

Finally, the PoA explicitly calls for simultaneously approaching the small arms issue from both the supply and demand perspectives. This call, perhaps more than any single dimension of the PoA, is the most seriously underdeveloped and the most likely to hamper the PoA's ultimate effectiveness. The factor that is the major driver of demand for weapons is an individual's perception of security within his or her environment. Highly violent communities are therefore not just the central concern of the PoA, they are the environments which must be made less violent in order to reduce demand for small arms. The public health approach is ideally suited to engaging with community based prevention of armed violence, thereby providing the most direct means of driving down demand for small arms in the settings that need this action the most.

## **Global and Regional Progress Since 2001**

Although the PoA calls for action on health at both global and regional levels, little if any progress has been made internationally, regionally, or nationally on integrating public health prevention measures into preventing and reducing small arms violence. In particular, action-oriented research, which will help define successful measures for interventions, has received very little support from donor countries supporting work in connection with the PoA.

## **Recommendations to States:**

The Public Health Network seeks to make the impacts on health of armed violence more widely understood and aims to assist governments in gauging feasible policy options to address them. We recommend the following as an action agenda to help states incorporate public health strategies into their National Action Plans. Some of these require no substantial resource investment:

- **RevCon outcome documents should refer explicitly to the need for a comprehensive supply and demand approach to the control of small arms & light weapons proliferation.**
- **Recognize that health and development are intricately linked, and encourage states to integrate strategies in National Action Plans to reduce demand for small arms & light weapons into their programs on development, health and poverty reduction.**
- **Ensure health representation on National Commissions on Small Arms.** We recommend that at the minimum the Ministry of Health is represented and ideally an NGO member of the health community as well.
- **Implement national collection of data on gun-related deaths and related costs.** This is needed to guide prevention planning, identify high-risk groups and areas, and to monitor the effects of interventions. The cost of this should be included National Commission budgets.
- **Support hospital-based research projects to provide details on gun-related injuries.** Local-level data collection is needed to provide details on injury events and medical effects, which are needed to assure proper prevention and management of victims.
- **Educate the medical community, students, the media, the public, and policy makers about the public health burden of gun-related injuries.**
- **Encourage more involvement of the injury prevention community in gun-related injury prevention.** This group can help to apply decades of experience with public health approaches to the prevention of injuries from small arms and light weapons.

#### **Summary Recommendations for the Review Conference for the Programme of Action**

Whereas States have acknowledged the need to simultaneously address demand for small arms and to carry out action-oriented research, integration of a public health approach within the Programme of Action can be effected through incorporation of public health entities and strategies within National Action Plans, including the following:

1. Inclusion of health representatives on National Commissions in a partner capacity.
2. Support to the health community to conduct action-oriented research on armed violence and its prevention and particularly with regard to documenting the effectiveness of strategies to prevent armed violence.
3. Increased support for victim assistance programs that include comprehensive follow-up to ensure productive reintegration of individuals into society.
4. Recognition that health and development are interdependent as highlighted in the Millennium Goals, and development and support for policies that address this interdependence.
5. Support for better integration of public health evidence in the development of policies to address armed violence.

These recommendations add nothing new to the Programme of Action - they simply provide a framework for more effectively realizing the commitments that are already there.