



# SDG Violence Prevention Targets and Arms Control Agreements: How Cross Collaboration Could Amplify Results On The Ground

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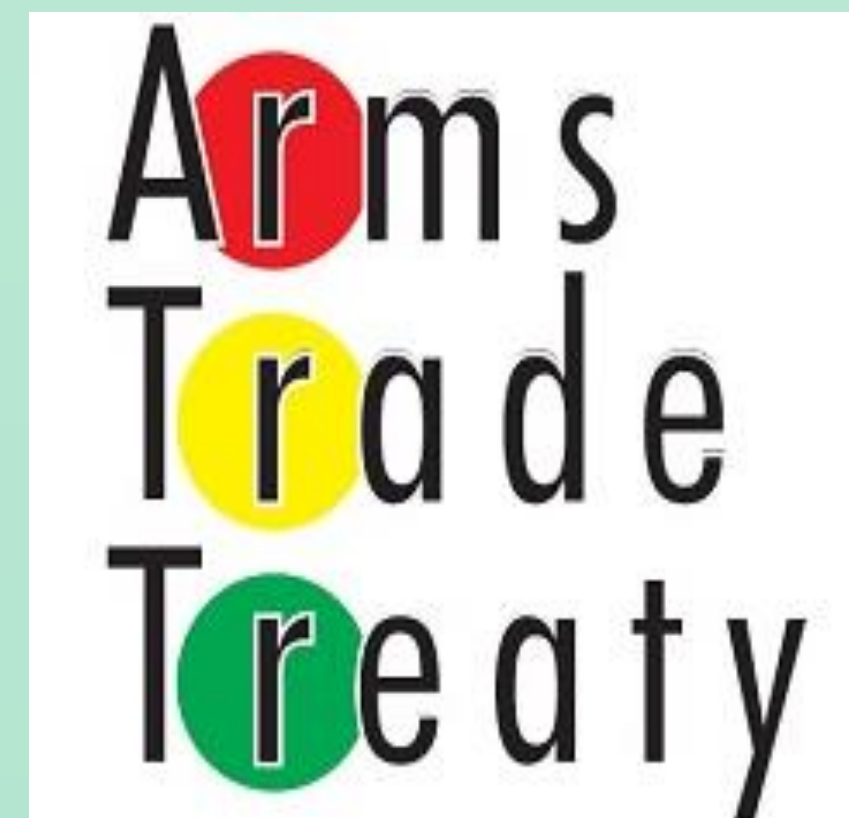


## 1. BACKGROUND

The Sustainable Development Goals (SDGs) and the goals of major international treaties and agreements on arms control including the Arms Trade Treaty (ATT) and the Programme of Action on Small Arms and Light Weapons (UN PoA) are synergistic in that they all prioritize the “reduction of human suffering.”

SDG16’s overarching aim is to “Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels.” One can argue that none of the other SDGs are possible without achieving SDG16.

SDG targets covering violence against children (16.2), violence against women and girls (5.2), and homicide (16.1) have been prioritized by the World Health Organization (WHO) for translating into measurable programs and policies at local and national levels.



## 2. DESCRIPTION OF THE PROBLEM

According to WHO, nearly 50% of the hundreds of thousands of global homicides each year are committed with firearms. Millions more are injured by guns, costing health care systems enormous sums and diverting funds from critical health needs.

Although some progress has been made in establishing armed violence as a preventable public health problem, most armed violence prevention programs remain within the realm of police and security sectors. We are missing opportunities to enhance SDG violence prevention and arms control goals due to lack of collaboration among health professionals, arms control actors, educators and legislators.

In *Policing and Public Health: Strategies for collaboration* (JAMA 2017) the authors conclude that, “Evidence-informed police services are important to the health of citizens, but to date, neither health agencies nor police services have generally considered policing as part of a public health response to violence. However, formal police–public health partnerships recognize the distinctive yet complementary roles of both partners and provide communities with a much fuller picture of violence and its risk factors. They also provide a mechanism through which violence could be prevented more effectively, help to enact and uphold beneficial public policy, and ensure a well-balanced field response to violence that engenders community approval.”



Hospital-based research is critical to informing effective armed violence interventions.



IPPNW Zambia doctors meet with legislators in Lusaka, Zambia (top), and Indian Doctors for Peace and Development meet with policy makers and parliamentarians in India on the Arms Trade Treaty.



IPPNW doctors from Nigeria and Ecuador address UN delegates on health effects of armed violence.



IPPNW is a non-partisan federation of national medical organizations in 63 countries representing thousands of health professionals united behind the goal of creating a more peaceful and secure world. IPPNW received the 1985 Nobel Peace Prize and is the founder of ICAN, recipient of the 2017 Nobel Peace Prize. IPPNW is committed to promoting peace and preventing armed conflict from a public health perspective. IPPNW’s *Aiming for Prevention* program supports, encourages, and helps coordinate activities of affiliates around the world working on violence prevention, especially armed violence.



IPPNW is an active member of the WHO Violence Prevention Alliance

## 3. METHODS

Public health organizations and agencies can work with security and arms control experts to strengthen each other’s roles in preventing violence and achieving the SDGs, reduce violence against women, girls, and children, and reduce homicides and injuries from firearms.

Multi-agency collaborations can be powerful forces to bring the best practices of all to bear on institutional and structural violence challenges. They can help broaden relationships that may extend into the armed violence prevention and arms trade control worlds.



For example, “Fostering Alternative Care for Troubled Minors,” a project of the International Juvenile Justice Observatory, aims at training legal and alternative care professionals, social, youth and

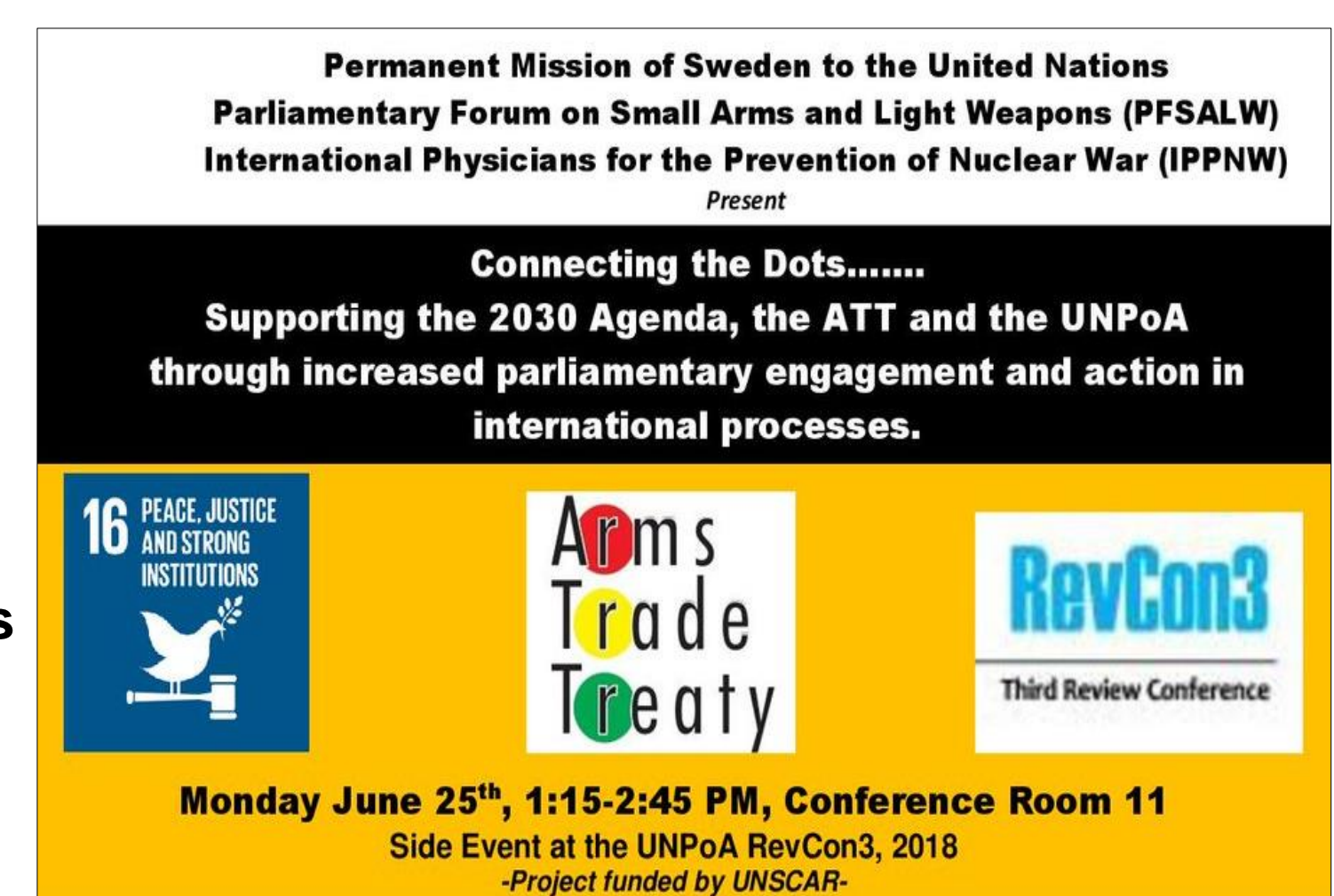
health workers, psychologists and other actors involved in the juvenile justice and alternative care fields in several EU Member States to strengthen their response to the needs of children in conflict with the law who have psychological problems or disorders.

The program also aims to strengthen interagency and multidisciplinary cooperation in alternative care systems to improve their capacity to respond to children’s needs, as well as raise awareness on the rights of the child. Preventing gun violence in communities, as called for in agreements such as the PoA, can be an important part of these efforts.

Parliamentarians can play a vital role in passing and implementing international and regional arms control agreements as well as supporting national public health initiatives and policy agendas that can help achieve all the SDGs and promote peaceful and inclusive societies.

IPPNW has partnered with the **PARLIAMENTARY FORUM ON SMALL ARMS AND LIGHT WEAPONS** at regional meeting of parliamentarians and at United Nations meetings on the arms trade to help educate delegates about a public health approach to violence prevention. We have discussed how health professionals and parliamentarians and legislators can work together to achieve the SDGs and the goal of peaceful societies. IPPNW’s policy recommendations to States have included the following:

- Implement national collection of data on gun-related injuries and deaths, use the data to calculate the costs of gun violence, and implement the public health model to identify and monitor proposed interventions.
- Include health care professionals on National Commissions on Small Arms in order to help assess strategic investments based on highest needs and to interface with WHO Violence Prevention Focal Points in more than 100 countries.
- Improve the health infrastructure for survivors of armed violence, including improving communications and coordination among medical providers and social service agencies.



## 4. CONCLUSIONS

Multidisciplinary collaborations among health professionals, legislators, security and justice experts and others to address all the drivers of armed violence, including the arms trade and socioeconomic and health issues, can help synergize efforts to achieve the SDG goals on armed violence prevention.

## 5. REFERENCES

- Shepherd JP and Sumner SA. Policing and Public Health—Strategies for Collaboration. JAMA 2017. Apr 18;317(15):1525-1526 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5814117/>