

Educating and Informing Health Policy

Data collected by AVDRS will be shared with our data partners. Additionally, data will be shared to inform other groups such as:

- Local Law Enforcement
- Public Health Officials
- Violence Prevention Organizations
- Legislatures
- Alabama Child Death Review System
- Data Driven Prevention Initiative (Drug Overdose Surveillance)

NVDRS data is used to help:²

- Inform policy, programs, and health care decision making based on the trends and characteristics of violent deaths
- Identify risk factors for violence or at risk populations
- Assist in geographically targeting limited resources and effective polices or programs
- Evaluate the impact and effectiveness of current prevention strategies
- Encourage the investment of funds into health care programs
- Provide data driven evidence to lawmakers to inform and promote legislative action



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Citations:

- 1 NVDRS Fact Sheet <https://www.cdc.gov/violenceprevention/pdf/NVDRS-factsheet.pdf>
- 2 CDC - NVDRS Website <https://www.cdc.gov/violenceprevention/nvdrs>

Background

In 2016, approximately 64,000 violent deaths occurred in the United States. Of those violent deaths, more than 45,000 people died as the result of suicide, and homicides resulted in the deaths of over 19,000 people.¹

These deaths and other violence-related injuries cost the United States \$87 billion in medical care and lost productivity.¹ However, this figure does not even take into account the emotional cost of the deaths or the burden and cost to the judicial system. These numbers can be reduced with the implementation of focused and educated programs.

National Violent Death Reporting System (NVDRS)

Created in 2002, NVDRS is a state-based surveillance system to track the incidence of violent deaths, primarily relating to suicides and homicides. NVDRS covers all types of violent deaths, in all settings, and for all age groups. Currently, 40 states are participating in the system, as well as the District of Columbia and Puerto Rico.¹

The system consolidates detailed, de-identified death-related information into a centralized database managed by the Centers for Disease Control and Prevention (CDC).

NVDRS uses four primary data sources:¹

1. Death Certificates
2. Coroner/Medical Examiner Reports
3. Law Enforcement Reports
4. Toxicology Reports

Implementation in Alabama

AVDRS is an extension of NVDRS which will be expanding to all 50 states in 2019.

The formation of AVDRS is funded entirely by NVDRS grant from CDC:

- Initially a 5 year grant
- Renewable Grant (and every established state reporting system has maintained funding)
- Provides support to states to create their respective reporting systems
- Provides funds to update existing technologies and programs to facilitate better data collection and storage

Data consolidated into NVDRS is state based in origin. Individual states compile and abstract separate incidents of violent deaths into a web-based data system. This state system is then merged yearly into the national database maintained by CDC.

The newly established AVDRS was started in 2016, and began its pilot year in 2017. The pilot year was limited to including 10 counties and then grew in the second year to include all 67 counties of the state of Alabama.

Data Partners

Our partners in gathering data and providing resources are crucial to the success of AVDRS. Without the support of the following organizations, it would not be possible to collect such a large amount of information or to provide accurate descriptions of each death.

Primary Data Partners

Vital Statistics Department of ADPH:

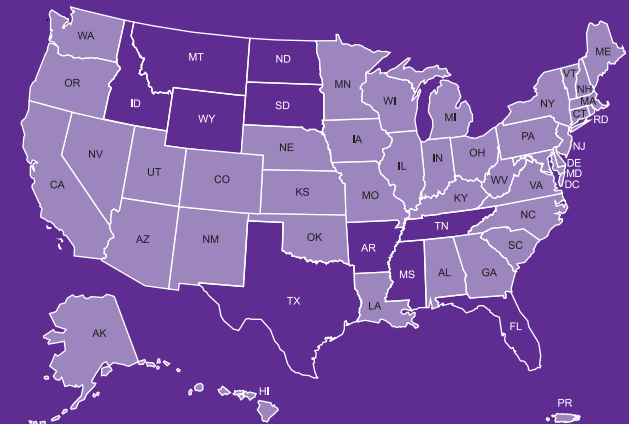
- Provides death certificates which provide the majority of incident data and instigate AVDRS program staff to collect further data

State Coroner and Medical Examiners:

- Provides detailed "Manner of death," "Cause of death," and circumstantial data

Alabama Law Enforcement Agency

- Provides narratives and data regarding circumstances and events leading to deaths



States and territories participating in the NVDRS System in 2016! As of 2018, NVDRS secured funding to take the program nationwide to all 50 states.