Healthy People 2020: Who’s Leading the Leading Health Indicators?
Who’s Leading the Leading Health Indicators?

Leading Health Indicators are:
- Critical health issues that, if addressed appropriately, will dramatically reduce the leading causes of preventable deaths and illnesses
- Linked to specific Healthy People objectives
- Intended to motivate action to improve the health of the entire population
Who’s Leading the Leading Health Indicators?

Featured Speakers:

- Jewel Mullen, MD, MPH, MPA – Principal Deputy Assistant Secretary for Health, Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services

- Phyllis Holditch Niolon, PhD – Acting Special Assistant to the Associate Director of Science, Division of Violence Prevention, Centers for Disease Control and Prevention

- Angela Sillas-Green, MA, LPC – Prevention Education Specialist/Child Therapist, Tu Casa, Inc.
Jewel Mullen, MD, MPH, MPA
Principal Deputy Assistant Secretary for Health
Office of the Assistant Secretary for Health
U.S. Department of Health and Human Services
Motor vehicle crashes, homicide, domestic and school violence, child abuse and neglect, suicide, and unintentional drug overdoses are important public health concerns in the United States.

In 2014, unintentional injuries were the 4th leading cause of death for Americans of all ages.

– Unintentional injuries were the leading cause of death for Americans age 1 to 44.

Both unintentional and intentional injuries are a leading cause of disability for all ages, regardless of sex, race and ethnicity, or socioeconomic status.
Injury and Violence – Outcomes

For infants and children:
- Suffocation is the leading cause of injury death for infants age 1 and younger
- Drowning is the leading cause of injury death for children age 1 to 4
- Motor vehicle accidents are the leading cause of injury death for children and adolescents age 1 to 19
Injury and Violence – Outcomes

■ For adolescents:
  – More than 1 million serious sports-related injuries occur each year among adolescents age 10 to 17

■ For adolescents and young adults:
  – In 2014, 71% of all deaths among youth and adolescents aged 10 to 24 years resulted from four causes:
    ♦ Motor vehicle crashes (22%)
    ♦ Other unintentional injuries (18%)
    ♦ Suicide (17%)
    ♦ Homicide (14%)
For adults:

- In 2013, more than 2.4 million drivers and passengers were treated in emergency departments as the result of being injured in motor vehicle crashes.
- In 2014, an average of 13 working men and women were killed on the job each day.
- In 2014, females aged 12 and older experienced 500,920 nonfatal violent victimizations committed by an intimate partner.
- In 2014, males experienced 133,692 nonfatal violent victimizations committed by an intimate partner.
Injury and Violence – Leading Health Indicators

- The Leading Health Indicators are:
  - Reduce fatal injuries
  - Reduce homicides
Injury Death Rate by Sex

Rate per 100,000 (age adjusted)

- Male
- Total
- Female

HP2020 Target: 53.7

NOTES: Data are for ICD-10 codes *U01-*U03, V01-Y36, Y85-Y87, Y89 reported as the underlying cause of death and are age adjusted to the 2000 standard population.

Obj. IVP-1.1
Decrease desired
NOTES: Data are for ICD-10 codes *U01-*U02, X85-Y09, Y87.1 reported as underlying cause of death and are age adjusted to the 2000 standard population.

Obj. IVP-29
Decrease desired
Homicide Rate by Sex and Age, 2014

Rate per 100,000

Age (years)

NOTES: Data are for ICD-10 codes *U01-*U02, X85-Y09, Y87.1 reported as underlying cause of death.
Preventing Teen Dating Violence: A Healthy People 2020 Leading Health Indicator Webinar

Phyllis Holditch Niolon, PhD
Division of Violence Prevention,
National Center for Injury Prevention and Control,
Centers for Disease Control and Prevention

The findings and conclusions of this presentation are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.
Forms of Violence Addressed by DVP

Child Maltreatment:

- Youth Violence
- Suicidal Behavior
- Intimate Partner Violence
- Dating Violence
- Sexual Violence

Childhood | Adolescence | Adulthood
The Public Health Approach to Prevention

Surveillance to Describe the Problem

Identify Risk/Protective Factors

Develop and Evaluate Prev. Strategies

Implement & Disseminate

Problem

Response
Overview

- Definitions of Intimate Partner Violence and Teen Dating Violence
- Magnitude of the problem
- Overview of Safe Dates
Intimate Partner and Teen Dating Violence

Both adult intimate partner violence and teen dating violence include:

- Physical violence
- Sexual violence
- Psychological aggression
- Stalking behaviors

From a current or former intimate partner or dating partner

Many consider TDV to be the same basic phenomenon as IPV but at an earlier stage in the lifespan
Homicides: Findings from BJS

- Nearly one in 5 murder victims (16.3%) were killed by a current or former intimate partner.
- Over 40% of female murder victims were killed by an intimate partner.
- Female homicide victims were more likely to be killed by an intimate than any other type of perpetrator.
- Women were almost 6x more likely than men to have been killed by an intimate partner.

Homicide: Other Victims

IPV victims are not the only ones killed in IPV homicide

- Of IPV-related homicides in select states 2003-2009, 20% of the homicide victims were corollary victims (others besides the IPV victim)

- 25% of these corollary victims were under 18

National Intimate Partner and Sexual Violence Survey (NISVS) Findings for IPV

- 22% of women and 14% of men had experienced severe physical violence from an intimate partner
- 9% of women and 0.5% of men had been raped by an intimate partner
- 16% of women and 10% of men had experienced other forms of sexual violence from an intimate partner
- 9% of women and 3% of men had been stalked by an intimate partner

Other Findings from NISVS

- Injury Among IPV victims:
  - 42% of women and 14% of men were injured
  - 22% of women and 6% of men needed medical care

- Dating violence: 1 in 5 women and nearly 1 in 7 men who ever experienced rape, physical violence, and/or stalking by an intimate partner, first experienced some form of IPV between 11 and 17 years of age


2013 YRBS
Physical and Sexual Dating Violence Estimates

Among youth who had dated in the past 12 months

- 21% of girls reported experiencing physical or sexual dating violence or both
  - 6.6% physical DV only
  - 8.0% sexual DV only
  - 6.4% both physical and sexual DV

- 10% of boys reported experiencing physical or sexual dating violence or both
  - 4.1% physical DV only
  - 2.9% sexual DV only
  - 3.3% both physical and sexual DV

What Works in Dating Violence Prevention

Many programs have been developed and some rigorously evaluated.

- Some programs increase knowledge and change attitudes
- A few programs change TDV behaviors
  - Fourth R
  - Coaching Boys into Men
  - Shifting Boundaries
  - Families for Safe Dates
  - Safe Dates
Safe Dates

- School based curriculum for 8th and 9th grade students focused on the prevention and reduction of dating violence

- Safe Dates program consisted of:
  - 10 45-minute classroom sessions focused on healthy relationships, prosocial norms, and relationship skill building
  - A poster contest
  - A theatre production

- Evaluated by a randomized controlled trial where schools in NC were assigned to intervention or control

At 4-year follow-up, students in the program perpetrated:

- Less physical violence
- Less serious physical violence
- Less sexual violence

toward their dating partners than students who did not get the program.

At 4-year follow-up, students in the program were:

- Less likely to be victims of sexual violence
- Less likely to be victims of physical violence (if no prior victimization)

from their dating partners than students who did not get the program.
Community Implementation of Safe Dates

Presented by Angela Sillas-Green
Tu Casa Services

Tu Casa offers a wide variety of services and programs to the whole San Luis Valley. *Tu Casa services are free, confidential and bi-lingual.*

- 24- Hour Hotline
- Counseling for Primary and Secondary Victims of Domestic and Sexual Violence
- Victim Advocacy
- SLV CAC Program
- Community Outreach and Education
- Prevention
Prevention Program

- Colorado Department of Public Health and Environment (CDPHE) funds the Colorado Sexual Violence Prevention (SVP) Program which funds Tu Casa, Inc. prevention program.

- This is offered in health classes or as an enrichment credit.
Prevention Program Con’t

- Tu Casa implements Safe Dates in two schools
- Implements 10-sessions
- Last year programming was implemented in two high schools
- This year it’s one middle school and one high school
- In addition:
  - Tu Casa staff offers a parenting training and teacher training using training materials from Colorado Youth Matters
  - Social Norming Project
  - Tu Casa has also employed a Youth Representative
  - Summer programming
Program Overview

Session 1: Defining Caring Relationships
Session 2: Defining Dating Abuse
Session 3: Why Do People Abuse?
Session 4: How to Help Friends
Session 5: Helping Friends
Session 6: Overcoming Gender Stereotypes
Session 7: How We Feel, How We Deal
Session 8: Equal Power through Parent Materials Communication
Session 9: Preventing Sexual Assault
Session 10: Reviewing the Safe Dates Program

Dating Abuse Play
Poster Contest

Safe Dates: An Adolescent Dating Abuse Prevention Curriculum
Vangie Foshee, Ph.D., and Stacey Longwick, Ph.D.
Program Adaptations

- **Session 1 and 2:**
  - Integrate a video on TDV
    - “Don’t Let Yourself”

- **Session 6:**
  - Gender Box
  - Media Literacy out of New Mexico
  - Genderbread person

- **Session 9:**
  - Go over consent—clear consent
  - Laws of what is consent

- These revisions came from student requests, trainings and personal research.
Evaluation

- CDPHE and Colorado State University (CSU) created a pre- and post- survey for students in programming to complete.
- The survey measures programs impact on:
  - Life skills
  - Attitudes/beliefs about gender roles
  - Acceptance of anti-social, delinquent, and violent behavior
  - Attitudes towards verbal bullying
  - Acceptance of jealous behaviors
  - Healthy sexuality
  - Negative assertion
- 47 students pre and post surveys were evaluated.
- In the 2014-2015 school year 176 students were offered programming
Data Summary

- Fiscal Year 2014-2015
- Reported by the CSU Evaluation Team
- Statistically significant, positive change was seen in following:
  - Life Skills
  - Gender Roles (Stereotypes And Consent For Sexual Activity)
  - Attitudes Towards Violence
  - Delinquency
  - Jealous Behaviors
Contributing Factors of Success

- Supportive Administrators at Middle School and High School
- Youth Representation
- Partnerships and Community involvement with:
  - Alamosa County Public Health
  - Center for Restorative Programs
  - Behavioral Health Center
  - Adams State University
  - Immigrant Resource Center
  - Social Services
  - Boys and Girls Club
  - Local Churches
  - Other SVP Grantees and other similar programs
- Doing your homework...
Safe Dates
Successes and Challenges

- **Successes:**
  - It is an already evidence-based and complete curriculum
  - Supportive administration
  - Youth voice
  - Student feedback

- **Challenges:**
  - Working with schools
  - Keeping students engaged. The curriculum gets repetitive with scenarios and students report they would like other activities.
  - Getting data accepted to CSU evaluation surveying. 47 out of 176 students were accepted into report.
Contact Information

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Roundtable Discussion

Please take a moment to fill out our brief survey.
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