Violence and accidents, a challenge for the Unified Health System

This thematic issue of Ciência & Saúde Coletiva presents a series of studies and analyses on violence and its impact on health. External causes, accidents and violence, are a major public health problem, resulting in injury, death, psychological disorders and after effects, not to mention high social and economic costs. In Brazil they are the third major cause of death in the country with 143,256 deaths in 2010 and the primary cause of death in the age group of one to 39 years. Traffic injuries and deaths accounted for 42,844 victims in 2010, killing mostly men and youths. For the first time, deaths of motorcyclists exceeded deaths of motorists and pedestrians. Homicides in turn resulted in 52,260 deaths, showing the day-to-day tragedy and the need to develop policies to promote health and a culture of peace.

This issue presents a panorama of the violence in the country, especially domestic violence. This was revealed by the mandatory reporting of violence, which is part of the Surveillance System for Violence and Accidents (VIVA), established in 2006 by the Health Surveillance Department of the Ministry of Health (MH). VIVA has become an important tool for understanding the magnitude, distribution and trends of these events. The data analyzed here come from two sources: VIVA Survey, conducted periodically at emergency admission sectors and VIVA Continuous, through notification of domestic, sexual and other interpersonal or self-inflicted violence in healthcare services and registered in the Information System for Notifiable Diseases (SINAN). The articles presented here show analyses of care related to violence and accidents involving children, adolescents, adults and the elderly, as well as analyses of mortality.

The MH included the prevention of violence and accidents on its agenda, taking responsibility not only for the care and rehabilitation of victims, but also for health promotion, prevention and surveillance of violence and accidents. Among the initiatives, the publication of the National Policy for Morbidity/Mortality Reduction due to Accidents and Violence in 2001, the National Policy for the Promotion of Health in 2006, the National Network of Centers for the Prevention of Violence and Health Promotion, deployed in 2004 by the MH are the highlights. This network currently has nearly 800 federal agencies across the country and has developed surveillance, violence prevention and health promotion actions linked to networks of care and protection for people in situations of violence. There is also the Reduction of Morbidity and Mortality in Traffic Accidents Project of 2002 and the Life in Traffic Project; the latter is part of a global initiative called Road Safety in Ten Countries (RS-10) and was implemented in five capitals in 2010 and expanded to all other capital cities in 2011. Another initiative involves a partnership between the Ministry of Health, and the Jorge Careli Center for Latin American Studies on Violence and Health (Claves/ENSP/Fiocruz) that sponsored the third edition of the Distance Learning Course on the prevention of violence. These initiatives have bolstered the priority of the theme in the context of the Unified Health System.

It is hoped that this collection will contribute to a better understanding of the impact of violence on health, in addition to eliciting reflection, discussion and rapprochement with the complexity of the phenomenon of violence, which is not unique and covers various types and natures. With this it is hoped that it will contribute to the development of effective strategies to be implemented by the health sector together with the other sectors in tackling violence, multiplying actions that promote health and the culture of peace and that ensure that rights are not violated!

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