Health promotion and violence surveillance: effectiveness and perspectives

External causes of morbidity constitute an important public health problem, revealed by deaths, bodily injuries, psychological trauma, and associated sequels due to violence and accidents. Taken together, violence and accidents rank third in the causes of death among the Brazilian population, and occupy first place when the analysis is restricted to the group consisting of people from 1 to 39 years of age.

Official records show these tragic results: in 2006 there were 106,651 deaths registered due to external causes; 47,500 homicides, predominantly occurring among adolescents and young adults from 20 to 29 years of age; and around 36,500 deaths caused by traffic accidents, victimizing pedestrians, mainly children and elderly. In addition to physical and psychological damage, external causes have strong economic and social impacts, resulting in lower life expectation and quality, loss of production, absenteeism, medical and hospitalization expenses, as well as family and personal trauma.

To confront this scenario the Ministry of Health includes violence and accidents prevention on its agenda, taking responsibility not only for assistance and rehabilitation of the victims, but also for the related promotion of health and prevention, as well as accidents and violence surveillance. One highlight of these initiatives was the publication, in 2001, of The National Policy for Morbidity Reduction of Accidents and Violence, elaborated with the objective of implementing articulated and systematized actions that can reduce the impact of these damages. In 2003 the Project for Reduction of Traffic Accident Morbidity was implanted; in 2004 the National Network for the Prevention of Violence and Promotion of Health and the National Policy for Attention to Urgencies were created. In 2005 the National Agenda for Surveillance, Prevention, and Control of Accidents and Violence was founded, defining a number of priorities for the following years. Another landmark, the National Policy for Health Promotion, which prioritizes accidents and violence prevention, and the promulgation of peace was created in 2006. In addition to this, in 2006 VIVA (the Organization for Surveillance of Accidents and Violence), became an important player in the process of understanding the magnitude, distribution, and trends of these events. Between 2006 and 2008 the Secretary of Health Surveillance expanded the network of violence prevention centers, now numbering 250 throughout the country, in addition to investing in partnerships with CLAVES/Fiocruz (the Latin American Center for Studies of Violence and Health) that have enabled training professionals in themes related to violence reduction and peace culture. These initiatives have strengthened the priority of this theme in the context of the SUS (Unified Health System), looking to further articulate inner and intersectoral responses.

This thematic issue of *Ciência & Saúde Coletiva* features a series of studies about the impact of violence on health, emphasizing the concepts of surveillance and promotion. It is hoped that this collection will contribute to a better understanding of the effects of violence on health, in addition to awakening reflection, discussion, and the creation of effective strategies to be carried out by the public health sector and further articulated in other sectors. It is also desired that this publication serve to stimulate and enable decision-makers in the Public Health area to promote health and the culture of peace!

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