Methods A network of health ministry focal persons, an internet search of relevant Ministry web-sites, and a Google-search using key words were used to identify national policies for violence and injury prevention. A framework was used for policy content analysis.

Results The majority of national policies had been developed after 2003. 80 English-language policies from 26 countries were analysed further and 45 non-English policies from 16 countries were excluded. The majority of policies fulfilled the criteria for successful health policy making: lead body, intersectoral collaboration, budgets, government approval, defined implementations, timeframe, evaluation. Some areas warranted attention such as quantitative objectives, target population and implementing interventions not based on evidence.

Conclusions Encouraging progress is being made in the WHO European Region. Following the criteria for successful policy making more closely could increase the effectiveness of the preparation and implementation of policies for violence and injury prevention. Areas that warrant attention include setting targets for child maltreatment and domestic violence prevention, as do certain types of injury and violence prevention such as suicide prevention.

Background Injury prevention has featured as a relatively low priority on Government health agendas in Europe and elsewhere, the result of which has been a lack of national policy development. Successful policy making criteria have not been used to systematically evaluate injury and violence prevention policies.

Aim To provide a content analysis of national policies to address violence and injury prevention in the WHO European Region so as to inform where improvements can be made in developing policy.