

For the record, my name is Kathleen Carlson, MS, PhD. I am an epidemiologist and professor of Public Health at the Oregon Health and Science University and Portland State University (OHSU/PSU) School of Public Health, where I teach and conduct research on the epidemiology and prevention of injury and violence using a public health approach. I also serve as Chair of the Gun Violence as a Public Health Issue (GVPHI) Initiative, a cross-institutional effort at OHSU and PSU consisting of faculty, researchers, students, healthcare professionals, and community members devoted to using the tools of public health to reduce the toll of firearm injuries in Oregon. I am writing to express my support for the proposal to invest 3-5% of Oregon's American Rescue Plan Act funding in community violence intervention programs as a way to address the "other epidemic" in Oregon – firearm violence. I am pleased to be authorized to also express the institutional support of OHSU and PSU.

### **The impact of the "other epidemic."**

Firearm violence has been growing at an alarming rate in Oregon. Oregon annual firearm deaths have increased since 2010 from 458, that year, to 592 in 2020.<sup>1</sup> As is the case with the COVID-19 pandemic, communities of color are disproportionately impacted by gun violence and its resulting trauma and death. In the last 10 years in Oregon, rates of firearm homicide were approximately 150% higher for Oregonians identified as American-Indian/Alaskan Natives, and approximately 450% higher for Oregonians identified as Black/African-Americans than for White Oregonians.<sup>2</sup> In Portland, our largest metro region, 50.8% of shooting victims and suspects are Black/African-American, even though Black/African-American people make up only 5.7% of Portland's population.<sup>3</sup> The hurt of this gun violence extends beyond the victims and suspects and has a devastating, long-lasting traumatic impact on individuals, families, and entire communities.

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<sup>1</sup> Centers for Disease Control and Prevention. Web-based Injury Statistics Query and Reporting System (WISQARS) Accessed February 2022 Available from: <https://www.cdc.gov/injury/wisqars/fatal.html>

<sup>2</sup> Centers for Disease Control and Prevention. Web-based Injury Statistics Query and Reporting System (WISQARS) Accessed February 2022. Available from: <https://www.cdc.gov/injury/wisqars/index.html>.

<sup>3</sup> National Institute for Criminal Justice Reform. *The Cost of Gun Violence in the City of Portland*. January 2020. Available from: <https://www.portland.gov/sites/default/files/2020-07/portland-cost-of-violence-report-jan-2020.pdf>

In addition to interpersonal violence, Oregon has some of the highest suicide rates in the US – more than 80% of firearm deaths in Oregon are suicide-related. Rural Oregonians bear the greatest burden of those deaths. The other 20% of firearm-related deaths in Oregon involve homicides, police-involved shootings, and unintentional shootings.<sup>4</sup>

Firearm fatalities represent only part of the burden of firearm injury in Oregon. Firearms cause debilitating *nonfatal* injuries with resulting personal and community trauma. The number of firearm injury emergency department visits in Oregon increased from 534 in 2018 to 872 in 2021. As with firearm death, nonfatal injuries disproportionately affect people of color.<sup>5</sup>

### **The opportunity to address this deadly and debilitating epidemic.**

You have an extraordinary opportunity to allocate funding to support community violence intervention programs that can stop the bleeding and start to heal the trauma. Research demonstrates the value of a range of community-based approaches for addressing gun violence such as:

- place-based interventions that improve neglected neighborhoods and public spaces,
- street outreach programs that interrupt cycles of violence and strengthen non-violent social norms,
- youth programs that focus on employment, job mentorship and training, behavioral interventions, and educational supports, and
- programs that mitigate financial stress by providing timely financial assistance and economic opportunity.<sup>6</sup>

This proposed investment in community violence intervention programs can help to build stronger, safer, and healthier communities in Oregon by stabilizing already existing, but minimally resourced, community nonprofits and allowing for the addition of needed programming.

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<sup>4</sup> Centers for Disease Control and Prevention. Web-based Injury Statistics Query and Reporting System (WISQARS) Accessed February 2022. Available from: <https://www.cdc.gov/injury/wisqars/fatal.html>

<sup>5</sup> Oregon FASTER Project. Unpublished data (for more information contact the FASTER project at [defrancs@ohsu.edu](mailto:defrancs@ohsu.edu)).

<sup>6</sup> Branas et al. *Reducing Violence Without Police: A Review of Research Evidence*. John Jay College of Criminal Justice, City University of New York. 2020. <https://johnjayrec.nyc/2020/11/09/av2020/>

Your action on this budgetary proposal in support of funding for community violence intervention programs can save lives and livelihoods in communities most affected by firearm injury and death. I encourage you, as state leaders, to support this investment of funding in research-based community programs -- and in hope. Violence is not inevitable – it is predictable, and preventable, using the tools of public health such as the evidence-based practices described above.