DATE: February 6, 2024

TO: Senator Floyd Prozanski, Chair

Senator Kim Thatcher, Vice-Chair

Members of the Senate Judiciary Committee

FROM: Angela Zallen, MD, FAAP, Oregon Pediatric Society Board President

SUBJECT: Support for SB 1503 with Amendment – Designate a Pediatric Medical Provider

My name is Dr. Angela Zallen, and I am a pediatric hospitalist in Springfield, Oregon. The Oregon Pediatric Society (OPS) is the state chapter of the American Academy of Pediatrics. Our membership is committed to improving and protecting the health and well-being of all children in Oregon, as well as those who care for them. As the Board President, I am writing on behalf of OPS to strongly endorse SB 1503. OPS and the AAP not only support investigating ways in which we can change the course of the epidemic of both gun violence and youth suicide in Oregon, but we also firmly advise this legislative body to include a pediatric medical provider on the Community Safety and Firearm Suicide Prevention Task Force.

Primary Care providers and pediatric subspecialists are often on the frontline in seeing children and adolescents in our clinic spaces and in the hospital with depression, suicidal ideation, and suicide attempts. In my work as a hospitalist, I routinely stabilize adolescents who have attempted suicide by means other than firearms, almost all medication overdoses. Sometimes, they come in incredibly ill with the worst adverse effects of the medications they ingested, but they almost always survive with timely and efficient medical care. All these adolescents had easy access to the medications they ingested and did not have access to a firearm. Adolescent suicide is fundamentally different than adult suicide. Suicide attempts in teenagers are overwhelmingly impulsive acts in an episode of severe situational hopelessness, many times in the setting of underlying major depression or other mood disorder. The stories I hear most often from survivors are stories of fights with parents or breakups with a significant other or dysfunction in their peer relationships. Many tell me they did not have a plan before they took the medications trying to end their life. And many are remorseful. These are the kids that have a chance to go forward with their lives and get treatment and the mental health supports and treatments they need. But others are not as fortunate. A person that attempts suicide by gun has an 85% chance of ending their life. There is no chance for them to regret their actions.

Pediatricians work day in and day out providing anticipatory guidance to kids and families about a host of things, but most importantly about safety and injury prevention. We do the work of counselling families about safe gun storage, screen adolescents for suicidality, and fiercely try

to get kids the resources they need to thrive. A pediatric presence on the task force created by this bill is imperative and will give vital experience and content area expertise in suicide prevention in the youth of our state. Too often, pediatric experts are left out of high-level conversations regarding the health of those we care for and this is a mistake. The pediatric perspective is needed now more than ever with an ongoing adolescent mental health crisis and increasing rates of suicide attempts and deaths by suicide. Firearms have overtaken all other causes of deaths in people under the age of 18.

Child health providers need to be at the table to advocate for the health and safety of our patients and families and to promote policies that work for Oregon kids and prevent additional senseless deaths. OPS urges you to vote yes for this task force, with an amendment designating that a pediatric medical provider be part of its composition. Thank you for your consideration, and the work you do to protect children.