

Testimony in Support of SB1503
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For the record, my name is Kathleen Carlson and I'm an injury epidemiologist and professor of Public Health at the OHSU/PSU School of Public Health, where I teach and conduct research on injury and violence epidemiology and prevention.

I'm leading a diverse and skilled team of researchers at our newly formed OHSU Gun Violence Prevention Research Center. The primary goal of our Center is to serve as a credible, objective source of data for gun violence and its solutions in Oregon and to contribute nationally to the science of firearm injury prevention. 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 here to express my support for SB1503, and I'm pleased to also be authorized to express the institutional support of OHSU.

This bill is forward-looking in establishing a Task Force on Gun Violence and Suicide Prevention and directing it to identify effective interventions, new advancements, evidence-based practices and policies, and barriers to their implementation.

I would like to briefly share some of the research we are involved in at our Gun Violence Prevention Research Center to illustrate the value and need for research on firearm violence and suicide, how it informs effective solutions and the implementation of those solutions, and how it gives us hope that we CAN and *are beginning to* effectively address the firearm injury epidemic robbing Oregonians daily of their lives and livelihoods.

At our Center we are working to fully understand the burden of the firearm injury epidemic in our state and identify the circumstances that put people at risk of firearm homicide and suicide. Working in collaboration with the Oregon Health Authority, we have been able, *for the first time*, to use our state's health monitoring systems to generate reliable data on *nonfatal* firearm injuries suffered

by Oregonians throughout the state. Our mapping of the nonfatal injury data, combined with fatal injury data, by county, has helped to identify those counties with the highest number and rates of firearm injuries. **When we know the full burden of the firearm injury epidemic and recognize that firearm deaths are only the tip of the iceberg, our solutions will be informed by a more complete picture of the firearm injury problem.**

Our Center researchers are also reviewing and analyzing the emergency department records and patient charts of individuals presenting with firearm injuries to the OHSU and Legacy Emmanuel Trauma centers over the last decade, to better understand the characteristics and context surrounding firearm injury incidents. **When we know more about *how* firearm injuries occur, the *social and environmental circumstances* in which they're occurring, and we identify those who are *most at risk*, solutions can be more effective.**

Researchers at our Center who are trained in evaluation are evaluating the implementation and effectiveness of Healing Hurt People, a hospital-based violence intervention program offered at OHSU, and two Legacy sites, by the Portland Opportunities Industrialization Center, that provides trauma-informed social and emotional services to young men of color who are the victims of shootings. **When we better understand the barriers to the implementation of evidence-based prevention strategies, we can work to surmount them to maximize effectiveness.**

Our Center is also collaborating with the City of Portland and their evaluation team to assess Portland's two-year anti-gun violence intervention strategies and determine barriers and facilitators to program implementation and outcomes. **When we better understand the complexity of the gun violence problem and identify upstream risk factors, the root causes of the problem, we can more effectively address it.**

We have also been conducting an analysis of ERPO petitions filed in Oregon from 2018-2022 to determine the frequency of ERPO use, petitioner characteristics (such as whether a family or household member or law enforcement petitioned), the reasons for petitioning (such as a risk of mass shootings, other assault, or self-harm), and the rate of petition approval/denial. In a second phase of this research, we are specifically examining petitions that were filed to prevent

firearm suicide. **When we conduct analyses of how our state laws are being implemented and utilized, we learn how to improve their ultimate effectiveness.**

Our firearm injury research at the Center also involves Veterans. We are using VA data and interviews with Veterans and VA health care providers who live in rural communities to inform the development of a comprehensive, culturally competent, Veteran-focused firearm injury prevention toolkit for VA facilities and rural-residing Veterans, their caregivers, clinicians, and communities. **When we learn from those most at risk of firearm suicide, and the people who care for them (families and healthcare providers), we can tailor our interventions to best meet their unique needs.**

And last, but not least, in collaboration with the Multnomah County District Attorney's office, my team has established a county-level, multi-disciplinary group of agencies, community-based organizations, and individuals personally affected by gun violence that are conducting comprehensive, intensive reviews of gun violence incidents to better understand the precursors to their occurrence and recommend systemic prevention and intervention strategies. **When we have many voices at the table, including those representing communities most impacted by firearm violence and suicide, our strategies for prevention are more informed and, thus, more implementable, and effective.**

In closing, I want to thank the Committee for its consideration of this bill. I thank you as an injury epidemiologist, who feels fortunate to have the opportunity to do the work my team and I are doing to address our state's firearm injury epidemic, and I thank you as a life-long Oregonian who grew up in small-town Veneta, with a family that used a number of firearms for hunting, hobby, and personal protection, but who has *also* experienced the loss of my grandpa (a WWII Veteran) who died, almost 11 years ago now, from firearm suicide in his little retirement home in Sweet Home, Oregon...not long after we lost my grandma to an illness. So personally, *and* professionally, I'm dedicated to producing science that can help inform a balance between the need to retain *individual rights* while *minimizing* these preventable deaths and injuries.

Thank you and please consider our Center a resource to inform your firearm-related policy decisions.