## *REVISED* STAFF REPORT

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| **Agenda Item:** |  | **Name:** | Clifton Curry |
| **Proposed No**.: | 2018-0367.2 | **Date:** | September 24, 2018 |

**COMMITTEE ACTION**

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| ***Proposed Motion 2018-0367.2 was heard in the Law and Justice Committee on September 11, 2018. The motion was amended in Committee with Amendment 1. The amendment added the Prosecuting Attorney’s Office to the list of Task Force Participants and extended the deadline for the required report from February 1 to July 1, 2019. The amendment was adopted and Proposed Motion 2018-0367, as amended, passed out of Committee with a Do Pass recommendation.*** |

**SUBJECT**

A MOTION establishing a firearm safety task force to develop strategies to reduce the impact of firearm injury and death in King County through the identification and implementation of intervention strategies based on proven public health methodologies; and requiring a report and implementation plan.

**SUMMARY**

Firearm-related violence, and threats of gun violence, whether from intentional or accidental use, undermines the sense of security that all persons should have in their community. The most-recent available Washington State Department of Health data show that firearms are the third-leading cause of injury-related death in Washington State. There have been successful approaches to reducing impact of injuries and deaths in the realms of tobacco use, unintentional poisoning and motor vehicle safety through comprehensive public health responses that included regulation, education and safety measures. In order to apply these public health strategies to the issue of firearm injury and death, the American College of Physicians “supports the development of coalitions that bring different perspectives together on the issues of firearm injury and death.” This Proposed Motion would require that the executive convene a Firearm Safety Task Force to prepare a report that makes recommendations for the development of a comprehensive, coordinated public health strategy for the County to reduce firearms-related deaths and injuries. The Motion would require that the task force develop strategies for intervention programs based on proven public health methodologies specifically to reduce and limit the impact of firearm-related deaths and injuries in King County.

**BACKGROUND**

In 2018, through August, 2018, there have been 39,436 incidents of gun violence nationally, including 9,882 firearms related deaths in the United States, which averages to about forty gun related deaths per day.[[1]](#footnote-1) Since January 2013, there have been 25 mass shootings that have occurred in Washington State, that have resulted in 47 persons being killed and 71 being wounded, and gun violence, and threats of gun violence, whether from intentional or accidental use, undermines the sense of security that all persons should have in their communities. [[2]](#footnote-2)

The Washington State Department of Health (WSDOH) data show that in 2015, firearms were the third leading cause of injury-related death in the state, killing approximately 714 Washington residents.[[3]](#footnote-3) According to the Washington State Department of Health, in 2015 in King County there were 535 suicide deaths and 160 homicides caused by firearms, and 146 residents died from a gun injury. In King County, more people die from firearms than car crashes, making firearm injury one of the leading preventable causes of death.[[4]](#footnote-4) In addition, according to the 2015 Washington Association of Sheriffs and Police Chiefs Annual Report, 62 percent of homicides in Washington State were committed with firearms.

According to the Centers for Disease Control and Prevention, firearm fatalities cost almost $200 million dollars in medical costs and lost productivity in King County in 2015. Public Health - Seattle & King County analysis of the impact of firearm violence in King County, has shown that gun violence has a disproportionate impact on communities of color and that children of color are victims of homicide by firearms at a higher rate than white children in King County.[[5]](#footnote-5)

A 2018 study, published by the American Journal of Public Health, included a broad survey of Washington residents that found that 34 percent of adults surveyed reported having a firearm in their households, of which, almost one-in-five reported that the firearms were not stored in a safe manner even when the respondents reported that they had children in the homes, that the respondents suffered from depression and suicidal thoughts or were engaged in the significant consumption of alcohol. This report also notes that “among ﬁrearm-owning households, unsafe storage practices (keeping ﬁrearms unlocked or loaded) have been associated with a greater risk of ﬁrearm suicide among both youths and adults.” [[6]](#footnote-6) According to the Pacific Northwest Suicide Resource Center, firearms were the leading method of suicide for both males and females in the U.S. and, despite having a much lower suicide rate overall, the firearm suicide rate in the U.S. is six times that of other high-income countries. The Center also notes that the King County suicide rate has increased by about 18% in the last decade.[[7]](#footnote-7)

Local governments in Washington State have taken steps to increase gun safety, including encouraging safe firearm storage through the LOK-IT-UP program and enforcement of Extreme Risk Protection Orders in King County. While these programs provide positive steps for improving firearm safety and reducing firearm-related deaths, there is no coordinated countywide effort among law enforcement, public health, suicide prevention agencies, youth-serving agencies, community groups and other stakeholders for King County residents for reducing injury and death from intentional and unintentional shootings.

**Public Health Approaches to Reducing Injury and Death** There have been successful approaches to reducing impact of injuries and deaths in the realms of tobacco use, unintentional poisoning and motor vehicle safety through comprehensive public health responses that included regulation, education and safety measures. These approaches have been credited with saving millions of lives and avoiding significant numbers of injuries.[[8]](#footnote-8) In order to apply these public health strategies to the issue of firearm injury and death, the American College of Physicians “supports the development of coalitions that bring different perspectives together on the issues of firearm injury and death. These groups, comprising health professionals, injury prevention experts, parents, teachers, law enforcement professionals, and others should build consensus for bringing about social and legislative change.”

The Association of State and Territorial Health Officials (ASTHO) also supports state and territorial health agencies’ efforts to prevent firearm injury and death. ASTHO recommends using a multidisciplinary approach to prevent firearm injury and death that draws on best practices and a breadth of expertise from public health practitioners, healthcare providers, and community partners. The organization notes that effective interventions should encompass all age groups to encourage the systematic and long-term prevention of firearm injury and death. The organization states that “by considering prevention strategies in multiple sectors—family, school, neighborhood, worksite, and healthcare—health agencies can safeguard against firearm misuse, injury, and death.”[[9]](#footnote-9) Further, the National Association of County and City Health Officials supports as policy, the development of community-wide strategies, using “multi-sectoral partnerships (e.g., public health, healthcare, education, law enforcement, justice, mental/behavioral health, social services, community leaders, businesses, and faith-based organizations),” to identify or develop and evaluate strategies to increase firearm safety and prevent firearm injury and death.[[10]](#footnote-10)

King County, along with healthcare providers in the county, recognize that the region could potentially reduce firearm-related deaths and injuries through a comprehensive, coordinated, multidimensional public health strategy informed by other public health successes (see Attachment 2).[[11]](#footnote-11)

**ANALYSIS:**

In order to develop a multi-agency public health approach to reducing firearm violence and injury, this Proposed Motion would require that the executive convene a Firearm Safety Task Force to prepare a report that makes recommendations for the development of a comprehensive, coordinated public health strategy for the County.

The strategy is to be informed by other public health methodologies that have reduced tobacco use and deaths, motor vehicle-related injuries and death, death and injury from poisoning, heart disease deaths and any other successful effort that has succeeded in reducing deaths and injuries to determine if similar methodologies can reduce firearms-related deaths and injuries. The Motion would require that the task force develop strategies for intervention programs based on these proven public health methodologies specifically to reduce and limit the impact of firearm-related deaths and injuries in King County.

The Motion would have task force membership include, but not be limited to, representatives from the following organizations and agencies:

* The City of Seattle and King County Board of Health and Department of Public Health;
* The University of Washington, Harborview Medical Center;
* The University of Washington's School of Medicine, School of Health and School of Social Work;
* First-responder agencies, such as fire, emergency medical services and police;
* Youth-serving agencies;
* Suicide prevention agencies;
* The King County Department of Community and Human Services;
* The King County Office of Performance, Strategy and Budget; and
* The Washington state Department of Health.

The Motion requires that the report include the development of a listing and description of potential strategies and programs that would provide in the county: (1) “universal preventive interventions” for entire populations without regard to individual risk factors and are intended to reach a very large audience, such as school-based programs facilitating healthy social development and proven programs that reducing aggressive behavior among children and adolescents; (2) “selective preventive interventions” for target subgroups of the general population that are determined to be at risk for firearm injury, such as, suicide prevention interventions for older males; and, (3) “indicated preventive interventions” for specific individuals showing signs of the risk of firearm violence, such as the development of conflict resolution interventions for young men who have been arrested for possession of a firearm.

The Motion would have the Executive develop as part of its report, an implementation plan, based on the work of the task force, including a description of each identified intervention strategy, the agency that should have responsibility for implementation of the strategy, an estimated schedule for implementation and the executive's estimated resource requirements for implementing the identified intervention strategies. The report would be due by February 1, 2019.

1. Gun Violence Archive, <http://www.gunviolencearchive.org/> [↑](#footnote-ref-1)
2. Gun Violence Archive, <http://www.gunviolencearchive.org/reports/mass-shooting> [↑](#footnote-ref-2)
3. Public Health – Seattle & King County: Guns in our community, <https://www.kingcounty.gov/depts/health/violence-injury-prevention/violence-prevention/gun-violence/LOK-IT-UP/firearm-facts.aspx>. Accessed September 8, 2018. [↑](#footnote-ref-3)
4. Washington State Department of Health, <https://www.doh.wa.gov/DataandStatisticalReports/HealthStatistics/Death> [↑](#footnote-ref-4)
5. King County Department of Public Health, <https://kingcounty.gov/depts/health/violence-injury-prevention/violence-prevention.aspx> [↑](#footnote-ref-5)
6. Erin Renee Morgan, MS, Anthony Gomez, BS, and Ali Rowhani-Rahbar, MD, PhD, MPH, “Firearm Ownership, Storage Practices, and Suicide Risk Factors in Washington State, 2013–2016,” American Journal of Public Health, Research and Practice, May 17, 2018. [↑](#footnote-ref-6)
7. Pacific Northwest Suicide Resource Center, Suicide Statistics, <http://depts.washington.edu/hiprc/suicide/stats/> [↑](#footnote-ref-7)
8. “Reducing Firearm-Related Injuries and Deaths in the United States: Executive Summary of a Policy Position Paper From the American College of Physicians,” Annals of Internal Medicine, June 14, 2017. [↑](#footnote-ref-8)
9. “Preventing Firearm Misuse, Injury, and Death Position Statement,” Association of State and Territorial Health Officials, September 2018. [↑](#footnote-ref-9)
10. “Statement of Policy: Firearm-Related Injury and Death Prevention,” National Association of County and City Health Officials, March 2017. https://www.naccho.org/uploads/downloadable-resources/99-03-Firearms-prevention.pdf [↑](#footnote-ref-10)
11. “Firearm-Related Injury and Death as a Public Health Problem: The Role of the Physicians and Nurses,” Statement from Public Health – Seattle & King County and Washington State Physician and Nursing Leadership, June 6, 2018. [↑](#footnote-ref-11)