



Public Health Approach to Firearm Violence

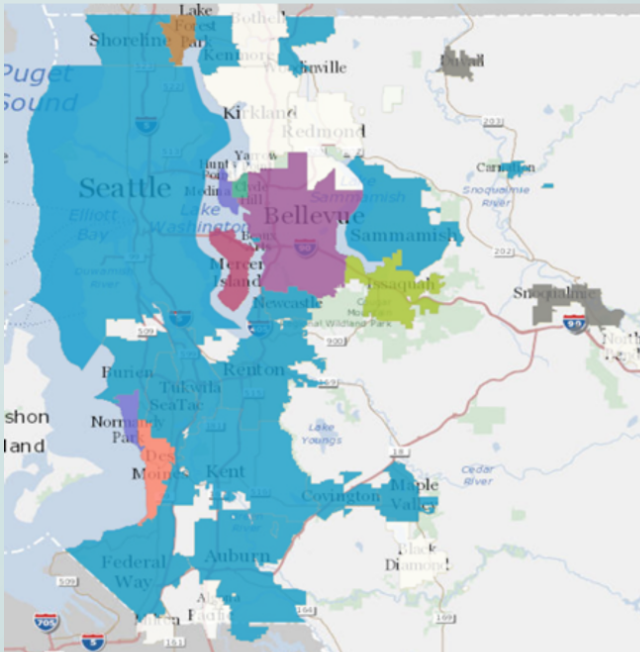
2013: King County Executive adopted public health approach to firearm violence.

➡ Key Finding from Public Health: Lack of essential data collection and sharing mechanisms around firearm violence.

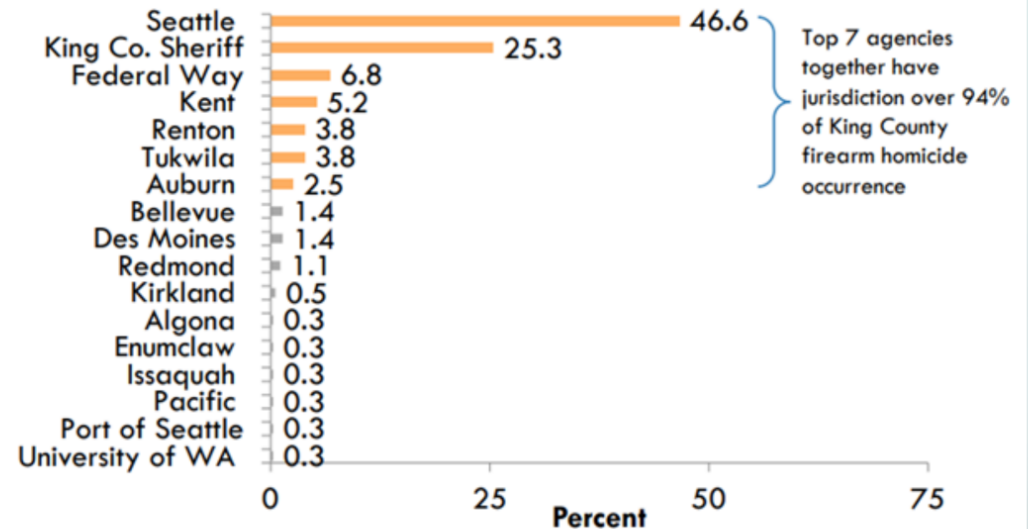
2016: King County PAO partnered with public health and seven local law enforcement agencies on the "Shots Fired" project.

➡ One of initial goals was uniform collection and standardization of data on illegal shootings in King County.

Why those seven agencies?

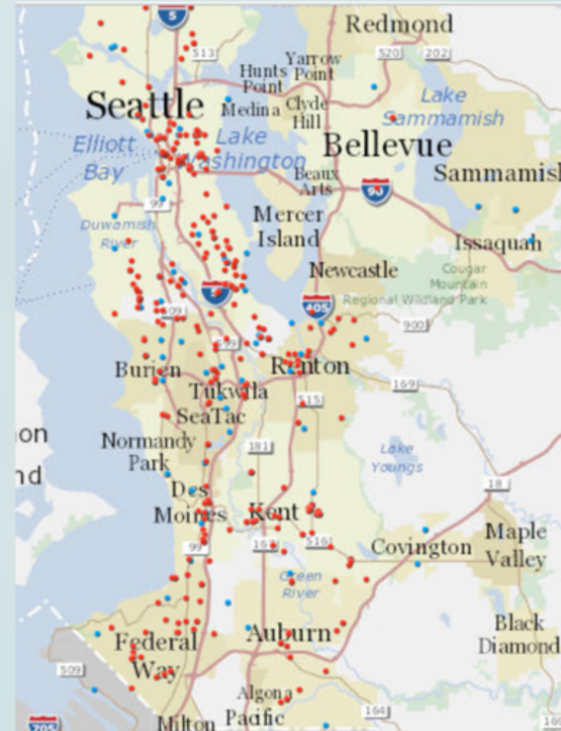


Firearm Homicide Occurrences by Law Enforcement Agency Jurisdiction — King County, WA, 2001-2012



How many people were shot in King County Last Year?

- 70% of homicides in King County involve a firearm.
- Around 4 nonfatal shootings for every firearm homicide.
- Nonfatal shootings not required to be reported in UCR or NIBRS.



Four Types of Firearm Violence

- 1) Suicides
- 2) Mass shootings
- 3) Domestic Violence
- 4) Urban Violence



What Data Do We Collect?

INCLUDES:

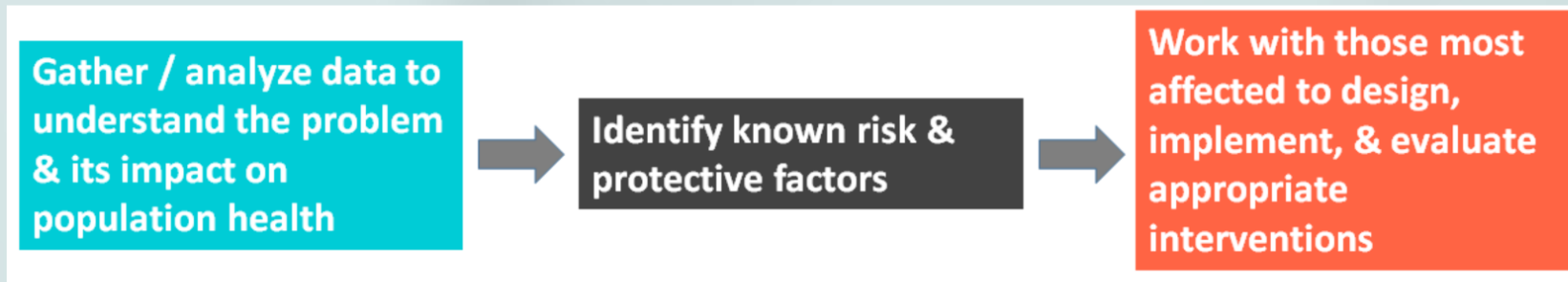
- Shots Homicide
- Shots Injury
- Shots Property
- Shots Fired

DOES NOT INCLUDE:

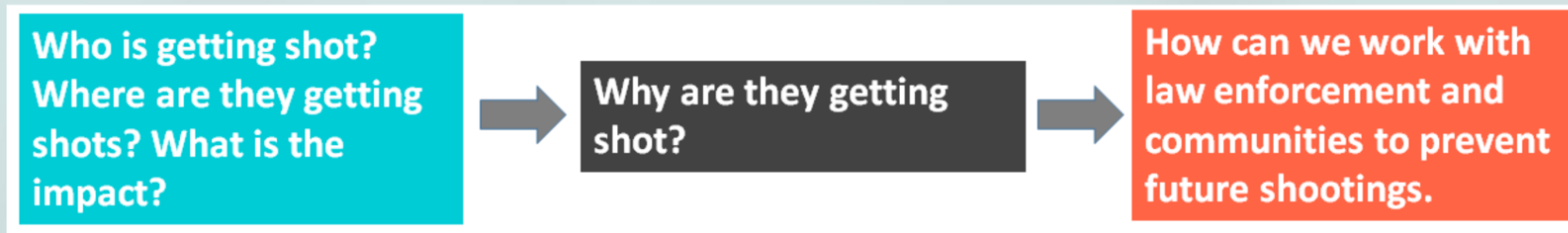
- Suicides
- Officer Involved Shootings
- Gun used in commission of crime but not actually fired



The Public Health Approach

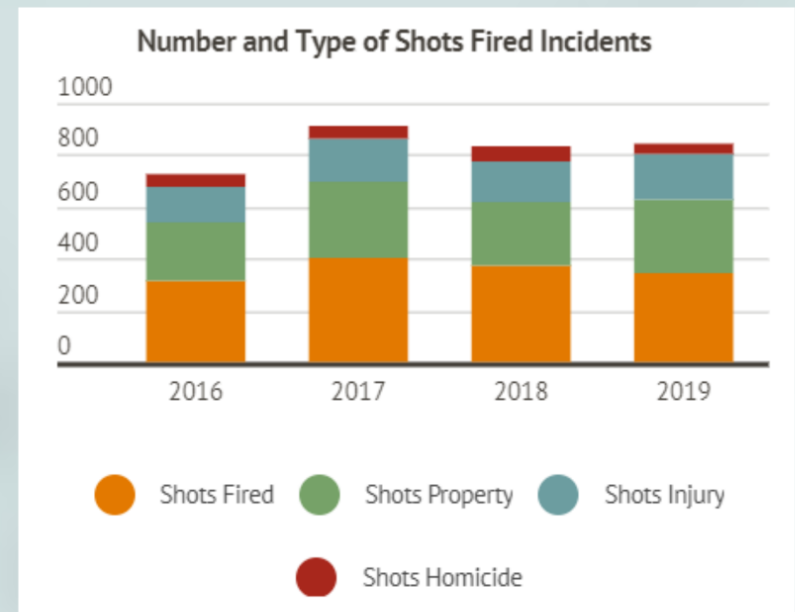


The Public Health Approach for Gun Violence



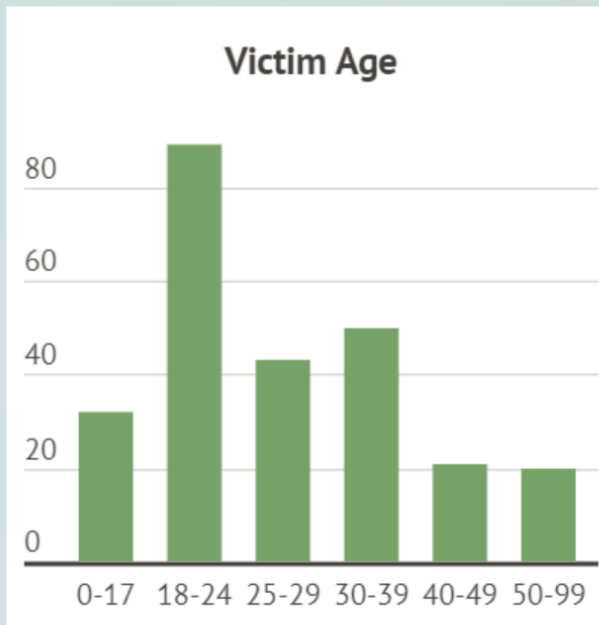
Number of Shootings

In 2019, there were 857 **total shots fired incidents** in King County. There were **49 firearm homicide** victims and **206 nonfatal shooting** victims.

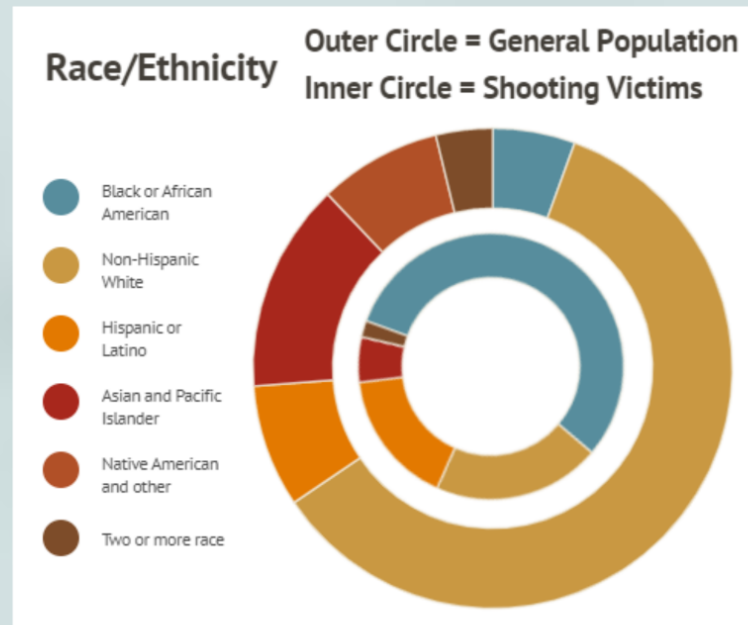


Shooting Victim Demographics

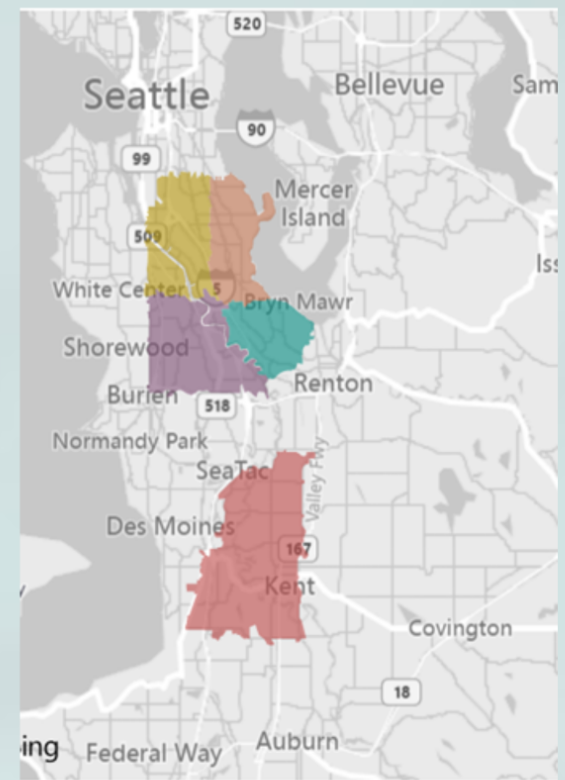
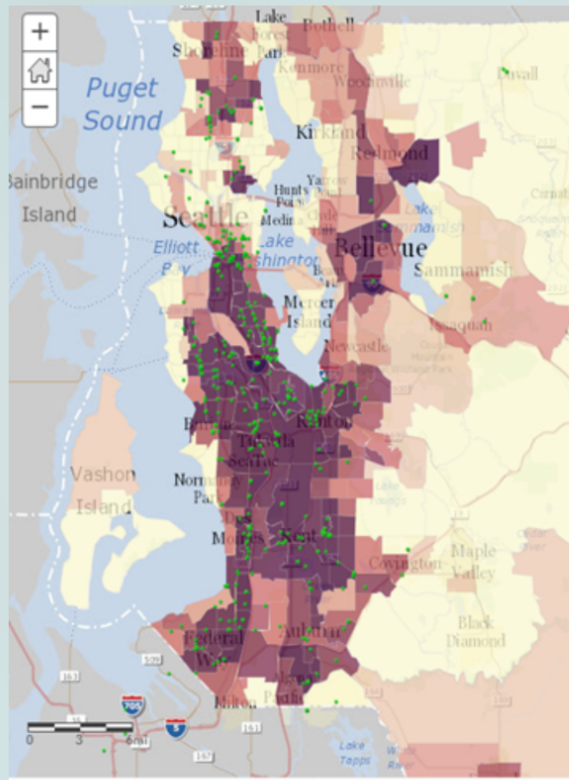
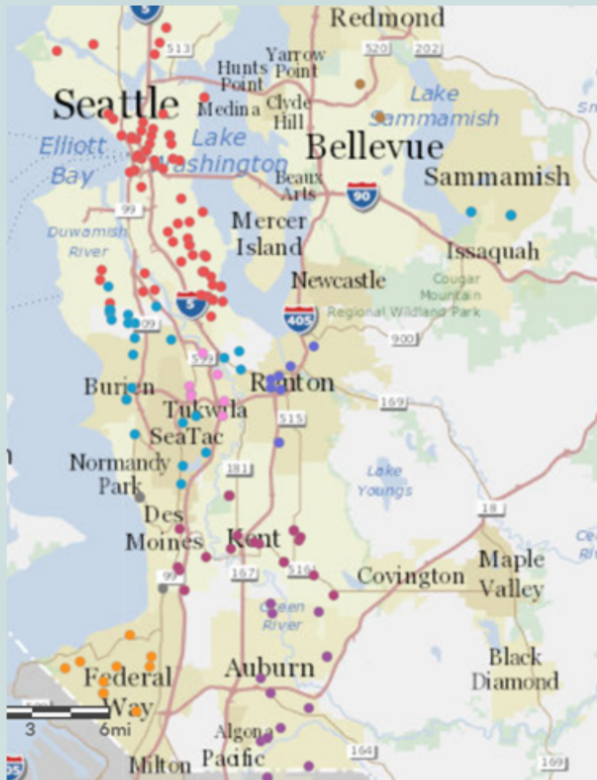
47% were under the age of 25.







80% were people of color



Where are they getting shot?



Health Impact of Nonfatal Gunshot Injuries:

-  Account for significant reduction in life expectancy
-  Reduce overall quality of life
-  Contribute to sustained chronic health conditions
-  Nonfatal shooting victims more likely to be:
 - Shot again
 - Killed with a firearm
 - Arrested for future firearm or violence related arrest

Financial Impact

\$488,000

In criminal justice and healthcare costs for every firearm homicide.

\$71,000

Per inpatient hospitalization for every non-fatal shooting.

Over \$40 million in 2019 alone.

Concentration and Contagion

Gun violence is far from random. It is highly concentrated and clusters tightly in specific places, among specific people, and around specific behaviors.

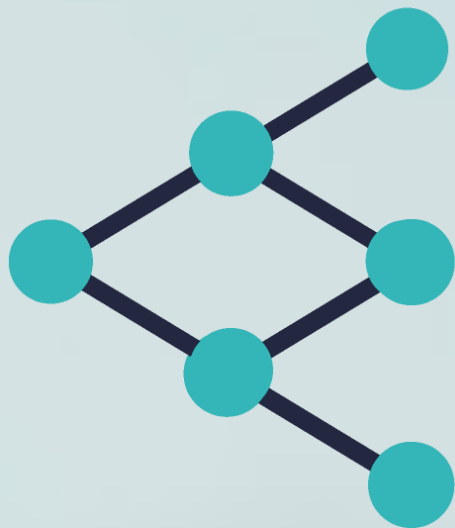


The majority of shootings occur within small, identifiable networks of individuals (both victims and suspects).



Individuals who have gunshot victims in their social network (i.e. relative, friend/ acquaintance, neighbor) are at an extremely elevated risk of becoming victims themselves.

Social Network Analysis



Visualize and map relationships between people

Your relationships influence your behavior, opinions, and attitudes

Relationships influence health outcomes like smoking and alcohol/substance abuse.

Understanding Individual Risk

Individuals who have gunshot victims in their social network (i.e relative, friend/acquaintance, neighbor) are at an extremely elevated risk of becoming victims themselves.

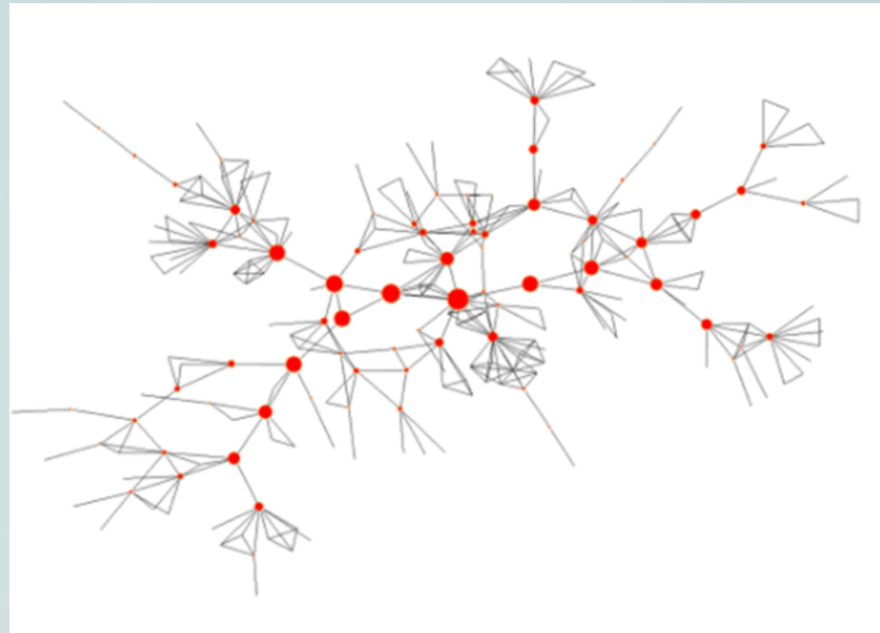
One Example:

6/21/16: Charged with gun possession.

7/1/17: Sister is shot and killed in Seattle.

9/18/17: Present when friend is shot in the leg and foot in Kent.

1/31/18: Shot and killed in Kent.



A Data Driven & Public Health Based Approach

Focuses on prevention
and intervention efforts

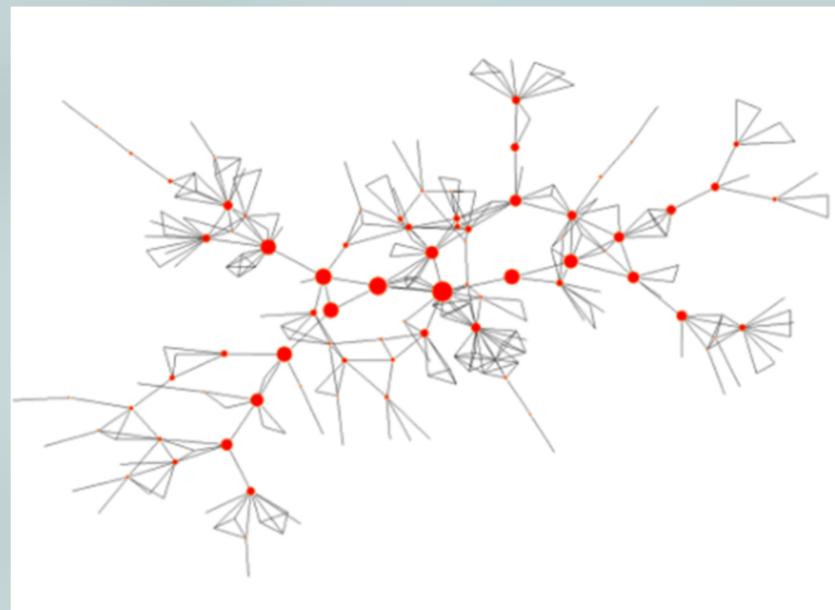
Starts with existing law
enforcement data on
shootings






For those individuals
most at risk of
victimization

To improve community
safety and health outcomes





Adapted Public Health Model



Intervention & Prevention Strategies Generally

-  Deliberate focus on those individuals most likely to shoot someone or get shot themselves.
-  Both evidence and community informed.
-  Based on partnerships between community providers, law enforcement, and public health.

Specific Intervention and Prevention Strategies

-  Direct referrals of shooting victims and witnesses to Harborview Medical Center for trauma informed outreach and services.
-  Direct referrals of shooting victims and witnesses to community service providers
-  Partnered with collaborative of community providers on a focused deterrence based intervention pilot using social network analysis.
-  Partnered with community providers on behavioral change and street outreach based prevention pilot using social network analysis.

What's Working

Growing evidence base of what works (Focused Deterrence, Street Outreach, Cognitive Behavioral Therapy (CBT))

Increased collaboration between community providers, law enforcement, and public health.

What's Missing

Leadership/Organization at the State, County, City level (i.e. Office of Violence Prevention)

Dedicated and sustainable funding for violence prevention at State, County, City level

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