

MEMORANDUM

TO Interested Parties

FROM Giffords Law Center to Prevent Gun Violence

DATE April 23, 2020

RE Protecting Americans from Community Violence during the COVID-19 Pandemic

In the midst of the devastating coronavirus pandemic, millions of American families have demonstrated a selfless resolve and commitment to safeguard their neighbors' health and wellbeing. At our best, we have pulled together to protect each other and honor the worth and dignity of every person.

Yet while this global pandemic spreads, many families in the United States face another ongoing public health crisis that threatens tens of thousands of lives each year. Cycles of community violence and shootings have continued despite widespread shelter-in-place orders, particularly in the communities most vulnerable to the virus's spread, related economic harms, and devastating budget cuts expected in states and cities across the nation.

As detailed below, we urge policymakers at the federal, state, and local levels to address these two crises by:

- Offering emergency federal aid to cities to rescue local public health and safety infrastructure from looming budget cuts
- 2. Providing direct funding at the federal, state, and local level to protect and sustain community-based violence intervention initiatives in cities most impacted by violence
- 3. Leveraging federal funding from the Victims of Crime Act and CARES Act to support existing violence intervention organizations
- 4. Ensuring that violence intervention workers are exempt from shelter-in-place-orders and recognized as essential service providers

Our Cities Are Battling Two Public Health Crises

America's ongoing epidemic of gun violence is deeply entwined with the coronavirus pandemic, as both public health crises <u>tragically amplify the other's harms</u>. Panic buying has resulted in guns and <u>ghost gun products</u> flying off the shelves at <u>unprecedented rates</u>. Researchers have found that previous, smaller spikes in weapon sales (such as gun sale booms following the Sandy Hook Elementary school shooting) were associated with <u>increased</u> firearm injury, and research is clear that where there are more guns, <u>there are</u>, tragically, <u>more homicides</u>.

Shelter-in-place orders have temporarily limited some individuals' exposure to violence. But for others, such as families experiencing domestic violence, isolation and limited access to resources combined with increased gun ownership creates additional risks. There are reports of increased calls to hotlines and service providers; we know that it is five times more likely a woman will be killed when their abusive partner has access to a firearm.

Outside the home, many cities have recently reported drops in crime overall, but <u>shootings</u> and <u>community violence</u> <u>have continued unabated in far too many communities</u>. Mayors and officials around the nation <u>have pleaded with residents</u> to halt cycles of shootings and retaliations as their communities "<u>battle two public health crises</u>: coronavirus and gun violence." The <u>City of Chicago</u> suffered its "most violent day of 2020 so far" on April 7th.

In the coming weeks, health experts warn, shootings are <u>likely to become more fatal</u> as health and public safety systems are increasingly stretched thin. Victims of violence and COVID-19 patients must compete for strapped healthcare resources, including <u>ambulances</u>, <u>ICU beds</u>, <u>and ventilators</u>. Across the country, it is estimated that roughly 80,000 people are admitted to emergency rooms for gunshot wounds each year, of whom 20,000 must be <u>treated in</u> ICUs. Many of these patients require <u>large quantities of blood</u> to stay alive, <u>10 times as much blood</u> as other trauma patients on average. But our healthcare systems are currently battling a "severe shortage" of both <u>blood</u> and <u>ICU</u> resources. In New York City, roughly 20% of ambulance workers <u>are out sick</u>, leading to <u>warnings</u> of a "serious decline in ambulance services" and reports of hundreds of ambulance calls at a time left on hold. Traumatic gunshot injuries that would have been survivable two months ago may often become fatal when health care systems are overwhelmed.

As the virus spreads, depleted homicide investigation units <u>may also become increasingly</u> unsuccessful at holding individuals accountable for violence. Before this crisis hit, law enforcement agencies in cities across the nation already <u>failed to make an arrest</u> in a majority of fatal and nonfatal shootings involving victims of color. When homicide investigators are not able or trusted to bring legal justice to mourning communities, a desperate and traumatized few may become <u>more likely</u> to turn to vigilante <u>retaliatory violence</u> instead.

The Critical Role of Violence Interrupters

At the intersection of these interrelated crises are professional <u>violence intervention</u> <u>workers</u>—also known as violence interrupters, street outreach workers, neighborhood change

agents, and gang intervention workers—who serve on the front lines during outbreaks of violence and now during a global pandemic. These trained professionals skillfully defuse potentially violent situations, help protect people at high risk of violent injury, and <u>disrupt cycles of retaliatory violence</u> by providing individuals and families at the highest risk of violence with a range of direct and targeted support services including conflict mediation, case management, trauma-informed mentoring, cognitive behavioral therapy, employment training, and access to basic necessities.

Communities across the country have achieved rapid, sustained reductions in shootings and homicides by providing targeted and sustained investments in violence intervention workers and initiatives. Through the use of evidence-based strategies like group violence intervention (GVI), relationship-based street outreach, and hospital-based violence intervention programs (HVIPs), cities have cut their gun homicide rates by <u>as much as 50%</u> in as little as two years.

- Oakland, CA, cut annual shootings and homicides <u>nearly in half over six years</u> by incorporating GVI or focused deterrence into a citywide response to violent crime.
- East New York experienced a 50% reduction in gun injury rates after implementing the public health-based strategy Cure Violence, compared to only 5% in the matched comparison area. Cure Violence in the South Bronx also experienced a "strong and significant" decline in gun injuries (37%) and shooting victimizations (63%).
- Evaluations of HVIPs have found that violently injured patients who received services
 were four times less likely to be convicted of a violent crime and roughly four times less
 likely to be subsequently reinjured by violence. In Baltimore, researchers saw an injury
 recidivism rate of 5% for participating patients, compared to 26% for non-participants, a
 decline which generated an estimated \$598,000 in health care cost savings.

Amid the coronavirus pandemic, <u>some states</u> are continuing to protect and expand investments in violence prevention, while others brace for devastating cuts as cities and states face mounting budget crises.

When state and local governments have previously cut funding for violence intervention work during tight financial times, spikes in violence have followed. In Illinois, for example, state-funded violence intervention work suffered major funding lapses in 2007, 2011, and 2015, despite consistently impressive outcomes. Each of these lapses corresponded in time and place with significant increases in rates of violence in Chicago, the city with the highest concentration of funded program sites. These upticks in violence were reversed after state funding was restored. Vulnerable communities need these trusted resources now more than ever, especially if cash-strapped cities and community organizations are unable to sustain broader local investments in social services and public health and safety infrastructure.

Preserving support for violence interrupters' lifesaving work is a necessary and cost-effective measure to prevent cycles of violence and retaliation from taking root in times of distress.

Like the coronavirus, community violence is a devastating marker of inequality in Americans' health and safety. More than 80% of child homicide victims killed before the age of 18 in the United States are people of color. And in 2016, violence was responsible for 50% of all deaths among African American men and boys aged 15–24, meaning the mother of an African American teenager was as likely to lose her son to violence as every other cause of death one can think of *combined*. Our national, state, and city budgets have typically not reflected the moral urgency of these facts. And without emergency aid to help states, cities, and nonprofits avert budget cuts and respond to this leading threat to families' health and safety, risk of violence may worsen still.

Recommendations:

1. Offer Emergency Federal Aid to Cities and Vulnerable Communities to Avert Looming Budget Cuts

Unlike the federal government, which can run a large deficit, <u>states and cities</u> are often subject to <u>strict balanced budget requirements</u>, even in emergencies, that will likely necessitate <u>massive public spending cuts</u> over the months and years to come as coronavirus and economic response <u>costs rise</u> and <u>tax revenues plunge</u>.

To help avert these dangerous cuts, the federal government <u>must step in</u> to provide immediate aid to rescue state and local governments' budgets, with a particular focus on stabilizing public health and safety infrastructure in communities with the greatest need for these resources.

We echo <u>calls</u> by the National League of Cities, the United States Conference of Mayors, and others to provide direct, immediate, and flexible emergency assistance to local governments, especially cities who are most vulnerable to the coronavirus, community violence, and the compounding challenge of severe poverty.

2. Provide direct funding at the federal, state, and local level to protect and sustain community-based violence intervention initiatives in cities most impacted by violence

Communities impacted by violence and looming budget cuts need to keep frontline violence intervention workers on the job, keeping the peace during a time of crisis, and equipped to mitigate new challenges.

While flexible emergency aid to cities and local governments can help avert devastating budget cuts more broadly, we also strongly urge federal lawmakers to provide emergency aid more specifically targeted at sustaining community-based violence intervention nonprofits and initiatives in cities that are most impacted by shootings and community violence.

Late last year, Giffords was proud to partner with other allies and leaders to help develop and endorse the <u>Break the Cycle of Violence Act</u>, introduced in Congress by Senator Booker and Congressman Horsford. That legislation would establish a competitive grant program to provide matching funds to community-based nonprofits, hospitals, and cities operating in partnership with community organizations, to support the most effective violence intervention initiatives in cities with the greatest need for these resources. This legislation, or other related bills, could provide the basis for more immediate and significant federal aid targeted specifically at sustaining lifesaving community-based violence prevention work where it is needed most.

As discussed above, states and cities are facing dire fiscal straits and difficult budget decisions ahead. As they do so, we strongly urge state and local leaders to protect funding for violence intervention initiatives. We must not repeat the devastating lessons learned in previous economic downturns, where budget cuts to these programs were soon followed by deadly and enormously costly spikes in violence soon after.

3. Leverage Other Federal Resources to Help Sustain Existing Violence Intervention Organizations

With increasing limitations on general funds, state and local leaders should also look to leverage federal resources to support violence intervention work and take steps to ensure that violence intervention organizations are aware of these resources.

The CARES Act

The most immediate stopgap source of federal support for nonprofit organizations may come from the recently enacted Coronavirus Aid, Relief, and Economic Security Act (the CARES Act), which included direct financial support for some nonprofit organizations through the Payroll Protection Program (PPP). Under PPP, smaller nonprofit organizations could apply for low-interest loans on a first come, first -serve basis to cover two-and-a-half months of payroll costs. These loans will generally be waived as long as the borrowing organization maintains staffing levels and limits payroll reductions to no more than 25%. However, this limited funding stream was fully depleted in about two weeks, and requires an additional infusion of funding to help keep eligible community-based nonprofits afloat.

We urge federal lawmakers to reauthorize funding for the PPP program and ensure that smaller nonprofit organizations affiliated with larger fiscal sponsors are also able to take advantage of these emergency loans.

The Victims of Crime Act

The federal Victims of Crime Act (VOCA) also presents an opportunity for states to leverage federal resources to fund critical violence intervention work. Federal VOCA Assistance funds are provided as block grants to all 50 states, which are then responsible for redistributing those funds through subgrants to public agencies and organizations that provide a range of services to people who have been victims or witnesses to crime.

Due to changes to the federal funding formula for VOCA, the size of the VOCA assistance block grant provided to each state annually roughly quadrupled after 2014, meaning that many states have recently received millions of dollars in expanded federal funding for these purposes. Since 2016, federal regulations have also required that at least 10% of VOCA assistance awards be allocated to programs that serve "previously underserved populations of victims of violent crime." The US Office for Victims of Crime has noted that "victims of gang violence," "victims of violent crime in high crime areas," "victims of physical assault," and "survivors of homicide victims," are all "often underserved." But many states have typically not used these federal crime victim dollars to meaningfully invest in violence intervention programs working with victims of violence.

In recent years, governors and attorneys general in states including New Jersey, Illinois, Pennsylvania, Virginia, Maryland, and California have taken executive action to use discretionary federal VOCA Assistance funds to support violence intervention efforts focused on crime victims and families at highest risk of re-injury from community violence. Stakeholders across the country should ensure that their state agencies responsible for administering VOCA grants tap this large source of federal funding to support and expand critical violence intervention work and supplement other sources of funding for these programs.

4. Ensure Violence Intervention Professionals Are Exempt from Shelter-in-Place Orders and Recognized as Essential Service Providers

Finally, we urge policymakers to ensure that critical violence intervention workers can continue to do their jobs by exempting them from shelter-in-place orders and taking steps to ensure they have the resources they need to safely conduct their lifesaving work, such as safety equipment and access to state-subsidized child care services. These professionals, often some of the only people trusted by individuals disconnected from other channels of authority and information, have a meaningful role to play in providing ongoing support, counseling, and conflict mediation at times of heightened trauma and uncertainty.

In a neighborhood in unincorporated South Los Angeles, for example, violence intervention workers have partnered with a local grocery store to help prevent looting and ensure community members are informed about social distancing. The City of Los Angeles has specifically exempted "gang and crisis intervention workers" from shelter-in-place restrictions so that they may continue to provide their vital services as "emergency personnel" and essential community service providers. Similarly, Chicago Mayor Lori Lightfoot issued a public letter stating that the

mayor's office "has designated street outreach partners as essential staff during this challenging time."

By following the policy recommendations outlined above, lawmakers can help protect American families from community violence and keep indispensable violence intervention workers on the job serving at the forefront of the most pressing public health crises of our time.