

TESTIMONY IN SUPPORT OF H.B. 822 (LIERMAN)

TO: Members of the House of Delegates Appropriations Committee
SUBMITTED BY: Tiffany Garner, Community Violence Initiative State Manager
DATE: February 24, 2020

Dear Chairwoman McIntosh, Vice Chair Jackson, and Members of the House Appropriations Committee:

On behalf of Giffords, the gun violence prevention organization founded by former Congresswoman Gabby Giffords, I am writing to express our strong support for House Bill 822 (Lierman). This legislation would require a yearly investment of critical funds to sustain and expand the Maryland Violence Intervention and Prevention Program (MD VIPP), which was designed to support evidence-based violence reduction strategies in some of the state's most impacted communities. Borrowing best practices from other states, H.B. 822 makes key changes to MD VIPP that will improve its efficacy and greatly enhance public safety.

Gun Violence in Maryland Demands a Comprehensive Response

Marylanders are all too familiar with the tragic consequences of gun violence. From 2014 to 2018, the state has suffered an average of more than 440 gun homicides *each year* and Maryland continues to have one of the highest gun homicide rates in the nation.¹ This violence is extremely concentrated in a small number of areas. For example, in 2018, 318 people were murdered in Baltimore alone, the vast majority killed with a firearm, and several hundred more were injured in shootings.² Moreover, this violence disproportionately impacts communities of color—particularly young men. In 2018, nearly 80% of the victims of gun homicide in Maryland were African American men.

Although mass shootings dominate headlines and the political debate over gun violence, day-to-day shootings in underserved communities of color are the primary driver of gun violence in Maryland. In recognition of the need to address this preventable form of violence through the expansion of proven public health strategies, MD VIPP was created in 2018.

¹ Centers for Disease Control and Prevention, Web-based Injury Statistics Query and Reporting System (WISQARS), "Fatal Injury Data," last accessed February 24, 2020, <https://www.cdc.gov/injury/wisqars>.

² Jessica Anderson, "Majority of Baltimore Homicide Victims in 2018 Were Shot in the Head, Analysis Shows, The Baltimore Sun, Jan. 2, 2019, <https://www.baltimoresun.com/news/crime/bs-md-sun-investigates-homicides-20190102-story.html>.

The program was based on the insight that in cities across the nation only a very small percentage of individuals are actually responsible for the vast majority of serious violence. As a result, programs that break the cycle of retaliatory violence by providing highest risk individuals with timely interventions tailored to addressing the root causes of violence are most likely to succeed.

For example, research shows that, when fully funded, street outreach programs in certain Baltimore neighborhoods have decreased killings by 56% and shootings by 34%.³ An evaluation of a hospital-based violence intervention program operating out of Baltimore's Shock Trauma Center found an injury recidivism rate of just 5% for participating patients, compared to 36% for non-participants, and showed that participants were half as likely to be convicted of a crime and *four times less likely* to be convicted of a violent crime than those who did not participate.⁴

Maryland needs to scale up strategies like these in its most impacted communities, and this is exactly what MD VIPP was designed to support. However, in its first two years of existence, the program has not received the consistent financial and administrative support that is the hallmark of effective violence reduction programs in other states. Although in its first year (FY19) the Governor included \$5 million in his budget for these critical intervention and prevention strategies, he provided *no funding* in FY20. In addition, important evaluation and research components of MD VIPP have still not been implemented.

In looking at best practices from other states, robust and sustained investments in evidence-based violence reduction strategies have helped to dramatically decrease levels of community violence. H.B. 822 will align MD VIPP with these best practices and provide a stable source of funding for the local implementation of violence reduction strategies focused on those at highest risk of engaging in violence in Maryland's most impacted communities.

This is an investment that will save both lives and taxpayer dollars.

³ See Webster, et al., Evaluation of Baltimore's Safe Streets Program: Effects on Attitudes, Participants' Experiences, and Gun Violence, Johns Hopkins Center for the Prevention of Youth Violence, Johns Hopkins Bloomberg School of Public Health, January 11, 2012, https://www.jhsph.edu/research/centers-and-institutes/center-for-prevention-of-youth-violence/field_reports/2012_01_11.Executive%20SummaryofSafeStreetsEval.pdf.

⁴ T.L. Cheng, et al., "Effectiveness of a Mentor-Implemented, Violence Prevention Intervention for Assault-injured Youths Presenting to the Emergency Department: Results of a Randomized Trial," *Pediatrics* 122 (2008): 938-946, <http://www.ncbi.nlm.nih.gov/pubmed/18977971>; see also C. Cooper, D.M. Eslinger, and P.D. Stolley, "Hospitalbased Violence Intervention Programs Work," *J. Trauma* 61 (2006): 534-540, <http://www.ncbi.nlm.nih.gov/pubmed/16966983>.

H.B. 822 Requires an Investment in Proven Violence Reduction Strategies

H.B. 822 will make critical improvements to MD VIPP, a competitive grant program that awards resources to communities with the greatest need in order to fund local public health strategies with the strongest likelihood of reducing gun violence in the near term.

First, in order to prevent harmful lapses in funding, this bill would require a yearly appropriation of at least \$10 million for MD VIPP. Second, the bill would substantially strengthen the evaluation component of the program by providing resources for the state to contract with outside evaluators, whose findings would be made available to the public. Finally, the bill would clarify the role of the Advisory Council to advise the Executive Director of the Governor's Office of Crime Control and Prevention (GOCCP) on the distribution of funding for this important program and provide funds to improve GOCCP's administration and oversight capabilities.

By providing ongoing state support for public health strategies like those mentioned above, H.B. 822 reflects the important truth that we cannot merely police and incarcerate our way to safer communities. Effective public health strategies must be a central component of Maryland's response to community violence. Investing in programs proven to reduce rates of violence in impacted communities *without* increasing rates of incarceration, is an issue of public health, public safety, and basic equity. Other states making this investment have witnessed impressive results.

Similar Investments in Other States Have Contributed to Reductions in Shootings

States that have provided sustained support for evidence-based violence intervention programs have seen impressive reductions in violence in recent years. New York, which has long provided stable funding to such programs, has seen a nearly 40% reduction in its gun homicide levels since 2010.⁵ In California, cities supported by the state's equivalent grant program, CalVIP, have seen reductions in homicides *three times greater* than other California cities.⁶ Yet, where state funding has been cut, increases in violence often follow. Chicago has seen a spike in violence each time that state leaders cut funding for violence reduction programs.⁷

⁵ "Fatal Injury Data," Centers for Disease Control and Prevention, Web-based Injury Statistics Query and Reporting System (WISQARS), <https://www.cdc.gov/injury/Wisqars>.

⁶ Based on analysis of FBI Expanded Homicide Data for the state of California and the cities of Bakersfield, Berkeley, Chula Vista, Compton, Duarte, Gilroy, Inglewood, Lompoc, Long Beach, Los Angeles, Oakland, Oxnard, Parlier, Pasadena, Perris, Richmond, Sacramento, Salinas, San Bernardino, San Francisco, Santa Rosa, Seaside, Stockton, and Vallejo. See Crime Data Explorer, <https://crime-data-explorer.fr.cloud.gov/explorer/state/california/shr>, last accessed November 20, 2019.

⁷ Charles Ransford, The Relationship Between Cure Violence (CeaseFire) and the Increase in Shootings and Killings in Chicago, https://1vp6u534z5kr2qmr0w11t7ub-wpengine.netdna-ssl.com/wp-content/uploads/2019/10/2017.02.15_Chicago-Increase-Research-Summary.pdf.

In 2017, Giffords released a comprehensive report titled, *Investing in Intervention: The Critical Role of State-Level Support in Breaking the Cycle of Urban Gun Violence*.⁸ This report details how three model states—Massachusetts, New York, and Connecticut—have achieved reductions in gun homicide rates⁹ by pairing strong regulation of the firearm *supply* with stable investments in narrowly targeted violence prevention and intervention programs that address the *demand* side of the violence equation.

H.B. 822's \$10 million mandatory appropriation would amount to an additional investment of roughly \$1.66 per Marylander in evidence-based violence prevention and intervention programming. For context, Massachusetts, which has a comparable population size to Maryland, spends about \$5.00¹⁰ per capita on its statewide violence prevention and intervention grant infrastructure. This investment has contributed to significant reductions in violence in Massachusetts, which has one of the lowest gun homicide rates in the country:¹¹

Between 2011 (when Massachusetts substantially increased its investment in public health approaches to violence reduction) and 2016, Massachusetts's gun homicide rate fell by 31%, at the same time that gun homicides were increasing by 28% nationally and by 59% in Maryland.¹² This was driven by the fact that gun homicide rates among 14 to 24-year-olds dropped by 47% in Massachusetts, even as they were rising by 20% nationally and by 49% in Maryland.¹³

H.B. 822 would bring MD VIPP in line with many of the best practices in Massachusetts, including sustainable funding, dedicated resources to improve oversight, evaluation, and the provision of technical assistance to grantees, and focusing the provision of services to those at the highest risk of engaging in violent behavior.

This Investment Should Generate Significant Savings for Maryland Taxpayers

This lifesaving investment has the potential to be extremely cost effective, but must be sustained over time. Researchers examining violence reduction initiatives in Massachusetts

⁸ See Giffords Law Center to Prevent Gun Violence, "Investing in Intervention: The Critical Role of State-Level Support in Breaking the Cycle of Urban Gun Violence" (Dec. 2017), at <http://lawcenter.giffords.org/wp-content/uploads/2017/12/Investing-in-Intervention-12.18.pdf>.

⁹ According to CDC Fatal Injury Reports for 2015-16, Massachusetts, New York and Connecticut's age-adjusted gun homicide rates were 83%, 73%, and 73% below Maryland's, respectively.

¹⁰ Massachusetts's Safe and Successful Youth Initiative, Shannon Community Safety Initiative grants, and Department of Public Health Youth Violence Prevention Program grants provided more than \$30 million in grant funding for violence reduction strategies in FY 2020, discounting investments in law enforcement strategies.

¹¹ See Giffords Law Center to Prevent Gun Violence, "Investing in Intervention: The Critical Role of State-Level Support in Breaking the Cycle of Urban Gun Violence" (Dec. 2017), at <http://lawcenter.giffords.org/wp-content/uploads/2017/12/Investing-in-Intervention-12.18.pdf>.

¹² Based on CDC Fatal Injury Reports, available at <https://webappa.cdc.gov/sasweb/ncipc/mortrate.html>.

¹³ *Id.*

calculated that state taxpayers saved up to \$7.35 for every dollar invested in the state's public health-oriented youth violence reduction program, known as the Safe and Successful Youth Initiative.¹⁴

Such savings are possible because of the enormous human, moral, *and* fiscal burdens imposed by gun violence. Cost estimates relied on by the Centers for Disease Control and Prevention (CDC) indicate that gun violence in Maryland imposes over \$3.3 *billion* dollars in costs per year.¹⁵ This figure includes the healthcare and criminal justice costs that result from shootings, as well as costs to employers, lost wages and taxes, and costs associated with reduced quality of life. Whether they realize it or not, even those Marylanders living in the very safest communities are paying an incredibly high price for gun violence.

This is because many of the costs of gun violence are shouldered directly by Maryland taxpayers. As many as 85% of gunshot victims, for example, are either uninsured or on publicly funded insurance programs such as Medicaid. Additionally, law enforcement efforts are funded entirely by taxpayer dollars. These direct expenses from gun violence cost Maryland taxpayers some \$294 million per year.¹⁶ The investment called for by H.B. 822 could therefore result in cost *savings* for Maryland taxpayers if it helps prevent just eight homicides per year.¹⁷ The strengthened evaluation provisions of H.B. 822 and its public reporting requirements will help provide accountability and ensure that the program is having its intended effect, while also helping to build up the violence prevention field in Maryland.

By making a number of crucial changes to MD VIPP, H.B. 822 will help put Maryland on the right path to addressing daily violence, and will improve public safety by ensuring that opportunities to intervene in daily violence are not missed.

We ask for a favorable report on HB 822.

Sincerely,

Tiffany Garner

Community Violence Initiative State Manager

Giffords

¹⁴ Patricia E. Campie, et al., "Massachusetts Safe and Successful Youth Initiative, Benefit-to-Cost Analysis of Springfield and Boston Sites," American Institutes for Research and WestEd, Nov. 26, 2014, <http://www.air.org/sites/default/files/downloads/report/Benefit%20to%20Cost%20Analysis%20of%20Boston%20and%20Springfield%20SSYI%20Programs.pdf>.

¹⁵ See Giffords Law Center, "The Economic Cost of Gun Violence in Maryland" (January 2018).

¹⁶ *Id.*

¹⁷ Calculated using the Pacific Institute for Research and Evaluation's model of the cost of gun violence, "Societal Cost per Firearm Injury, United States, 2010," Pacific Institute for Research and Evaluation, Dec. 2012, <http://www.pire.org/documents/gswcost2010.pdf>. All cost estimates were adjusted to 2016 dollars.