Task Force on Community Safety and Firearm Suicide Prevention

Executive Summary: August 2026 Report

The Task Force on Community Safety and Firearm Suicide Prevention was created via Senate Bill 1503 and has met monthly since October of 2024. This Task Force brought together individuals from the state of Oregon with expertise in areas such as suicide, lethal means management, violence prevention, tribal affairs, domestic violence, and mental health care. During the monthly meetings, the Task Force heard from national experts in the areas of science-based suicide care, science-based community violence reduction, firearms cultural competence, lethal means management, tribal health and firearms storage.

Firearm injury is a public health crisis impacting communities across Oregon, especially rural Oregonians and veterans. The majority of firearm-related deaths in Oregon were firearm suicides. Suicide continues to be a significant public health issue in Oregon, as the 8th leading cause of death in Oregon overall, and the second leading cause of death among Oregonians ages 5 to 24. Finding ways to reduce suicidal crisis while also reducing access to firearms in times of crisis is critical to saving lives.

Membership

Donna-Marie Drucker, Co-Chair	A representative of a nonprofit organization focused on suicide prevention with experience in lethal means safety
Andrew White, Co-Chair	A psychologist who works with youth
Valerie Colas	A public safety policy advisor to the Governor
Paul Kemp	A representative of a community-based firearm safety and protocols program
Kathleen Carlson	A representative of the public health research field
Vanessa Timmons	A behavioral health professional or provider
Emmy Ritter	An adult behavioral health provider
Matthew Crabtree	A medical provider who has worked with firearm violence victims
Dean Sidelinger	A representative of a state public health agency
Andy Leonard	A tribal representative from a suicide prevention program
Jerome Sloan II	A person with lived experience with community safety threats or suicidal ideation
Chris Burley	A representative of law enforcement
James Dixon	A professional who works in veterans' mental health

Additionally, the taskforce has 4 non-voting members: Sen. Floyd Prozanski, Sen. David Brock Smith, Rep. Jason Kropf, Rep. Rick Lewis. It is staffed by Toni Kemple, Paralegal in the Criminal Justice Division and Alicia Temple, Legislative Director for DOJ.

Findings:

Suicide remains a significant public health issue in Oregon, with a statewide suicide rate higher than the national average. When looking at suicide methods and firearms deaths in Oregon, 77.6% of all firearms deaths from 2018 to 2022 were from suicide (a rate higher than the national average), and over half of all suicide deaths were related to firearms.

Firearm injury is a public health crisis impacting communities across Oregon, resulting in 642 deaths in Oregon in 2023 alone. The majority of these firearm-related deaths in Oregon were firearm suicides (76%). For every person killed by a firearm, more will suffer nonfatal firearm injuries. In 2023, there were a total of 761 firearm injury emergency department visits across Oregon

While Oregon has expanded screening for suicide, actual treatment for suicide remains unfunded and unevenly expanded across the state. Additionally, while multiple science-based approaches to suicide treatment exist (e.g. CAMS, DBT, CBT-SP), they are not implemented comprehensively and with fidelity across the state. These approaches have robust evidence for the treatment of individuals experiencing suicidal crisis and ongoing suicidal ideation, have been developed with the voices of individuals with lived experience, and have demonstrated effectiveness with at risk populations, across languages and cultural groups, and with stigmatized and marginalized groups.

Suicide and Firearms Policy Recommendations

1. **Mandatory County or Regional Suicide Fatality Review Boards for Adults Over the Age of Twenty-Five**

   Oregon needs a consistent statewide process to review suicide deaths and use findings to inform prevention

2. **Voluntary Firearm Storage**

   When individuals are experiencing a crisis, including suicidal ideation, it is important to further increase the time and distance between the individual and access to lethal means.

3. **Dedicated Resources for Adult Suicide Intervention and Prevention Plan (ASIPP) Implementation**

   Oregon needs dedicated resources at the Oregon Health Authority to move the Adult Suicide Intervention and Prevention Plan from planning to implementation.

4. **Creation of structures to support science-based suicide treatment**

   While highly efficacious treatments exist to support individuals in both acute and chronic suicidal distress, these treatments are difficult to access in Oregon.

5. **Creation of sustainable state funding for community violence intervention (CVI) programs**

   CVI programs employ individuals with lived experience of gun violence to build relationships with and address the needs of individuals at high risk for gun violence by providing connection to services and supports, conflict mediation, and mentoring.

Additional policy recommendations can be found in the full report.