## Speaking the Same Language: Developing Culturally-Informed Messages about Firearm Safety

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Living and working in rural Central Oregon, researchers at Oregon State University (OSU) – Cascades became aware of the number of suicides in rural Oregon and interested in reducing these deaths. Data suggest that over 50% of suicides nationally occur with firearms, and these numbers exceed 60% in parts of rural Oregon (Shen & Millet, 2015). It is also well established that most people who die by suicide have visited their primary care physician within a year of their death. With these data in mind, the OSU-Cascades



research team collaborated with the nearby LaPine Community Health Center to see if together they could find a way to stimulate effective conversations between primary care providers and those at risk of suicide, as well as family members, about voluntarily limiting access to firearms. Research team members included Drs. Susan Keys, Elizabeth Marino, and Christopher Wolsko from OSU- Cascades; Dr. Laura Pennavaria, Medical Director, LaPine Community Health Center; and Ms. Cheryl Emerson, Mental Health Clinician. Drs. Keys and Marino and Ms. Emerson attended the Research Training Institute sponsored by the Injury Control Research Center for Suicide Prevention (ICRC-S) in 2014.

With grant support from the ICRC-S, the research team launched five focus groups with rural firearm owners and three key informant interviews with leaders in the Central Oregon firearm community to better understand firearm culture and identify language that would be acceptable to gun owners and consistent with the values and worldviews already present within gun-owning communities. Once identified, culturally-informed messages were designed and tested in a national survey of gun owners. Test data indicated that typical public health messages about risk factors and warning signs

were not effective in motivating people to limit firearm access, but when public health messages were paired with culturally-informed messages about guns and firearms, people reported a significantly higher likelihood of removing firearms to a safe place and discussing the details of their firearms with their physician. Examples of messages that were found to be effective included: "People who love guns love you. If you or someone you know are thinking of suicide, it's time to act," and, "We believe firearms are an American way of life – a constitutional right and a necessity in order to protect ourselves and our families. And with this right to bear arms comes responsibility. Everyone experiences tough times. During such times, some of us may not be in the right state of mind to be handling weapons."

The research team, along with advisors from the LaPine Community Health Center and additional funding from the Oregon Health Authority, have used these findings to produce two tools for use in primary care settings --- and beyond: A brochure for those at risk of suicide and their family members and friends and a research brief/tip sheet for primary care providers on the do's and don'ts of having an effective conversation with a patient about limiting access to firearms. The tools are not yet publicly available, but the research team's next steps are: (I) developing a dissemination plan for the tools and (2) testing to see if the tools do in fact impact attitudes and behaviors around voluntarily limiting access to firearms.

(I) Shen X, Millet L. (2015). Suicides in Oregon: Trends and Associated Factors. 2003-2012. Oregon Health Authority, Portland, Oregon.

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