# Making Communities Safer

An Interview with Joseph Victor Sakran, MD, MPH, MPA, FACS Vice Chair, Clinical Operations, Department of Surgery, Director, Emergency General Surgery, Associate Professor of Surgery and Nursing, Johns Hopkins Medicine and Senior Fellow, Satcher Health Leadership Institute, Morehouse School of Medicine

**EDITORS' NOTE** Dr. Joseph V. Sakran is a trauma surgeon, coalition builder, policy advisor, public health expert, and nationally recognized advocate for gun violence prevention. A survivor of gun violence himself, Dr. Sakran's interest in medicine and trauma surgery began after a stray bullet nearly killed bim during his senior year of high school. He has subsequently dedicated his life to treating the most vulnerable, eliminating health inequities, and advancing public policy that allevi-



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ates structural violence in low-income communities. In addition to being an active clinician, Dr. Sakran is widely known for building diverse coalitions and advocacy efforts within public bealth and policy communities. Dr. Sakran has been recognized for his public health expertise, specifically on firearm injury prevention. He was recently recognized by the Society of American Gastrointestinal and Endoscopic Surgeons as the recipient of the Social Justice and Health Equity award. Dr. Sakran has also been bonored by the Agency for Healthcare Research and Quality (AHRQ) and Academy Health, and be is a 2020 recipient of Johns Hopkins' Catalyst Award for pioneering research on physicians' roles in educating patients on safe gun storage. In 2019, Dr. Sakran was named a Presidential Leadership Scholar in which he furthered his research on safe gun storage. Selected by the National Academy of Medicine to be a Robert Wood Johnson Foundation Health Policy Fellow, he was honored to serve in the U.S. Senate in the office of New Hampshire Senator Maggie Hassan of New Hampshire, where he worked on health policy and regulatory issues from 2019-2020. Dr. Sakran serves on the governing council of the Young Fellows Association of the American College of Surgeons (ACS), and is chair of ACS' International Committee for Operation Giving Back. He served on the board of Brady United and frequently collaborates with other gun violence prevention organizations. Dr. Sakran received his medical degree from The Medical School for International Health in Israel, a unique collaboration between Ben-Gurion and Columbia University. He completed bis general surgery training at Inova Fairfax Hospital, and later completed a fellowship in Traumatology, Surgical Critical Care, and Emergency General Surgery at the Hospital of the

University of Pennsylvania. He also holds an MPH from the Johns Hopkins Bloomberg School of Public Health and an MPA from Harvard Kennedy School of Government. Dr. Sakran earned his undergraduate degree from George Mason University, where he first trained as a medic and firefighter.

**INSTITUTION BRIEF** The mission of Johns Hopkins Medicine is to improve the health of the community and the world by setting the standard of excellence in medical education, research

and clinical care. Diverse and inclusive, Johns Hopkins Medicine educates medical students, scientists, healthcare professionals and the public; conducts biomedical research; and provides patient-centered medicine to prevent, diagnose and treat human illness. Johns Hopkins Medicine (hopkinsmedicine.org) receives nearly 4 million patients and 325,000 emergency room visits annually. With more than 40 care locations, Johns Hopkins Community Physicians receives more than 902,000 patients each year. Johns Hopkins Home Care treats nearly 160,000 adults and children in Central Maryland annually.

#### Will you provide an overview of your role and areas of focus?

Currently, I serve as the Director of Emergency General Surgery, Associate Professor of Surgery and Nursing, and Vice Chair of Clinical Operations at The Johns Hopkins Hospital. As a trauma surgeon, I may spend one moment caring for a patient who has multiple gunshot wounds and the next operating on a patient with acute appendicitis. The breadth of my surgical practice stretches across the discipline of acute care surgery, which for all intents and purposes is trauma, surgical critical care, emergency general surgery and elective general surgery. My practice also incorporates the utilization of robotic emergency and elective general surgery.

#### How did your involvement in taking a leadership role in addressing gun violence develop and will you discuss these efforts?

The role I currently play in gun violence prevention is never one that I chose to do. I was catapulted into this world after nearly losing my life during my senior year of high school after being shot in the throat with a .38 caliber bullet. Being a survivor of gun violence led to my interest in medicine and trauma surgery. As I continued to grow professionally,

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I began to realize that the best medical treatment is prevention. I subsequently focused on treating the most vulnerable, reducing health disparities among marginalized populations and advancing public policy that alleviates structural violence in low-income communities. I've been fortunate enough to collaborate with other incredible people and organizations such as those at the Satcher Health Leadership Institute at Morehouse School of Medicine where I serve as a senior fellow.

In addition to being an active clinician, I've focused on building diverse coalitions and advocacy efforts within public health and policy communities. Following a 2018 comment by the National Rifle Association that doctors should "stay in our lane" with regard to gun violence prevention, I helped spearhead an effort launching the twitter handle @ThisIsOurLane, a community of healthcare professionals dedicated to reducing firearm injuries and deaths. These experiences have led to broaden my impact in the gun violence prevention community, most recently in my role as a board member at Brady United.

### What do you feel are the keys to driving sustainable change in the fight against gun violence?

The fight against gun violence rests in understanding that there is no one solution. The complexity of this public health problem requires a multi-faceted approach. Sustainable change also requires us to break down the silos that exist in cities to ensure widespread communication, sharing of data, and implementing of comprehensive policies across sectors that allow us to work hand-in-hand to make communities safer.

## Do you feel that there is an effective dialog taking place among policymakers on the need to address gun violence?

A dialogue is taking place among policymakers; however, whether or not it's effective depends on how you look at it. At the federal level, I would say no, and this is predicated on the fact that we have not seen execution of common-sense gun reform in decades. When you look at cities and states across the U.S., there are clear examples of policymakers passing gun violence prevention legislation to make their communities safer. When you have that type of change, it would imply to me that the dialog happening is effective.

#### What role can leading health systems play in addressing gun violence?

Health systems are central to addressing gun violence in that we are the ones caring for the patients and talking to families. Our health systems should be partnering with communities to invest in programs such as hospital-based violence intervention programs and other community-based programs. Having skin in the game allows us over time to establish the necessary relationships and trust that are critical to driving change in communities and addressing structural violence which is at the core of the urban violence we often see. Healthcare professionals are trusted public messengers – we have both the opportunity and responsibility to make sure our voice is used to continue elevating this public health crisis we face.

### Is there an effective understanding that gun violence is a public health issue?

Over the years, we have seen a paradigm shift where Americans are beginning to understand that gun violence is a public health problem. We need to continue to push this concept to change the conversation from this being solely a criminal justice issue to a public health issue that has numerous facets which need to be addressed. A public health approach also requires us to modify our focus from simply placing efforts on changing human behavior, which itself is not cost effective, to developing a system where fewer people are injured or killed.

## Are you optimistic that true, sustainable change is possible in the fight against gun violence?

I'm optimistic because despite the lack of change at the federal level, over the past decade the country has changed. We had a Presidential election in 2020 where gun violence prevention was one of the top issues for voters, and of course we had candidates that made this a central part of their platform. In addition, it's important to remember that most governing in America happens at the local and state level. We have seen what has happened in numerous states like Virginia in their ability to pass common sense gun legislation that ultimately will make communities safer. •

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