

On the Front Lines

An Interview with Chethan Sathya, Director, Center for Gun Violence Prevention, Northwell Health

EDITORS' NOTE Dr. Chethan Sathya is a pediatric trauma surgeon and National Institutes of Health (NIH)-funded firearm injury prevention researcher. He serves as director of Northwell Health's Center for Gun Violence Prevention and oversees the health system's expansive approach to firearm injury prevention. Under Sathya's leadership, the center has leveraged the health system's diverse patient population and wide reach to implement groundbreaking preventative strategies and perform high-



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level research. Sathya was recently awarded \$1.4 million from the NIH to study gun violence prevention and implement a first-of-its-kind protocol to universally screen among those at risk of firearm injury. The grant is part of the health system's, "We Ask Everyone. Firearm Safety is a Health Issue" research study, which aims to shift the paradigm to view gun violence as a public health issue and approach firearm injury risk similarly to other health risk factors that are part of routine care, like smoking, substance use, and motor vehicle accidents. Furthermore, Sathya spearheaded the formation of the National Gun Violence Prevention Learning Collaborative for Hospitals and Health Systems, which is a multi-year, multi-phase platform in which hospitals and integrated health systems can learn about gun violence prevention from experts, engage in open dialogue, develop best practices through an iterative process, and implement and evaluate strategies for the prevention of firearm related injuries and deaths. Sathya has been an invited keynote speaker at a number of events, including the American Hospital Association Leadership Summit on Violence Prevention and the Healthcare Association of New York State symposium on best practices in gun violence prevention. In addition to being a surgeon, he is associate trauma director at Cohen Children's Medical Center and assistant professor of surgery and pediatrics at the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell. He completed medical school and general surgery training at the University of Toronto, followed by a Pediatric Surgery Fellowship at Northwestern Medicine in Chicago. He also holds a master's in clinical epidemiology from the University of Toronto, in addition to completing a Fellowship in Global Journalism at the Munk School of Global Affairs and a Global Public Health program at the Dalla Lana School of Public Health.

Where did your interest and focus on gun violence prevention develop?

It started with my core job as a pediatric surgeon and a trauma director and, unfortunately, we are usually the ones who have to treat kids who come to the hospital with gun injuries. My journey started while working in Chicago when I had to treat a little infant during my first week on the job, a six-month old baby girl. That experience opened up my eyes to this epidemic, and that was not the last time I treated a young person for a gun injury – I had to do that over and over again in Chicago,

and we are doing that here in New York too. We had a 350 percent increase in the number of kids that we treated with bullet wounds just last year at Cohen Children's Hospital at Northwell Health. This is something where you can't just sit on the sidelines when you are working on the front lines and dealing with this day in and day out.

When I came to Northwell in 2019, I was really inspired by the leadership of our CEO, Michael Dowling, who was one of the first health system CEOs to take a stance on gun violence prevention and to say that it was a public health issue. Michael put institutional commitment behind it and it galvanized many of our peers and, largely because of Michael and Northwell's leadership, we have a new CEO Council comprised of health system CEOs and we have built a number of learning collaboratives around this topic that are helping to create programs all across the country.

While there has been momentum in addressing gun violence prevention, the numbers continue to increase. What is being learned from the research being conducted in this area?

I think it is important to break down the term "gun violence" when discussing the issue. We are talking about firearm injuries, and that could mean firearm suicide; it could mean accidental injuries; and it could mean homicides, the majority of which are assault or violence, with a small fraction being mass shootings. You really have to look at each of these pieces in order to have a productive conversation on this topic. If you look at the spike that we are seeing in injuries to kids, this is largely due to firearm violence and, if you look at the root causes of this, in many ways it is about more than just the gun. It is about structural inequity, structural racism, access to care – many of the same root causes that impact other social determinants of health.

It is clear that we have also seen an increase in school shootings and kids getting shot in driveways,

and this is an issue of too many guns in this country. What are strategies that could be employed in these cases as seen through a public health lens? This is very much focused on firearm safety which can really help prevent these type of instances.

Is the right conversation taking place to focus on the root causes that you mention?

We have a long way to go, but there is momentum in talking about this issue as a public health issue, and we have never had more research being done in this field. This means that we are getting a better understanding every year of the root causes of this epidemic and what types of things might work.

How has the Center for Gun Violence Prevention evolved?

The Center has grown rapidly and we have over one hundred initiatives taking place. We are working with the community, law enforcement, schools, and gun owners as we work to educate the community and prevent firearm injuries. We are funded by the NIH and have a screening program where we ask about gun safety which has expanded exponentially. We do work around research and advocacy, we develop common-sense policies, we develop educational curriculum for our providers and employees on how to counsel on gun safety. We know that there are policies that work, whether they be firearm safety or violence interaction and we are working to implement these policies.

How special is it for you to work for a health system like Northwell that takes a stand and leads in addressing public health issues?

I could not imagine being a part of an organization that does not have leadership such as Michael now that I have been here and experienced it. This type of leadership is not easy to find as I hear from many of my colleagues across the country. I knew that there was something special at Northwell when I chose to come here, and it has exceeded my expectations. When you look at a public health issue such as gun violence, it means a lot to know that you are part of an organization that is making a difference.

You mentioned that first week on the job in Chicago and treating the six-month old baby with a firearm injury, and that you continue to treat children with these injuries to this day. How hard is it to stay positive and be optimistic that real change will occur?

It is not easy. I focus on the work that we are doing on this issue to move in the right direction, and I also speak with families and survivors who reinforce that the work we are doing means a lot to them. We are there to support them, and it is inspiring to know that we are working to make a difference. ●