Testimony of Catherine Romanos, MD, FAAFP in Opposition to House Bill 178 May 2019

I am a family physician who lives and works in Columbus, Ohio. I completed a Bachelor of Arts in Spanish literature at New York University, received my medical degree from the University of Connecticut, and completed a residency in family medicine with an emphasis on social justice and caring for underserved Spanish-speaking patients at the Lawrence Family Medicine Residency Program in Lawrence, Massachusetts. I am board certified in family medicine. As a physician, I oppose House Bill (HB) 178. I have seen the physical and emotional impacts of guns on our community and we should be looking for ways to make our community safer from gun violence, not making it easier for Ohioans to carry guns.

As a family doctor, I see patients of all ages. This gives me a unique window in to circumstances that affect one's health throughout the lifespan. Trauma that is endured as a child, bears its head during adolescence and adulthood. And trauma that is experienced as an adult is passed down through generations.

As a family doctor, I work to prevent diseases that are preventable. To this end, I screen for high blood pressure in patients who are overweight. I screen for post partum depression in women who have just delivered. When I diagnose or treat someone with illnesses like depression, anxiety, or trauma, I screen for past experiences that may have spurred or exacerbated their mental health conditions. A child who looses a parent to gun violence will suffer a unique kind of trauma that will be with them for a lifetime. A person who witnesses a murder will also be traumatized. And a person who feels the

threat of gun violence is not only traumatized but also terrorized. When a person is at risk of suicide or violence, I screen for proximity to firearms.

When this issue comes up, I always think back to a patient I met some years ago. I'll call her Tiffany. I had known Tiffany for several years. I knew that she suffered from depression, which we were treating with medication and she was in counseling. I also knew that she had a stomach condition that flared with stress. On the particular day that is burned into my memory she shared with me that the stress she complained about was often related to her partner, who was verbally and physically abusive. As we talked, I asked her the same question I ask every person who is in an unsafe relationship. **Does he** own or have access to a gun. She said yes. She went on to say that the week prior he had hit her in the head with the handle of that gun and threatened to kill her. She was willing to file a retraining order but acknowledged that it would only be an order. If he wanted to kill her, a piece of paper would not stop him. My team and I worked to get her to a shelter for victims of violence, one where she could go with her kids. It took several hours to arrange and in the end she decided to go home instead of to a shelter. She was scared that if she was late to meet him, there would be consequences. She was literally scared to death. I went home that night and thought about her for hours. If he wanted to kill her it would be easy to do with a gun and a piece of paper wouldn't stop him. I worried about her immediate danger that night. I worried about what would happen to her in years to come. How would she cope with the trauma she had already endured. I worried about how her children would cope with being around or seeing this violence. What would their trauma look like? I wondered what would happen to them if their dad killed their mom.

This story is not unique. I have many, many other stories like this. This committee already heard from ACTION OHIO Coalition for Battered Women. FBI statistics from 2009-13 tell us that in an average month, 50 women are shot to death by intimate partners. This is a women's issue, it is a family issue, and it is a public health issue.

I am not here to talk to you about the constitutionality of gun ownership. I am here to tell you that as a physician and as a citizen, we need to make guns harder to access, not easier. Some atrocities will not be prevented by even the most extreme measures but we cannot make them more likely to occur.

If HB 178 becomes law, guns will be easier to access and more commonly lead to injury, death, and trauma, both immediate and long term. As a physician, my job is to take care of my patients and their health. It is critical to the lives and health of the people in Ohio that you vote against this bill.