Extreme Risk Protection Orders (ERPOs): What We Know Works

What are Extreme Risk Protection Orders?

Extreme risk protection orders (ERPOs), also known as red flag orders, are a tool to prevent firearm violence, including mass shootings, suicides, and fatal and nonfatal firearm assaults.

- An ERPO is a court issued civil order that temporarily prohibits people at risk of harming themselves or others from possessing or purchasing firearms.
- ERPOs are designed to be used when an individual is at high risk of using violence against themselves or others, as evidenced by behaviors, statements, or writings.
- ERPOs may be petitioned whether or not the person at risk of harm currently possesses firearms.

ERPOs typically involve a two-stage process that includes **a short-term order (between 7 days and a month, depending on the state)** and **a longer-term order that lasts up to 1 year in most states.** At both stages, a judge evaluates the evidence to determine if it meets statutory requirements for granting the order.

21 states and Washington, DC have enacted ERPO laws.

- 15 of these states allow family or household members in addition to law enforcement to petition for an ERPO.
- Some states allow mental health providers (Maryland and DC), certain healthcare providers and mental health professionals (Michigan), school administrators and certain categories of health care workers (New York), and medical professionals, coworkers, and educators (Hawaii) to petition for ERPOs.
- In all states, orders can be issued ex parte (without notice to the respondent) and/or after notice and a hearing (referred to as final orders). Ex parte orders differ from final orders in duration and, in some states, evidentiary standards. Final orders last up to a year (up to 6 months in Illinois, Vermont, and Virginia) and can be terminated early or renewed.

What is the evidence base for ERPOs?

- Studies have shown that one life is saved for every 10-20 ERPOs issued.
- ERPOs were associated with a **7.5% reduction in firearm suicide** in Indiana and **13.7% reduction** in Connecticut.
- ERPOs are most often filed in response to **risk of suicide**, but are also commonly filed in response to **threats of harm to others**, risk related to **cognitive impairment**, and **mass shooting threats.**
- ERPO laws are largely considered to be a viable prevention strategy for mass shootings. One study found that mass shooting threats were involved in 9.8% of ERPO petitions.
- Studies indicate that ERPO petitions and orders are **overwhelmingly being used as intended.**
- More research is needed to understand the effect of ERPOs on reducing firearm injury and death and to identify the best implementation strategies.



What are some best practices to consider when enacting ERPO legislation?

- ERPO legislation should be **clear about the authority each implementer** (e.g., law enforcement, judges) has and their role in ERPO implementation.
- Training of law enforcement is needed so that they understand their role in implementation, when it is appropriate to petition for an ERPO, the process for implementation of orders (including service of orders and firearm removal), and how ERPOs keep communities safe.
- **Training of judges is needed** so that they understand the state's standard of evidence for allowing an ERPO to be granted.
- Greater dissemination of public information about ERPOs may increase their appropriate use and the proportion of high-risk individuals and families who may benefit. Family members may not know that ERPOs are available as a tool to keep themselves and their loved ones safe in times of crisis, especially with a suicidal family member.
- Legislation should be explicit on how **firearms that are relinquished should be stored** outside of the home.
- **ERPOs are a live-saving tool, not a criminal tool** this should be considered when illegal firearms are part of the relinquishment or illegal activity is witnessed during service of the order and firearm relinquishment.
- Removing firearms from an individual in crisis **is not going to end their crisis, but it may save lives.** Individuals and families should also be connected with resources and public health services when an ERPO is granted or stipulated to.

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