## **Testimony Regarding the Live Fire Training Requirement in Chapter 135**

Submitted by: John Briare, on behalf of The Civil Rights Coalition

**Date:** June 4, 2025

Subject: Suspension or Elimination of the Live Fire Component for FID and LTC Applicants

# To the Executive Office of Public Safety and Security, and all charged with implementing Chapter 135:

My name is John Briare, representing The Civil Rights Coalition—a ballot committee formed by over 100,000 Massachusetts residents, including veterans, law enforcement, single mothers, and working families from every walk of life.

I'm here today to address some logistical and particularly discriminatory provisions of Chapter 135: the **live fire training requirement** for firearm licensing.

According to the most recent available data, among approximately 600,000 licensed firearm owners in Massachusetts, the number of unintentional self-inflicted firearm injuries or deaths remains almost ZERO, showing the current process, **without live fire** works:

• 2022: 1 incident (Source: CDC / MA Department of Public Health – attached)

• 2021: 0 incidents

• 2020: 1 incident

• 2019: 1 incident

These figures underscore the consistent and exceptional safety record of law-abiding, licensed gun owners in the Commonwealth.

This requirement does nothing to prevent or deter violent crime. It is merely another bureaucratic requirement to create administrative hurdles and red tape for individuals seeking to exercise their 2<sup>nd</sup> amendment rights.

Criminals will continue to ignore all laws, including this one.

Requiring live fire training as a precondition to obtain a Firearms Identification Card (FID) or License to Carry (LTC) might sound reasonable to someone who lives near a range, owns a vehicle, has a flexible schedule, and can afford ammo, range fees, and a state-certified instructor. But that's not the reality for tens of thousands of our fellow citizens—particularly in urban, lower-income, and minority communities. In addition, as we will detail, it absolutely discriminates against the low income, urban citizens, elderly and disabled who might not be physically able to get to a range.

This requirement, no matter how framed, functions as an unconstitutional barrier. It is a **de facto poll tax** on the Second Amendment.

#### The Barrier: A De Facto Poll Tax

The live fire requirement conditions a constitutional right on resources, geography, and privilege. Consider the reality for residents in Boston, Springfield, Lawrence, Brockton, Chelsea, and Lynn, where no public gun ranges exist. For them, compliance demands:

- Travel of up to 25 miles, often without personal vehicles, on public transit systems that prohibit firearms or ammunition.
- Costs of \$100–\$200 for range fees, ammunition, and certified instructors, unaffordable for those living paycheck to paycheck.
- Time off work, inaccessible for single parents or hourly workers.

This is not a safety measure; it is a systemic barrier that excludes vulnerable populations. In 2023, over 300,000 Massachusetts residents lived in areas without proximate gun ranges, with urban centers like Boston (pop. 675,000) and Springfield (pop. 155,000) entirely unserved. The Commonwealth would never tolerate such obstacles to voting—nor should it for the right to self-defense. As the Supreme Court struck down poll taxes in Harper v. Virginia State Board of Elections (383 U.S. 663, 1966), so too must EOPSS reject financial and logistical barriers to a fundamental right.

There are **no public gun ranges** in Boston, Springfield, Lawrence, Brockton, Chelsea, or Lynn. None.

For them, this law does not enhance safety—it denies rights.

## **Constitutional Violations: A Clear Legal Failure**

### The live fire requirement fails every relevant constitutional test:

- Second Amendment: In District of Columbia v. Heller (554 U.S. 570, 2008), the Supreme Court affirmed an individual right to keep and bear arms. McDonald v. City of Chicago (561 U.S. 742, 2010) extended this right to the states. Most critically, NYSRPA v. Bruen (142 S. Ct. 2111, 2022) mandates that firearm restrictions align with historical traditions of regulation. No such tradition exists for requiring live fire training, travel, or payment as a precondition for gun ownership. Chapter 135's mandate is thus presumptively unconstitutional.
- **Equal Protection Clause:** The requirement disproportionately burdens low-income and minority communities, inviting strict scrutiny under the Fourteenth Amendment. In urban areas, where 40% of Massachusetts' Black and Hispanic populations reside, access to ranges is nonexistent, and compliance costs consume a disproportionate share of income. This disparate impact demands judicial redress.
- Massachusetts Declaration of Rights: Article XVII guarantees the right to bear arms for self-defense. By conditioning this right on unattainable resources, the Commonwealth violates its own constitution, punishing citizens for legislative failures in access and equity.

These violations are not abstract—they deny real people, from domestic violence survivors to fixed-income seniors, their constitutional protections.

## **Real-World Impact: Disenfranchising the Vulnerable**

The live fire requirement transforms a right into a privilege, favoring the affluent and mobile over the marginalized. Single mothers in Roxbury face insurmountable hurdles compared to retirees in Wellesley. Fixed-income residents in Holyoke are priced out, while those in Hingham are not. Consider:

- A single parent earning \$30,000 annually cannot afford \$150 in training costs.
- Domestic violence survivors, who often rely on firearms for safety, are deterred by logistical and financial barriers.
- Urban instructors like Nolan Howard of 617Defense, who have trained hundreds of Boston residents in safe firearm handling, are sidelined. Howard operates in homes and community spaces, serving women seeking discreet training and residents with mobility challenges. Yet, with no public ranges and private ranges overbooked or exclusionary, he faces months-long waitlists to comply.

This is systemic inequity, not public safety. Non-live fire training—classroom instruction—achieves safety goals without excluding entire communities.

## **Discrimination Against the Disabled and Senior Citizens**

Another deeply concerning impact of Chapter 135's live fire requirement is its disproportionate and exclusionary effect on disabled individuals and senior citizens—many of whom are among the most vulnerable and law-abiding members of our communities.

### Consider:

- A 75-year-old FID Card widower in Springfield who has lawfully owned a semi-automatic shotgun for 40 years and now must get an LTC.
- A veteran with limited mobility who lives in Chelsea and cannot access suburban ranges.
- A disabled woman on fixed income in Roxbury, reliant on public transit and in-home services.

These individuals now face denial of their 2<sup>nd</sup> amendment rights unless they:

- Locate and travel to a functioning firearm range (of which there are none in their city),
- Physically participate in a live fire test,
- Pay out-of-pocket costs they may not be able to afford,
- And complete the training on terms that are not accessible for their medical or physical limitations.

This is not just bad policy. It's illegal discrimination.

#### **Violation of Federal Disability Laws:**

 Title II of the Americans with Disabilities Act (ADA) prohibits state and local governments from denying individuals with disabilities the benefits of public programs or services—which includes the right to obtain a firearm license.

- Section 504 of the Rehabilitation Act requires reasonable accommodation in government programs receiving federal funds.
- Chapter 135 offers no accommodations, no waivers, and no guidance for disabled applicants—putting Massachusetts in direct violation of federal law.

### Age Discrimination and Constitutional Failure:

- The Age Discrimination Act of 1975 prohibits discrimination based on age in programs receiving federal financial assistance.
- Chapter 135's blanket requirement, without exemptions for those over 65 or with agerelated impairments, constitutes a systemic denial of equal access to a constitutional right.

Let's be honest: if a disabled person can be forced to break the law simply because they cannot drive or safely handle a firearm at a noisy public range miles away, then the law—not the citizen—is the problem.

Massachusetts has long prided itself on inclusion and accessibility. Chapter 135 undoes that legacy in a single stroke.

### The Voting Rights Analogy: A Call for Consistency

If Massachusetts required voters to pay \$150, travel 25 miles, and pass a civics test at a government-approved facility, the outcry would be deafening. Lawsuits would invoke Harper and Crawford v. Marion County Election Board (553 U.S. 181, 2008), which rejected undue burdens on voting. The Second Amendment demands equal protection. Just as voting is a right, not a privilege, so too is the right to bear arms. Chapter 135's barriers are no less egregious than a poll tax or literacy test.

The Constitution does not allow government to create **deliberate barriers** that functionally eliminate rights for the poor and marginalized.

### Live Fire Requirement will put Urban Instructors Out of Business

The Forgotten Instructors in Urban Communities

There's another layer here that most lawmakers and bureaucrats overlook: Instructors like Nolan Howard of 617Defense in Boston have built legitimate, lawful, effective training businesses—serving hundreds of residents safely, privately, and professionally.

Nolan Howard, founder of 617Defense, exemplifies the entrepreneurial spirit and community dedication that Massachusetts should champion. As a Black-owned business, 617Defense has spent years building a vital service tailored to the needs of Boston's urban communities, providing safe, accessible, and discreet firearms training to over 200 residents, including single parents, women seeking privacy, and individuals with mobility challenges. Operating in homes, churches, and community spaces, Howard has met a critical need where public gun ranges are nonexistent and private ranges are inaccessible or unwelcoming. His business not only

empowers vulnerable populations with the knowledge to exercise their Second Amendment rights but also fosters trust and safety in communities often underserved by traditional training providers.

The live fire training requirement in Chapter 135, however, threatens to dismantle Howard's livelihood and the communities of color that he serves. Without public ranges in urban centers like Boston and with private ranges overbooked or prioritizing their own courses, Howard faces insurmountable barriers to compliance—months-long waitlists and exclusionary practices that favor well-funded ranges in affluent areas. As a disadvantaged business owner, Howard lacks the capital to compete with these established entities, which benefit from proximity to wealthier clients and greater resources. If this mandate persists, 617Defense will be forced out of business, leaving urban residents with fewer choices for training and further entrenching the inequities Chapter 135 perpetuates. The Commonwealth must act to protect community-based instructors like Howard, ensuring range access and equitable alternatives to preserve both his business and the rights of those he serves.

#### Recommendation

The Civil Rights Coalition respectfully requests that:

- 1. EOPSS permanently suspends the live fire training mandate due to constitutional, civil rights violations and practical barriers. The Live Fire mandate fails Bruen's historical test and violates equal protection.
- 2. All official Massachusetts Data clearly shows that "Live Fire" will have zero effect on unintentional self-injury and other since there have only been 3 cases in the past 4 years.
- 3. The Legislature must amend Chapter 135 to include all of the below:
  - The State must Fund and construct free public firing ranges across the Commonwealth, especially in underserved areas.
  - Establish hardship waivers for those with medical, financial, or transportation barriers ensuring no citizen is denied their rights.
  - Recognize prior training, military service, or law enforcement experience as fulfilling requirements.
  - Provide a tax credit of \$250 to every one seeking a license to offset out of pocket costs

Chapter 135's live fire requirement is a constitutional affront, denying Massachusetts residents their Second Amendment protections based on wealth, geography, and race. It punishes the poor, discriminates against the marginalized, and dismantles the very community-based infrastructure that currently fosters safety, education, and compliance.

If this law is enforced as written, thousands of lawful citizens will lose access to their rights—and dozens of instructors, like Nolan Howard, will lose their livelihoods.

The Commonwealth must do better. Suspend this mandate. Study its impact. Build equity before you build enforcement.

## **Injury Deaths to MA Residents**

2022

*Injuries are the leading cause of death* for Massachusetts residents ages 1-44, and the third leading cause for all ages. In 2022, there were 5,686 injury deaths,<sup>1</sup> a rate of 80.9 deaths per 100,000 people. The leading mechanisms of injury deaths were poisonings, falls, and motor vehicle traffic-related crashes.

		INJ						
Key Indicators	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>		Totals	
Total Counts by Injury Intent	4,772	624	172	112	6		5,686	
Percent by Intent	83.9%	11.0%	3.0%	2.0%	0.1%	6 100.0%		
Rate per 100,000 population <sup>3</sup>	67.9	8.9	2.4	1.6	0.1	80.9		
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Injury Mechanism	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>	Subtotal Counts	Percent of Total <sup>4</sup>	Crude Rate per 100,000 <sup>3</sup>
Cut/pierce	2	24	34	1	0	61	1.1%	0.9
Drowning/submersion	57	16	0	21		94	1.7%	1.3
Fall	1,260	31	0	1		1,292	22.7%	18.4
Fire/burn	34	6	0	6		46	0.8%	0.7
Firearm	1	148	107	2	5	263	4.6%	3.7
Machinery	1					1		
Natural/environmental	30	0		0		30	0.5%	0.4
Poisoning <sup>5</sup>	2,517	142	3	53	0	2,715	47.7%	38.6
Drug poisoning	2,472	109	2	47	0	2,630	46.3%	37.4
Non-drug poisoning	45	33	1	6	0	85	1.5%	1.2
Struck by, against	11		2	0	0	13	0.2%	0.2
Suffocation/hanging	200	235	7	1		443	7.8%	6.3
Transport Injuries <sup>5</sup>	498	6	0	0	0	504	8.9%	7.2
Motor vehicle traffic-related	467	6	0	0		473	8.3%	6.7
Occupant <sup>6</sup>	299	6	0	0		305	5.4%	4.3
Motorcyclist	55					55	1.0%	0.8
Pedal cyclist	8					8	0.1%	0.1
Pedestrian	105					105	1.8%	1.5
Pedal cyclist, other	6					6	0.1%	0.1
Pedestrian, other	14					14	0.2%	0.2
Other land transport	8			0		8	0.1%	0.1
Other transport	3					3	-	
Other specified & classifiable	28	14	1	0	0	43	0.8%	0.6
Other specified, not classifiable	40	1	7	4	1	53	0.9%	0.8
Unspecified	93	1	11	23	0	128	2.3%	1.8

Source: Registry of Vital Records and Statistics, Massachusetts Department of Public Health.

1) includes Massachusetts residents who died in or out-of-state. Non-MA residents are excluded. An injury-related fatality is defined as any death with an ICD-10 code of UD1-UO3 or VD1-Y89 in the underlying cause field.

Counts may differ from other analyses (e.g., death report), due to slight definitional differences.

- 2) Legal Intervention/other includes fatalities resulting from police actions and operations of war.
- 3) Rates provided are crude rather than age-adjusted and may differ slightly from other department publications. Rates are not calculated on counts of less than five, and rates based on counts less than twenty may be unstable. Data used to calculate rates are based on small area population estimates from the Donahue Institute, MDPH, Bureau of Environmental Health; 2020 MA population 7,029,917 was used as a proxy, as 2022 estimates were unavailable.
- 4) Totals may not sum to 100% due to rounding.
- 5) Transport includes several subcategories (shown in Italics).
- 6) Includes motor vehicle drivers, passengers and unspecified persons.
- Injury categories are based on the CDC's "Recommended framework of E-code groupings for presenting injury
  mortality and morbidity data." This framework does not provide for intentionality for certain cause categories as indicated by gray shading.
- Data were extracted and compiled by the Injury Surveillance Program, MDPH, January 2024, Release Date: May 2024



2021

## **Injury Deaths to MA Residents**

*Injuries are the leading cause of death* for Massachusetts residents ages 1-44. In 2021, there were 5,496 injury deaths,<sup>1</sup> an increase of 10% over 2020. The leading mechanisms of injury deaths also increased over 2020 numbers: poisonings (12%), falls (13%), and motor vehicle traffic-related crashes (19%).

		IИJ				
Key Indicators	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>	Totals
Total Counts by Injury Intent	4,636	605	161	83	11	5,496
Percent by Intent	84.4%	11.0%	2.9%	1.5%	0.2%	100%
Rate per 100,000 population <sup>3</sup>	65.9	8.6	2.3	1.2	0.2	78.2

Injury Mechanism	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>	Subtotal Counts	Percent of Total <sup>4</sup>	Crude Rate per 100,000 <sup>3</sup>
Cut/pierce	1	24	30	1	0	56	1.0	0.8
Drowning/submersion	58	11	1	4		74	1.3	1.1
Fall	1,142	33	0	1		1,176	21.4	16.7
Fire/burn	36	1	2	1		40	0.7	0.6
Firearm	0	136	99	3	9	247	4.5	3.5
Machinery	3					3		
Natural/environmental	17					17	0.3	0.2
Poisoning <sup>5</sup>	2,534	131	1	38	0	2,704	49.2	38.5
Drug poisoning	2,464	93	1	35	0	2,593	47.2	36.9
Non-drug poisoning	70	38	0	3	0	111	2.0	1.6
Struck by, against	12		4	0	0	16	0.3	0.2
Suffocation/hanging	177	248	5	2		432	7.9	6.1
Transport Injuries⁵	476	3	0	1	0	480	8.7	6.8
Motor vehicle traffic-related	446	3	0	0		449	8.2	6.4
Occupant <sup>6</sup>	290	3	0	0		293	5.3	4.2
Motorcyclist	66					66	1.2	0.9
Pedal cyclist	6					6	0.1	0.1
Pedestrian	84					84	1.5	1.2
Pedal cyclist, other	0					0	0.0	0.0
Pedestrian, other	14					14	0.3	0.2
Other land transport	11			1		12	0.2	0.2
Other transport	5					5	0.1	0.1
Other specified & classifiable	27	15	0	3	0	45	0.8	0.6
Other specified, not classifiable	33	3	6	1	2	45	0.8	0.6
Unspecified	120	0	13	28	0	161	2.9	2.3

#### Source: Registry of Vital Records and Statistics, Massachusetts Department of Public Health.

- 1) Includes Massachusetts residents who died in or out-of-state. Non-MA residents are excluded. An injury-related fatality is defined as any death with an ICD-10 code of U01-U03 or V01-Y89 in the underlying cause field.
- Counts may differ from other analyses (e.g., death report), due to slight definitional differences.
- 2) Legal Intervention/other includes fatalities resulting from police actions and operations of war.
- Rates provided are crude rather than age-adjusted and may differ slightly from other department publications. Rates are not calculated on counts of less than five, and rates based on counts less than twenty may be unstable. Data used to calculate rates are based on small area population estimates from
- the Donahue Institute, MDPH, Bureau of Environmental Health; 2020 MA population 7,029,917 was used as a proxy, as 2021 estimates were unavailable.
- 4) Totals may not sum to 100% due to rounding.
- 5) Transport includes several subcategories (shown in italics).
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- Injury categories are based on the CDC's "Recommended framework of E-code groupings for presenting injury



## **Injury Deaths to MA Residents**

*Injuries* are the leading cause of death for people ages 1 through 44. In 2020, there were **5,005** injury deaths among Massachusetts residents<sup>1</sup>, a rate of **71.2** injuries for every 100,000 residents. The leading causes of injury deaths were poisonings, falls and suffocations.

		INJ				
Key Indicators	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>	Totals
Total Counts by Injury Intent	4,103	622	186	92	2	5,005
Percent by Intent	82.0%	12.4%	3.7%	1.8%	<0.1%	100.0%
Rate per 100,000 population <sup>3</sup>	58.4	8.8	2.6	1.3	-	71.2

Injury Cause	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>	Subtotal Counts	Percent of Total <sup>4</sup>	Crude Rate per 100,000 <sup>3</sup>
Cut/pierce	2	35	25	0	0	62	1.2%	0.9
Drowning/submersion	51	11	0	9		71	1.4%	1.0
Fall	1,016	24	0	3		1,043	20.8%	14.8
Fire/burn	37	5	0	1		43	0.9%	0.6
Firearm	1	134	133	1	1	270	5.4%	3.8
Machinery	6					6	0.1%	0.1
Natural/environmental	20					20	0.4%	0.3
Poisoning <sup>5</sup>	2,252	113	1	47	0	2,413	48.2%	34.3
Drug poisoning	2,192	85	1	45	0	2,323	46.4%	33.0
Non-drug poisoning	60	28	0	2	0	90	1.8%	1.3
Struck by, against	8		1	0	0	9	0.2%	0.1
Suffocation/hanging	153	281	5	2		441	8.8%	6.3
Transport Injuries <sup>5</sup>	394	2	0	0	0	396	7.9%	
Motor vehicle traffic-related	374	2	0	0		376	7.5%	5.3
Occupant <sup>6</sup>	246	2				248	5.0%	3.5
Motorcyclist	52					52	1.0%	0.7
Pedal cyclist	9					9	0.2%	0.1
Pedestrian	67					67	1.3%	1
Pedal cyclist, other	3					3	0.1%	
Pedestrian, other	9					9	0.2%	0.1
Other land transport	3					3	0.1%	
Other transport	5					5	0.1%	0.1
Other specified & classifiable	21	13	1	0	0	35	0.7%	0.5
Other specified, not classifiable	30	3	8	8	1	50	1.0%	0.7
Unspecified	112	1	12	21	0	146	2.9%	2.1

#### Source: Registry of Vital Records and Statistics, Massachusetts Department of Public Health.

- 1) Includes Massachusetts residents who died in or out-of-state. Non-MA residents are excluded. An injury-related fatality is defined as any death with an ICD-10 code of U01-U03 or V01-Y89 in the underlying cause field.
- Counts may differ from other analyses (e.g., death report), due to slight definitional differences.
- 2) Includes fatalities resulting from police actions and operations of war.
- 3) Rates provided are crude rather than age-adjusted and may differ slightly from other department publications. Rates are not calculated on counts of less than five, and rates based on counts less than twenty may be unstable. Data used to calculate rates are based on small area population estimates from the Donahue Institute, MDPH, Bureau of Environmental Health; 2020 MA population 7,029,917.
- 4) Totals may not sum to 100% due to rounding.
- Includes subcategories (shown in italics).
- 6) Includes motor vehicle drivers, passengers, and unspecified persons.
- Injury categories are based on the CDC's "Recommended framework of E-code groupings for presenting injury mortality
  and morbidity data." This framework does not provide for intentionality for certain cause categories as indicated by gray shading.
- Data were extracted and compiled by the Injury Surveillance Program, MDPH, February 2022, Release Date: May 2022



## **Injury Deaths to MA Residents**

**Injuries** are the leading cause of death for people ages 1 through 44. In 2019, there were **4,997** injury deaths among Massachusetts residents<sup>1</sup>, a rate of **71.8** injuries for every 100,000 residents. The leading causes of injury deaths were poisonings, falls and suffocations.

	INJURY INTENT							
Key Indicators	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>		Totals	
Total Counts by Injury Intent	4,094	651	159	86	7		4,997	
Percent by Intent	81.9%	13.0%	3.2%	1.7%	0.1%		100.0%	
Rate per 100,000 population <sup>3</sup>	58.8	9.3	2.3	1.2	0.1		71.8	
Injury Cause	Unintentional	Suicide	Homicide	Undeter- mined	Legal Intervention/ Other <sup>2</sup>	Subtotal Counts	Percent of Total <sup>4</sup>	Crude Rate per 100,000 <sup>3</sup>
Cut/pierce	1	21	41	0	0	63	1.3%	0.9
Drowning/submersion	56	13	0	9		78	1.6%	1.1
Fall	1,007	26	2	0		1,035	20.7%	14.9
Fire/burn	41	8	0	3		52	1.0%	0.7
Firearm	1	143	96	4	5	249	5.0%	3.6
Machinery	3					3	0.1%	
Natural/environmental	26					26	0.5%	0.4
Poisoning <sup>5</sup>	2,177	118	0	43	0	2,338	46.8%	33.6
Drug poisoning	2,119	83	0	41	0	2,243	44.9%	32.2
Non-drug poisoning	58	35	0	2	0	95	1.9%	1.4
Struck by, against	11		1	0	0	12	0.2%	
Suffocation/hanging	182	304	4	1		491	9.8%	7.1
Transport Injuries <sup>5</sup>	419	0	1	0	0	420	8.4%	6.0
Motor vehicle traffic-related	381	0	0	0		381	7.6%	
Occupant <sup>6</sup>	257					257	5.1%	
Motorcyclist	38					38	0.8%	0.5
Pedal cyclist	2					2	<0.1%	
Pedestrian	84					84	1.7%	1.2
Pedal cyclist, other	5					5	0.1%	0.1
Pedestrian, other	11					11	0.2%	
Other land transport	15		1			16	0.3%	0.2

#### Source: Registry of Vital Records and Statistics, Massachusetts Department of Public Health.

 Includes Massachusetts residents who died in or out-of-state. Non-MA residents are excluded. An injury-related fatality is defined as any death with an ICD-10 code of U01-U03 or V01-Y89 in the underlying cause field.

12

0

1

- Counts may differ from other analyses (e.g., death report), due to slight definitional differences.
- 2) Includes fatalities resulting from police actions and operations of war.
- 3) Rates provided are crude rather than age-adjusted and may differ slightly from other department publications. Rates are not calculated on counts of less than five, and rates based on counts less than twenty may be unstable. Data used to calculate rates are based on small area population estimates from the Donahue Institute, MDPH, Bureau of Environmental Health; 2019 MA population 6,964,383.
- 4) Totals may not sum to 100% due to rounding.
- 5) Includes subcategories (shown in italics).

Other transport

Unspecified

Other specified & classifiable

Other specified, not classifiable

- 6) Includes motor vehicle drivers, passengers, and unspecified persons.
- Injury categories are based on the CDC's "Recommended framework of E-code groupings for presenting injury mortality
  and morbidity data." This framework does not provide for intentionality for certain cause categories as indicated by gray shading.
- Data were extracted and compiled by the Injury Surveillance Program, MDPH, February 2022, Release Date: May 2022

32

38

100



0.1%

0.9%

0.9%

45

47

0

0.1

0.6

0.7

2.0