

Gun Violence Prevention

(Revised 8/01/17)

The New Hampshire Public Health Association recognizes that guns are part of American culture and believes that the pursuit of gun safety is substantially different from the pursuit of gun control. Improving gun safety, in contrast to traditional gun control, reflects a focused, multidisciplinary effort to limit violence and harm subsequent to inappropriate use of a prevalent technology.

Guns are prevalent in the United States. The Congressional Research Service estimates there were approximately 310 million guns in the US in 2009¹. This represents roughly double the number of firearms in the country in 1968¹ and translates to approximately one gun per capita across the country.

In 2015, over 36,000 individuals died from firearms in the United States²; another 98,000 were injured by firearms, BB guns, and pellet guns³. Death rates from firearms have remained steady since approximately 2000, indicating a persistent problem⁴. Moreover, our federal legislature has declared that “crime, particularly crime involving drugs and guns, is a pervasive, nationwide problem⁵.” Gun violence was estimated to cost the country over \$229 billion in 2015 alone⁶.

The burden of gun violence includes suicides, homicides, accidents and unintentional injuries. Importantly, it also includes survivors. Survivors suffer serious consequences, including short- and long-term disability⁷ as well as posttraumatic stress disorder (PTSD)⁸. Recognizing that gun violence disproportionately affects the young⁴, the long-term needs of gun violence survivors are of considerable importance to the costs and impact of gun violence in America.

NHPHA advocates for policies that will prevent gun-related injuries rather than policies focused solely on firearm limitations. A comprehensive, evidence-based approach to preventing gun violence through increased gun safety is critical to efforts to meaningfully reduce the burden of firearm-related death and injury.

NHPHA supports policies that:

- Support and expand universal background checks, including:
 - ◊ Closing loopholes for private sales, gun shows, and Internet sales.
 - ◊ Improving the amount of information available to firearms dealers seeking background checks.
- Increase the information available regarding gun ownership, gun safety, and effective gun violence prevention by:
 - ◊ Increasing support for collection of data on firearm ownership.
 - ◊ Increasing support for collection of data on the number and types of firearm injuries and deaths.
 - ◊ Removing funding restrictions for the Centers for Disease Control and Prevention and other federal or scientific agencies to allow research into firearm violence trends and prevention policies.
 - ◊ Funding rigorous evaluation of current and proposed firearm policies to assess their potential to reduce gun violence and injury.

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- Prevent the acquisition of guns by individuals at higher risk of committing gun crimes via meaningful expansion of prohibited person policies.
- Preserve the autonomy of health professionals and doctor/patient confidentiality.
 - ◊ NHPHA opposes policies that place any limitations on a health care professional's ability to discuss firearms and firearm safety with patients.
- Promote accountability for firearm dealers in record keeping and in efforts to prevent firearm diversion to prohibited persons.
- Encourage and promote gun safety in owners, dealers, and manufacturers, including:
 - ◊ Safe storage practices
 - ◊ Technologies with proven potential to reduce unintentional or criminal gun behavior
- Improve the ability of law enforcement officers to trace firearms used in crimes, including policies that mandate reporting of theft or loss of firearms by firearms dealers and gun owners.
- Restrict the sale of military-style weapons and large-capacity ammunition clips or magazines.

Resources

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References

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³ Centers for Disease Control and Prevention. Web-based Injury Statistics Query and Reporting System. Nonfatal Injury, 2000-2015. Report run 21 Apr 2017. Atlanta, GA: CDC National Center for Injury Prevention and Control. Available at: <https://webappa.cdc.gov/sasweb/ncipc/nfirates.html>

⁴ Wintemute, GJ. (2015). The epidemiology of firearm violence in the twenty-first century United States. *Annual Review of Public Health*, 36, 5-19. DOI: 10.1146/annurev-publhealth-031914-122535

⁵ 18 U.S. Code § 922. Available at: <https://www.law.cornell.edu/uscode/text/18/922>. Accessed Apr 21 2017.

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⁷ DiScala, C, Sege, R. (2004). Outcomes in children and young adults who are hospitalized for firearms-related injuries. *Pediatrics*, 113(5), 1306-1312. DOI: 10.1542/peds.113.5.1306

⁸ Reese, C, Pederson, T, Avila, S, Joseph, K, Nagy, K, Dennis, A, Wiley, D, Starr, F, Bokhari, F. Screening for traumatic stress among survivors of urban trauma. *J Trauma Acute Care Surg*, 73(2), 462-467.

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