STATEMENT OF POLICY

Firearm-Related Injury and Death Prevention

Policy
The National Association of County and City Health Officials (NACCHO) supports an individual’s right to own and use firearms for legal purposes. As public health professionals focused on injury and violence prevention, we also seek to ensure that firearms are stored and used safely and that traditional public health measures are used to ensure comprehensive strategies that prevent firearm-related suicide, homicide, and other violence and unintentional firearm-related injuries and death. NACCHO recognizes the burden and impact of firearm-related injury and death as a national public health issue. NACCHO also recognizes the importance of addressing the root causes of inequities (e.g., racism, sexism, classism) that result in certain populations bearing a disproportionate burden of firearm-related morbidity and mortality.

NACCHO also draws attention to the critical role that local health departments play in preventing intentional and unintentional firearm-related injury and death and in preparing for and responding to threats to individual and community safety in coordination and collaboration with other local, state, and national efforts.

NACCHO supports the following strategies to prevent firearm-related injury and death:

- Legislation, regulation, or policy that (1) requires a background check on all prospective purchasers of firearms; (2) includes enforceable and effective bans on the sale, transfer, importation, and manufacturing of assault weapons and large capacity ammunition magazines; and/or (3) makes firearm trafficking a felony.
- Legislation, regulation, or policy that requires any person seeking to own a firearm to (1) obtain a firearm safety certificate within a reasonable timeframe of purchase; (2) register their firearms in confidential registries and immediately report, upon discovery, any loss or theft of firearms to law enforcement; and (3) store their firearms in a manner that prevents unsupervised access or use by children and other unauthorized users.
- Legislation, regulation, or policy that requires any person seeking to transfer ownership of a firearm to report the sale or transfer to the appropriate authority.
- Legislation, regulation, or policy that restricts or prohibits the acquisition of firearms by high-risk persons, as indicated by data (e.g., persons with a history of violent criminal behavior; unlawful users of or those addicted to controlled substances; those who have been found by a judge to be mentally incompetent, a danger to themselves or others as a result of mental illness, or been involuntarily committed to a mental institution; youth under the age of 21).
• Expansion of the evidence base through research and evaluation related to the causes of firearm-related injury and death and the effectiveness of prevention strategies.
• Data gathering and analysis that link data from multiple sectors (e.g., public health, law enforcement, medical examiners, social services) with appropriate safeguards for privacy.
• Research conducted or funded by federal government agencies on the causes and prevention of gun violence.
• Development, implementation, and evaluation of comprehensive local plans that include multiple strategies (e.g., prevention, preparedness, intervention, enforcement, response, rehabilitation) through the engagement of multidisciplinary partnerships (e.g., public health, healthcare, education, law enforcement, justice, mental/behavioral health, social services, community leaders, businesses, and faith-based organizations)
• Early identification of mental illness and access to high-quality, culturally competent mental and behavioral health services and support.
• Development of local capacity (e.g., plans, resources, and capabilities) to prepare for, respond to, and recover from active shooter situations in schools, workplaces, places of worship, public gathering spaces, and other settings.
• Provision of effective training for threat assessment and risk management for law enforcement officers, first responders, and others.
• Prevention and mitigation of children’s exposure to neglect, abuse, trauma, toxic stress, and violence and promotion of safe, stable, nurturing relationships for children to reduce risk of future violence.
• Community-based outreach aimed at detecting and interrupting patterns of violence.

Justification
Firearm-related deaths and nonfatal firearm-related injuries are an important public health issue in the United States. Each year, more than 30,000 people die from gunshot wounds, primarily by suicide. In 2010, over 73,000 people were treated in hospital emergency departments for non-fatal gunshot wounds. Twenty-five mass shootings have occurred since 2006. Firearm-related injury and death disproportionately affect non-Hispanic African Americans (20.2 firearm-related deaths per 100,000) and young adults ages 18–24 (19.6 firearm-related deaths per 100,000; 79.2 nonfatal firearm-related injuries).

The economic costs of firearm-related injury and death are substantial. In 2005, firearm-related deaths and injuries resulted in about $32 billion in medical costs and lost productivity expenses. A 1998 study revealed that the estimated cost of firearm-related injury and death was estimated to be about $100 billion annually when factors such as lost quality of life, psychological and emotional trauma, decline in property values, and other legal and societal consequences were considered.

Restrictions on firearm-related research, surveillance, and evaluation have made it difficult to determine the most effective strategies to prevent firearm-related injury and death. Experts in the field have recommended a number of promising strategies, including those aimed at ensuring responsible access to firearms, reducing exposure to violence, supporting mental and behavioral wellbeing, and interrupting cycles of violence.
Local health departments are responsible for creating and maintaining conditions that keep people healthy and safe, including preventing unintentional and intentional firearm-related injury and death. In mass casualty events, local health departments often play a role in providing and coordinating response and recovery activities, including behavioral health services. Local health departments should be involved in the development, implementation, and evaluation of comprehensive plans that address risk and protective factors across the social-ecological levels (e.g., individual, interpersonal, community, societal).8

References

Record of Action
Adopted by NACCHO Board of Directors July 14, 1999
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