The Safe States Alliance – a national organization that reflects the interests and expertise of professionals on the front lines of injury and violence prevention – is deeply concerned about the adverse impacts of firearm-related injuries and violence. Each day, the people we serve in our states and communities must cope with the physical, social, mental, and financial costs associated with preventable self-inflicted, unintentional, and violent injuries from firearms.

By using a public health approach to injury and violence prevention, we can prevent firearm-related injuries. This policy statement recommends evidence-informed policies that will increase safety practices and supports to reduce firearm-related injuries, all of which are consistent with the Second Amendment and relevant case law.

To prevent firearm-related injuries and violence, the Safe States Alliance urges policymakers and other national, state, and local leaders to take four major actions:

1. Fund research on firearm injury, including appropriating public funds and leveraging private funds for research. This will allow experts to:

   A. Use data reporting systems to better understand firearm-related injuries and deaths.

   Policymakers and other national, state, and local leaders should provide funding to:

   • Support the National Violent Death Reporting System (NVDRS), which will help states collect comprehensive data, support the analysis of the data being collected, and advance scientific research.

   • Support the Behavioral Risk Factor Surveillance System’s (BRFSS) firearm module - which asks about firearm ownership and storage - being used as a core module at least biennially, enabling broader population data collection and comparisons between states.

   • Collect, analyze and disseminate hospitalization and emergency department data for nonfatal firearm injury reporting initiatives.

   • Research protective factors specific to firearm violence prevention.

   • Support implementation of evidence-informed guidance such as the Prevention Institute’s Recommendations for Preventing Gun Violence.

   • Research how social determinants of health and health inequities (including historical and community trauma, inequitable distribution of services and other protective factors, gender norms, and others) contribute to race, place, and gender differences in firearm injuries.
B. Thoroughly evaluate the implementation of firearm-related policies proposed at state and local levels, such as:

- **Extreme Risk Protective Order laws** Also known as Gun Violence Restraining Order laws, these allow a family member, law enforcement, and, in one state, clinicians to petition the court requesting a judge to issue an order enabling law enforcement to temporarily remove guns from individuals deemed a risk to themselves or others based on dangerous behavior. New gun purchases are also prohibited under these orders.

- Policies restricting physicians’ ability to discuss firearm safety with patients.

- Expanded concealed carry laws ("guns everywhere" laws) These laws allow concealed carry permit holders to bring concealed firearms into bars, schools, churches, and some government buildings.

- Concealed carry reciprocity laws - laws that require states with stricter gun laws to honor out-of-state permits from states with less restrictive requirements.

- **"Stand Your Ground" laws** These laws allow a person to use deadly force in self-defense in public places, even if such force can be safely avoided by retreating or if the availability of a safe retreat is unclear.

- Increased sentencing laws – laws that provide for enhanced penalties when a firearm is used in a crime.

- Local governmental entities’ refusal to enforce state firearm regulations.

C. Analyze and evaluate common but under-researched firearm-related issues and interventions, such as:

- Risks (suicide, unintentional injury, and risk of theft or unauthorized access) and benefits (recreational and defensive use) of firearm ownership.

- Involvement of Second Amendment advocacy organizations in suicide prevention activities.

- Interventions by various professionals (health, law enforcement, military, etc.) to promote firearm safety practices.

- Effects of school-based programming about firearms on student health and safety.

- Effective means of promoting safe firearm storage to improve gun owners’ safety practices.

- Circumstances surrounding officer-involved shootings and interventions that may decrease these events using National Violent Death Reporting System data as a resource.

- Relationships between behavioral health conditions, and firearm injury, including suicide.

D. Thoroughly review and evaluate laws, practices, and approaches for firearm injury prevention.

When appropriate research is available, laws, practices and approaches determined to be effective or promising in the peer-reviewed scientific research should be considered for broad dissemination. Efforts to assure such laws and programs are effectively implemented are needed to build this evidence base.
2. Use credible research and evaluation to inform policies and practices in firearm injury prevention. To reduce firearm-related injuries and deaths, policymakers and other national, state, and local leaders should adopt evidence-informed policies that:

A. Follow the recommendations laid out in the U.S. Government Accountability Office (U.S. GAO) report, *Personal Firearms: Programs that Promote Safe Storage and Research on Their Effectiveness*vi, including:
   - Further evaluating safe storage promotion programs using specifically appropriated funds.
   - Studying which approaches to safe firearm storage promotion are most effective.
   - Studying the impact of safe storage on firearm-related injury rates.

B. Reflect the community-level protective actions against violence discussed in the Centers for Disease Control and Prevention (CDC) publication, *Comprehensive Technical Package for the Prevention of Youth Violence and Related Behaviors*vii, including:
   - Modifying physical and social environments to build safe, accessible public gathering spaces.
   - Reducing exposure to community-level risks that evidence shows are related to violence, such as density of alcohol outlets, residential instability and concentrated poverty.
   - Implementing programs focusing on street outreach and changing community norms around conflict resolution, problem-solving and violence.

3. Remove policy barriers to effectively preventing firearm injury. To allow federal and state agencies to study the effects of innovative local policies and disseminate promising models, policymakers should:

A. Remove the Tiahrt Amendment from all federal appropriations bills moving forward.
   This restriction limits researchers’ ability to use firearm trace data and law enforcement officials’ ability to identify and arrest buyers and sellers of illegal firearms.

B. Remove the 1996 Dickey Amendment from all appropriation bills moving forward.
   Interpretation of language in the Dickey Amendment has resulted in many federal agencies’ reluctance to support urgently needed research on gun violence prevention and created barriers to the CDC taking action to advance the field of firearm injury prevention.

C. Repeal state laws prohibiting municipal and other local governments from enacting locally appropriate policies to prevent firearm injury.
   Also known as preemption laws, these forbid local governments to make firearm-related policies more restrictive than state law.
4. Adopt policies to improve safety practices, which will benefit individual firearm owners and communities. Policies adopted by national, state, and local leaders should be evaluated for effectiveness and should:

A. Require comprehensive training on safe and appropriate use of firearms, including skills practice and demonstration, to obtain a concealed carry permit in all 50 states. Require ongoing skill development and practice as part of maintaining permit status.

B. Provide funding to build effective partnerships between law enforcement and public health agencies to engage in and evaluate public health-informed community violence prevention efforts.

C. Adopt Child Access Prevention/Dangerous Access Prevention laws, which create an obligation for firearm owners to keep their firearms secured from access by children and other unauthorized users, holding them liable if a child or other unauthorized person uses their unsecured firearm to cause harm.

D. Enact federal policies that promote safety for firearm owners and the broader community, including (but not limited to):

• Mandating universal background checks for all firearm sales;
• Strengthening the background check system;
• Legislating and enforcing requirements to report lost and stolen firearms to local law enforcement;
• Enacting and enforcing stronger laws to prohibit firearm trafficking and identify and hold accountable those that engage in it;
• Banning military-style assault weapons and high-capacity magazines, with appropriate exceptions; and
• Prohibiting individuals at specific risk of doing harm to themselves or others from purchasing firearms. Prohibitions should carefully follow due process and be based on behavior and known warning signs rather than broad diagnostic categories. See above information about Extreme Risk Protection Orders for more information.

E. Address safety in firearm technology by:

• Bringing firearms and accessories under the jurisdiction of the Consumer Product Safety Commission or other federal safety entity.
• Allowing and encouraging gun safety technology, sometimes known as “smart guns,” to be manufactured and sold in the United States.
• Preventing the creation and sale of 3-D printed firearms and firearms that are undetectable by existing security technology.
BACKGROUND

Issues related to firearms are of great concern to the public and policymakers. In recent years, mass shootings, policy debates around bump stocks and assault weapons, concerns about community violence, corporate actions to regulate gun sales, and social movements advocating for both limiting and expanding access to personal firearms have been prominent in the news. A common thread among Second Amendment advocates and gun violence prevention advocates has been concern about safety and reducing the number of people injured by firearms. This has brought conversations about safe firearm storage, suicide prevention, and what restrictions are reasonable around firearms kept for ranch management, hunting, law enforcement, self-defense or recreation into the mainstream. This time of shifting ground offers opportunities for the public health field and firearm users to learn more about risks, benefits, and safety practices and work together to make our communities safer.

An estimated one-fifth to one-third of households in the United States keep firearms for personal use. Due to policy barriers hampering funding of firearm-related research, the most recent national estimate of safe storage practices comes from a 2002 study that found over 25% of firearm-owning households stored firearms loaded, and only half of those loaded firearms were kept locked. Recent research tells us that storing firearms locked reduces the risk of suicide, domestic violence homicide, and unintentional injury.

Despite legitimate uses of guns and positive changes in safety practices, firearm injuries and deaths continue to be a public health problem. In 2016, the most recent year in which national data are available, 38,658 people in the United States died from firearm-related injuries. About 60% of these deaths were suicides, 37% were homicides, and legal intervention and unintentional injuries comprised slightly more than 1% each. Boys and men are disproportionately killed and injured by firearms, but demographics differ between suicide (which disproportionately affects Native American and white communities, rural areas, and middle-aged and older people) and homicide (which disproportionately affects black and Native American communities, urban communities, and young adults). In 2016, 116,414 people, more than ¾ of whom were injured in assault, were treated for firearm-related injuries in hospital emergency departments. It is worth noting that despite the media and community attention to mass shootings, a small proportion of all firearm deaths and injuries result from mass shootings; the majority are from everyday community violence.

The CDC estimates the cost of medical costs and lost productivity associated with firearm-related death and injury at $4.9 billion annually. This amount increases significantly when taking into account other costs related to emergency medical services, hospital and emergency department treatment, ongoing medical care and mental health services, law enforcement, and the trauma experienced by individuals, their families and communities. Reducing firearm-related injuries has significant financial benefits. Preventing just one firearm-related death would save over one million dollars in medical and lost productivity costs in addition to the personal and community harm resulting from this type of loss.

Firearm-related injury is preventable through a comprehensive public health approach that addresses government and institutional policy, media and culture, individual choices about safety, and other factors in concert with one another. As experts in the field of prevention, we consider policy an essential part of the public health solution to the problem of firearm injuries and deaths.
Citations

15. Ibid.
16. Ibid.
17. Ibid.
18. Ibid.