



FIREARM INJURY PREVENTION

Value Statement | 2020-2021 Policy Council

The Texas Nurses Association (TNA) believes firearm violence is a crisis in the United States, and the prevention of homicides, suicides, accidents, and other firearm-related injuries is a public health concern. As clinicians, educators, administrators, and researchers, nurses play an important role in preventing firearm-related injuries, in line with the Governor's Texas Safety Action Report.¹ TNA supports funding research on firearm injuries and evidence-informed policy efforts, including legislation, which promote firearm safety without unnecessarily restricting gun ownership. Federal funding for firearm injury and violence prevention in the past two decades has not been commensurate with mortality.² Suicide rates are increasing, homicide rates continue to harm marginalized populations, and relatively little is known about preventing mass shootings. Because firearm violence is associated with mortality and significant morbidity, we as nurses must proactively address this critical public health issue.

FIREARM DEATHS

The firearm death rate (number of deaths recorded divided by the number of people in the population) in Texas is 12.2 persons killed per 100,000; the majority of which were suicides (62%) and homicides (35%).³ In addition to suicidal and homicidal deaths, firearm violence also includes unintentional injuries—such as by children when guns are not secured or unloaded—and increasingly, mass shootings. Determinants of firearm violence and populations affected differ based on intent (Table 1).

While firearm-related deaths are not among the primary causes of death of Texans, they are one of the leading *preventable* causes of death. Addressing the root causes of growing firearm violence with evidence-based methodology could both reduce the over 3,000 deaths per year, and have a positive effect on preventing other areas of violence.⁴ Understanding health in relation to firearm violence requires a multi-faceted holistic approach addressing mental and behavioral health, social norms and morals, impact of desensitization for young adults and children, and cultural-economic factors that promote an environment that allow, if not actively support, and encourage firearm violence. This would provide meaningful change not only to Texas but globally.

Firearm violence in our country has been recognized as a public health issue by the American Medical Association, American Psychological Association, American Public Health Association, and other health care and non-health care entities. From before the cradle to after the grave, nurses are involved in every aspect of the human condition.

Historically, we have had the ethical, moral, and legal charge of protecting our population from injury. Any threat to our charges warrants our involvement and our action. As the most trusted profession, it is our duty to provide leadership in local, state, and national efforts to prevent firearm-related deaths and injury.

Table 1. Risk factors associated with firearm-related injuries and deaths

	Suicide	Homicide	Unintentional	Mass shooting
Access to loaded, unlocked firearms	√ ⁵⁻⁹	√ ^{5,7,10}	√ ^{8,11}	
Bullying and cyberbullying	√ ^{9,12}	√ ¹²		
Community violence (gang violence)		√ ¹³		
Firearm stockpile	√ ¹⁴	√ ¹⁴		
Intimate partner violence/ Sexual violence	√ ^{9,15}	√ ¹⁶		
Lack of social cohesion/Social isolation	√ ⁹	√ ¹⁷		
Low educational attainment	√ ⁹	√ ^{17,18}		
Male gender	√ ^{9,19,20}	√ ^{17,19}		
Media coverage and online searches				√ ²¹
Mental illness/Depression	√ ^{9,22}			
Poverty		√ ^{17,19,23}		
Race	√ ^{*9,19,20}	√ ^{†19,20}		
Racial segregation		√ ¹⁷		
Rurality	√ ²⁴			
Substance use	√ ^{9,25}	√ ²⁶		

Notes. *White †Black and Hispanic

This value statement was developed in accordance with Texas Nurses Association House of Delegates Resolution "Gun Violence as a Public Health Crisis," approved by the Board of Directors on June 6, 2020.

- ¹ Abbott G. (2019). Texas Safety Action Report. https://gov.texas.gov/uploads/files/press/Texas_Safety_Action_Report.pdf
- ² Cunningham, R. M., Ranney, M. L., Goldstick, J. E., Kamat, S. V., Roche, J. S., & Carter, P. M. (2019). Federal Funding For Research On The Leading Causes Of Death Among Children And Adolescents. *Health affairs (Project Hope)*, 38(10), 1653–1661. <https://doi.org/10.1377/hlthaff.2019.00476>
- ³ National Center for Injury Prevention and Control. (2020). *Web-based Injury Statistics Query and Reporting System*. Centers for Disease Control and Prevention. Centers for Disease Control and Prevention. www.cdc.gov/injury/wisqars
- ⁴ Wilkins N, Tsao B, Hertz M, Davis R, Klevens J. *Connecting the Dots: An Overview of the Links among Multiple Forms of Violence*. Oakland, CA; 2014.
- ⁵ Anglemeyer, A., Horvath, T., & Rutherford, G. (2014). The accessibility of firearms and risk for suicide and homicide victimization among household members: a systematic review and meta-analysis. *Annals of Internal Medicine*, 160(2), 101–110. <https://doi.org/10.7326/M13-1301>

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