

Talking to Your Patients About Firearm Safety

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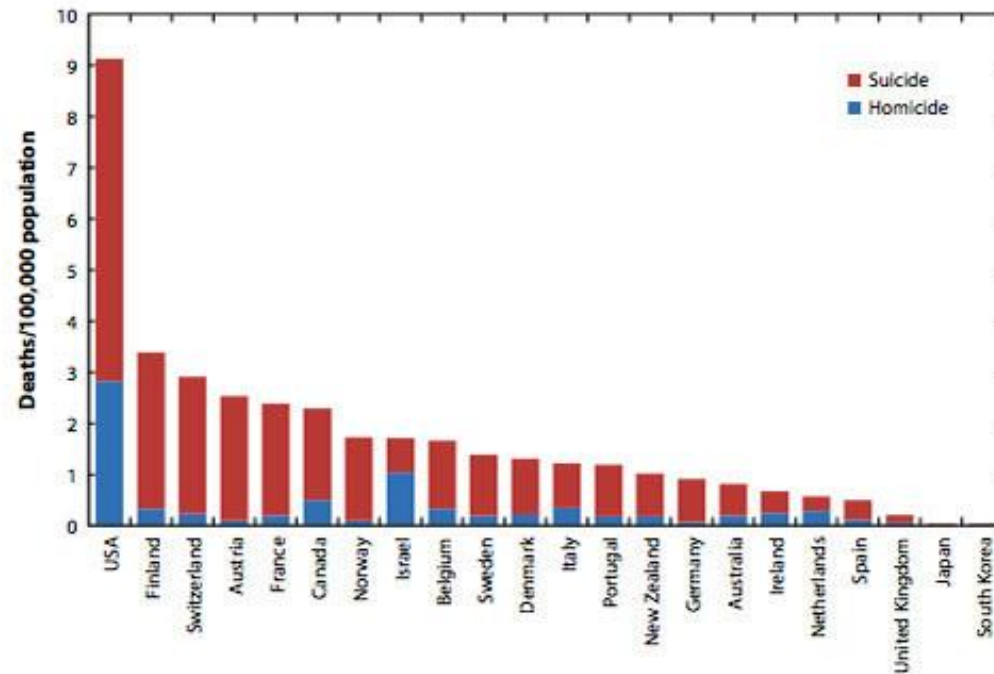
Disclosures

Presenters have no conflicts of interest.

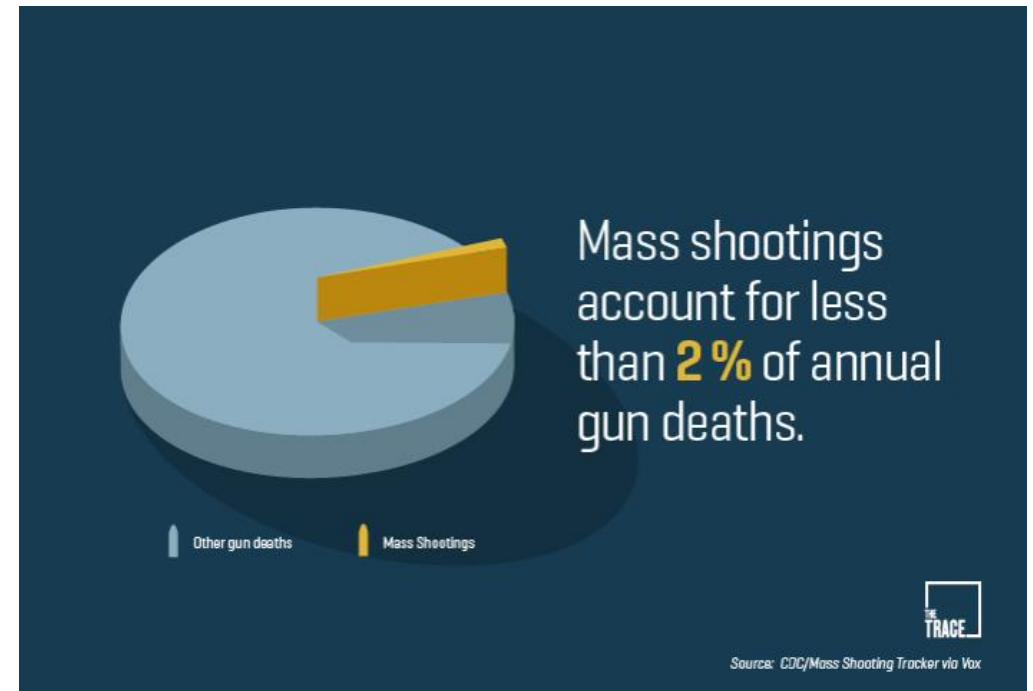
Learning Objectives

- ❖ Summarize U.S. gun violence and gun related injuries data
- ❖ Review U.S. laws concerning gun ownership
- ❖ Discuss implications of firearm safety and public health
- ❖ Outline approaches to discussing gun safety with patients
- ❖ Explain how to give practical advice to patients regarding gun safety

Firearm injury is a true epidemic

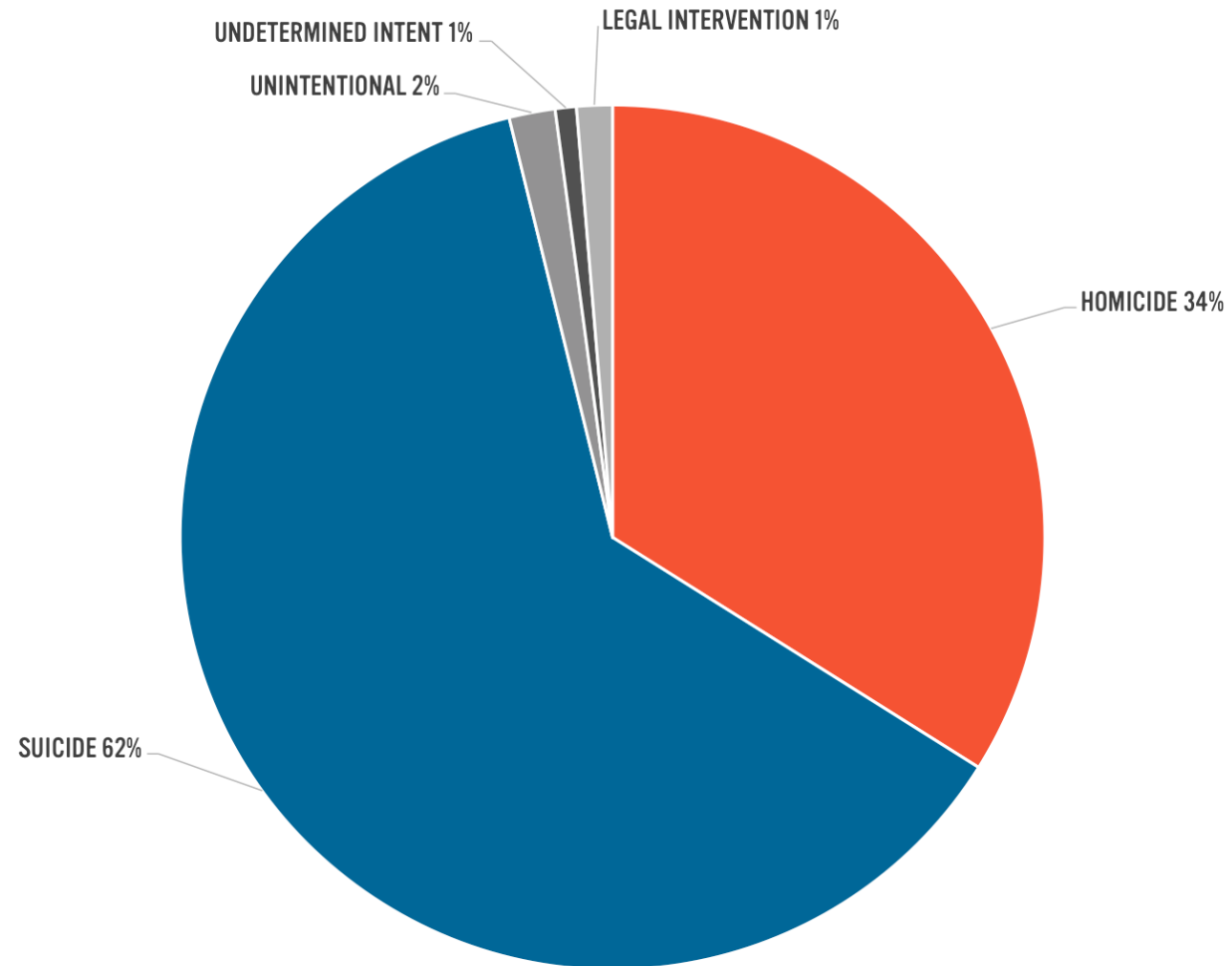


Alpers, Philip, Amélie Rossetti and Daniel Salinas. 2016. Guns in the United States: Rate of All Gun Deaths per 100,000 People. Sydney School of Public Health, The University of Sydney. GunPolicy.org, 2 December. Accessed 13 November 2017.



<https://www.thetrace.org/2017/01/understanding-mass-shootings-in-america/>

GUN DEATHS IN AMERICA BY INTENT



<https://everytownresearch.org/gun-violence-by-the-numbers/>

How many guns are out there?

Americans own an estimated 270 million firearms – approximately 90 guns for every 100 people.

However, these high numbers of firearms are concentrated in an increasingly small minority of households.

General Social Survey, National Opinion Research Center at the University of Chicago,

- American household gun ownership peaked in 1977, when more than half of American households (53.7%) reported having any guns.
- By 2014, only 32.4% of American households had a gun in the home — less than a third.
- From 1985 to 2014, the percentage of Americans who reported personally owning a gun dropped by more than a quarter, down to 22.4%.

What is the damage accruing from guns?

Two major sources of data:

Centers for Disease Control

- Capacity to collect gun-related fatalities limited by congressional actions

Law Center to Prevent Gun Violence

- Private Non-Profit Group
- Their data indicate that, on average, 117,000 persons are shot annually

What is the damage accruing from guns?

Roughly 30,000 persons lose their lives to gun violence (including homicide, suicide and accidental shootings)

In 2010, guns took the lives of 31,076 Americans in homicides, suicides and unintentional shootings.

- This is the equivalent of more than 85 deaths **each day** and more than three deaths **each hour**.

73,505 Americans were treated in hospital emergency departments for non-fatal gunshot wounds in 2010.

Firearms were the third-leading cause of injury-related deaths nationwide in 2010, following poisoning and motor vehicle accidents.

Between 1955 and 1975, the Vietnam War killed over 58,000 American soldiers – less than the number of civilians killed with guns in the U.S. in an average two-year period.

- i.e., gun death rates per year 10 times the rate in Vietnam

In the first seven years of the U.S.-Iraq War, over 4,400 American soldiers were killed. Almost as many civilians are killed with guns in the U.S., however, *every seven weeks*.

Suicides

Firearms were used in 19,392 suicides in the U.S. in 2010,

- 62% of all gun deaths.
- Over 50% of all suicides are committed with a firearm.

49 gun suicides per day for the years 2005-2010.

White males, about 40% of the U.S. population, accounted for over 80% of firearm suicides in 2010.

California study -- handgun purchasers found that in the first year after the purchase of a handgun, suicide was the leading cause of death among the purchasers.

Firearms were used in nearly 44% of suicide deaths among persons under age 25 in 2010.

More than 75% of guns used in suicide attempts and unintentional injuries of 0-19 year-olds were stored in the residence of the victim, a relative, or a friend.

The risk of suicide increases in homes where guns are kept loaded

Imposing Legal restrictions

Brady Handgun Violence Prevention Act (Brady Law) of 1993

Federal Bureau of Investigation (FBI) in **1998 created**
NICS (National Instant Criminal Background Check)

After a prospective buyer completes the appropriate form, the holder of a Federal Firearms License (FFL) initiates the background check by phone or computer.

What is a Background Check?

Reasons for denial of a gun license/purchase

1. Convicted of a felony punishable by more than one year or a misdemeanor punishable by more than two years: 731,723

2. Fugitive from Justice: 161,821

3. Misdemeanor Crime of Domestic Violence Conviction: 126,169

- limited to misdemeanor convictions for abusing *a live-in significant other or child*.
- A misdemeanor for violence against a sibling, parent, or an intimate partner who does not live with the person charged would not disqualify a purchaser — an aspect of the law sometimes referred to as [“the boyfriend loophole.”](#)
- became a prohibiting category after the 1996 passage of an amendment to the *Gun Control Act of 1968* sponsored by Senator Frank Lautenberg of New Jersey.

4. Unlawful User/Addicted to a Controlled Substance: 117,339

- The fourth most common reason for being rejected by a federal background check is also the category that should have stopped Dylann Roof, the Charleston church shooter, from getting his Glock, since he had confessed to illegal possession of a controlled substance.
- National Institutes of Health estimates [almost 25 million Americans](#) used an illicit drug in the past month, NICS only has about [24,000 active drug-related records](#).

Reasons for denial of a gun license/purchase

5. State Prohibitor: 69,341

Many states have their own additional categories of prohibited purchasers that they report to NICS. South Carolina, for example, denies the right to own a gun to anyone [known to abuse alcohol](#). The federal government has no such disqualifier, despite alcohol being [the substance known to be most associated with gun violence](#).

6. Protection/Restraining Order for Domestic Violence: 52,895

7. Under Indictment/Information: 38,765

Anyone who is under indictment but not yet convicted of a crime carrying a potential year-long jail sentence is barred from owning a gun.

8. Illegal/Unlawful Alien: 18,023

9. Federally Denied Persons File: 5,939

This is [a catch-all category](#) that includes various people whom the FBI deems ineligible to possess a firearm.

10. Dishonorable Discharge: 1,036

11. Renounced U.S. Citizenship: 73

Mental Health Exclusions

Adjudicated Mentally Ill : 24,728

Disqualifying mental health records form [the second largest body of records held by NICS](#).

Simply receiving a diagnosis of a severe mental illness like schizophrenia is not enough to put an individual in this category —

a judge must [legally declare a person](#) mentally unfit to own a gun or involuntarily commit him or her to a “mental institution.”

Though NICS does have access to a large number of disqualifying mental health records, an unknown number still aren't reported.

- E.g., John Houser, opened fire in a Lafayette, Louisiana, movie theater,
- judge considered his severe mental health problems
- Never be involuntarily committed, and even if they had, [Georgia law](#) would have required the purging of any records of that commitment by 2013, before he purchased his gun.

What Role Do Physicians Play in Prevention

Physicians may ask:

- How many sexual partners have you had?
- Do you smoke? Does anyone else in your home smoke?
- How much and how often do you drink?
- IS THERE A GUN IN YOUR HOME?

Physicians who advocate for asking the question argue that

- They aren't suggesting that the gun be removed
- May advocate for keeping it safely – childproof locks on firearms, storing firearms in a locked cabinet
- May identify factors that suggest patient is depressed or is victim of domestic violence that would prompt such question

May be obligated to report such issues to local police.

Pushback

Gun rights groups argue that this is none of the doctor's business

Gov. Rick Scott (R-FL) signed a 2011 bill restricting doctors' inquiries about the firearms in their patients' lives.

Firearm Owners Privacy Act, and nicknamed "[Docs vs. Glocks.](#)"

Florida only state that had such a law - struck down in February 2017

Firearm Safety is a Public Health Issue



Everytown, "Gun violence by the numbers", data from CDC National Vital Statistics System. <https://everytownresearch.org/gun-violence-by-the-numbers/>

Gun Owners

Most gun owners take their responsibility seriously

- Knowledgeable about their weapons
- Committed to gun safety
- Diligent about safe storage

Why individuals own firearms

- Self protection (48%)
- Hunting (32%)
- Sporting use/target shooting (7%)
- Collection (2%)

Why Do You Own a Gun?

	Aug 1999	Feb 2013	Change
<i>Among gun owners</i>	%	%	
Protection	26	48	+22
Hunting	49	32	-17
Target/sport shooting	8	7	-1
Constitutional right/ 2 nd amendment	4	2	-2
Collect guns/Hobby	4	2	-2
Other	10	7	-3
Don't know	--	<u>1</u>	
	100	100	

PEW RESEARCH CENTER Feb. 13-18, 2013. Based on those who personally own a gun. August 1999 data from ABC News/Washington Post. Figures may not add to 100% because of rounding.

Pew Research Center, "Why Own a Gun? Protection is now top reason". 2013. <http://www.people-press.org/2013/03/12/why-own-a-gun-protection-is-now-top-reason/>

What are the laws regarding gun ownership in MA?

Person must be licensed to have a gun

- Firearm ID card (FID) or
- License to carry (LTC)

Licenses are issued and renewed by the local police department

Licenses are valid for 6 years

Safety course is required

Licenses are denied, suspended or revoked under certain circumstances

Mass.gov, “Massachusetts law about guns and other weapons”. <https://www.mass.gov/service-details/massachusetts-law-about-guns-and-other-weapons>

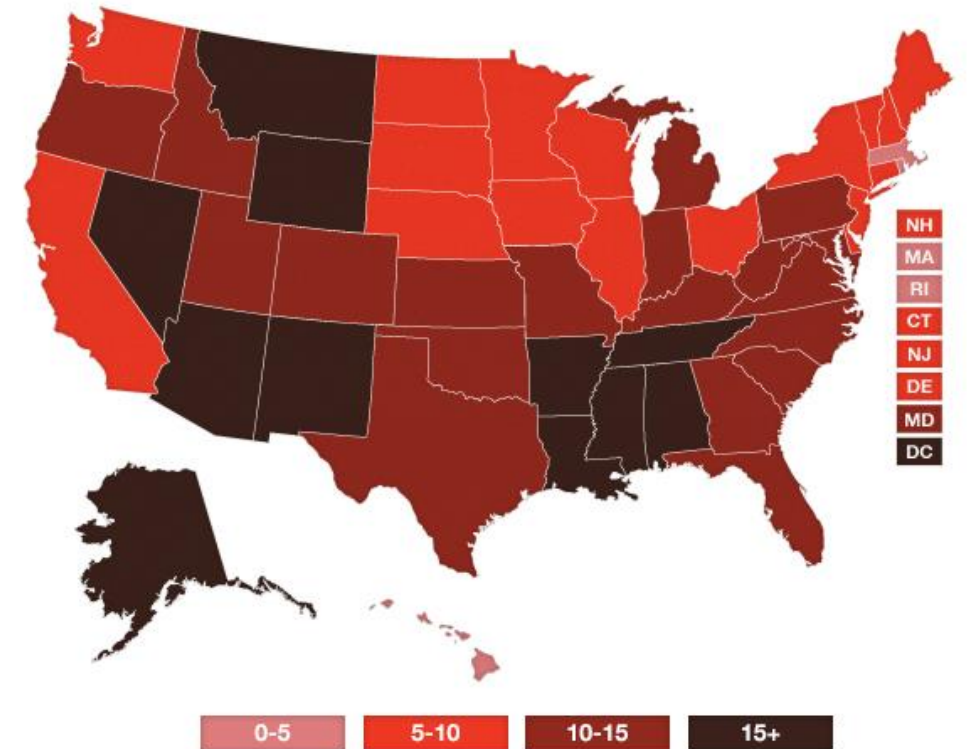
Comparing Massachusetts to the U.S.

Massachusetts has the **lowest** rate of gun deaths in the country

- 3 gun-related deaths per 100,000 residents

722 people are injured by firearms every year in Massachusetts, 225 are killed

U.S. Gun Deaths, 2000-2010

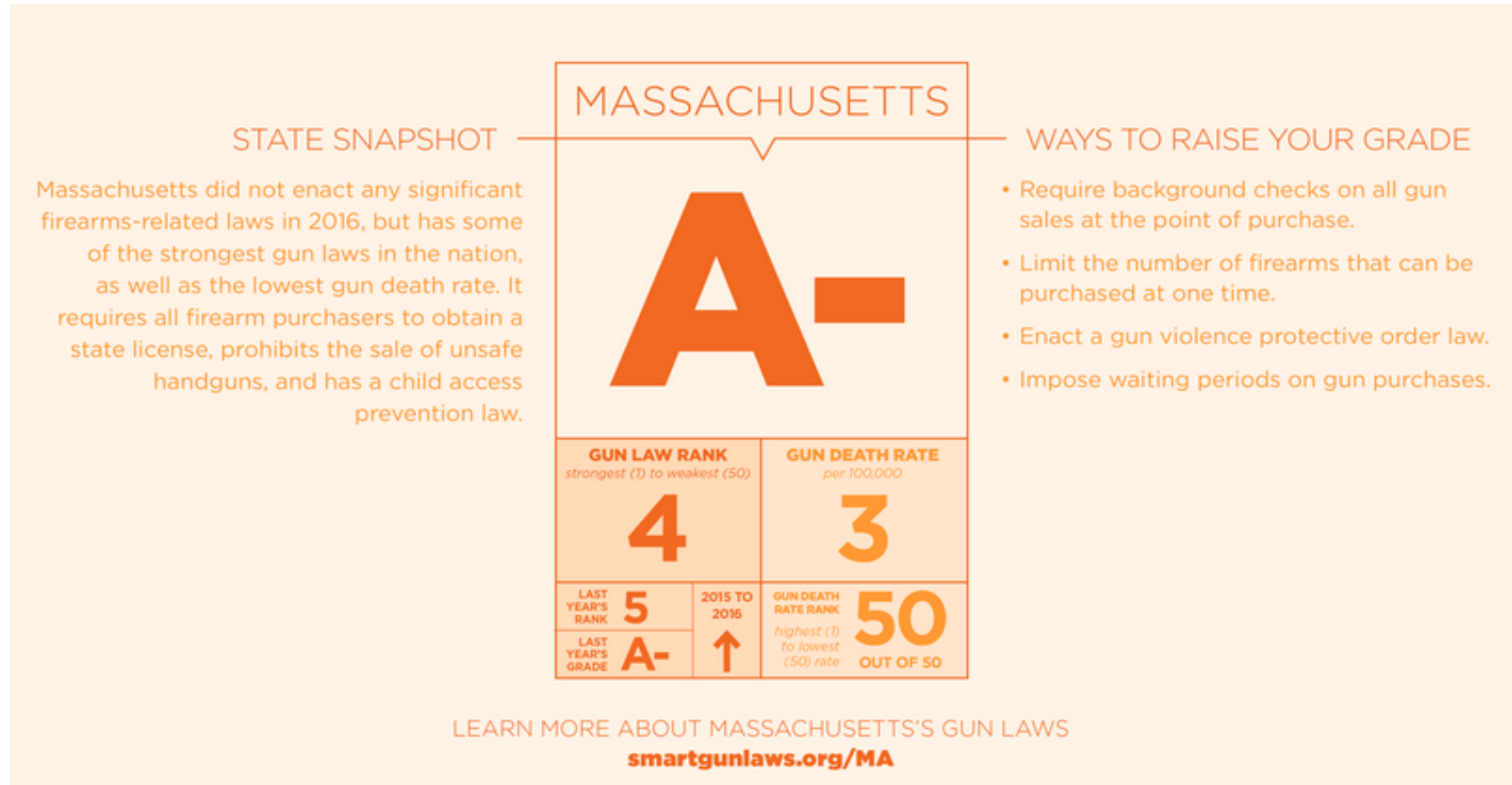


*Age-adjusted firearm deaths per 100,000 population**

SOURCE: Centers for Disease Control and Prevention's Injury Prevention and Control Unit

Violence Policy Center, "States with weak gun laws and higher gun ownership lead nation in gun deaths, new data from 2015 confirms". January 10, 2017.

Gun law state score card



Law Center to Prevent Gun Violence. "2016 Gun Law State Score Card", <http://gunlawscorecard.org/>

Why talk to patients about responsible gun ownership?

Physicians routinely inquire and counsel patients about health-related behaviors, conditions and risks

Health-related gun behaviors and risks:

- Safe storage
- Household risk
- How to mitigate risk

Education is particularly important where increased risk factors apply

What's recommended regarding physician counseling?

American College of Physicians – “Physicians have a right and responsibility to discuss gun violence with their patients”

- Approach firearm safety as a public health issue
- Physicians play critical role in educating public on risks of ownership and need for safety through their encounters with patients

American Academy of Pediatrics - Encourage and Support Physicians' Role in Gun Violence Prevention

- The Bright Futures guidelines for well-child visits include anticipatory guidance regarding whether firearms are in the home

American Academy of Family Physicians - Recognize firearm-related deaths, injury and violence as a significant public health problem

- Recommend counseling patients, especially those at high risk

American Medical Association – backed recommendations made by the AAFP, AAP, ACEP, ACOG, ACP, APHA

Barriers to Discussing Guns with Patients

Internists' Attitudes Toward Prevention of Firearm Injury (2014, Annals of internal medicine)

- **85%** of respondents believed that firearm injury is a **public health issue**
- **42%** reported ever **asking** whether patients had guns in their homes

Firearm Injury Prevention Counseling by Pediatricians and Family Physicians (1995, JAMA)

- 70% of pediatricians and **46%** of family physicians reported believing that **physicians have a responsibility** to counsel families about firearm safety
- 25% of pediatricians and **12%** of family physicians **reporting counseling** more than 5% of their patients about gun safety

Reasons why doctors choose not to discuss firearm safety with patients:

- Belief that it is against the law to ask
- Time limitations
- Concerns about confrontation
- Lack of training or information about guns and gun safety

Are there any legal restrictions on my ability to talk to patients about gun safety?

NO! In Massachusetts there are no restrictions on a provider's ability to discuss gun safety or to record information about those conversation in the patient's record.

- Free to ask
- Free to record

Mass Medical Society, "Talking to patients about gun safety".

http://www.massmed.org/uploadedFiles/massmedorg/Patient_Care/Health_Topics/Firearm%20Guidance%20for%20Providers%20final.pdf

When should I engage with my patients about firearms?

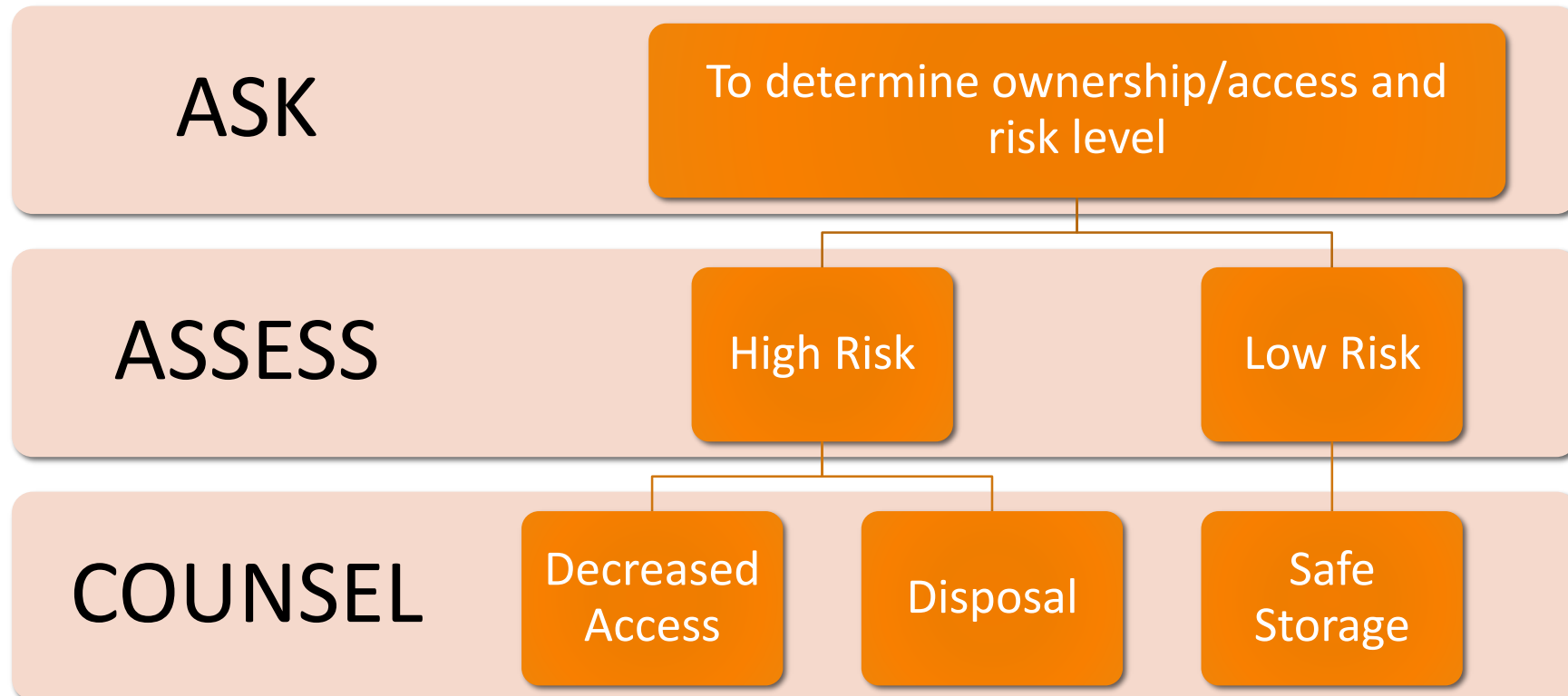
Particularly important when there is risk of gun-related injury in the household:

- Young child or teenager
- Individual with suicidal thoughts or severe depression
- Individual with history of violence
- Individual with altered mental status (dementia or drug addiction)
- Persons with what appears to be a growing degree of frustration, life challenges – “accumulating stressors” – underlying factor in most “mass murders”

Mass Medical Society, “Talking to patients about gun safety”.

http://www.massmed.org/uploadedFiles/massmedorg/Patient_Care/Health_Topics/Firearm%20Guidance%20for%20Providers%20final.pdf

How to engage patients



How should I approach my conversation with my patients about guns?

Remember that most gun owners are knowledgeable about and committed to gun safety

Focus on health

Provide context for the questions

Make sure the questions are not accusatory

Consider starting with open ended questions

Meet the patients where they are

Mass Medical Society, “Talking to patients about gun safety”.

http://www.massmed.org/uploadedFiles/massmedorg/Patient_Care/Health_Topics/Firearm%20Guidance%20for%20Providers%20final.pdf

What advice can I give
my patients?

What you can tell your patients

Safe storage

- What the law says
- Safest way to store a gun
- Specific storage options

Consider household members' access to firearms

If there are safety concerns how can the owner make the gun less accessible?

Disposing of an unwanted firearm

What protected health information *must* I report to law enforcement or others outside of the patient-provider relationship?

- Gunshot wounds – report to Weapons related injury surveillance system (WRISS)
- Abuse and neglect
- Warning or protecting potential victims
- Court orders and subpoenas

Mass Medical Society, “Talking to patients about gun safety”.

http://www.massmed.org/uploadedFiles/massmedorg/Patient_Care/Health_Topics/Firearm%20Guidance%20for%20Providers%20final.pdf

What protected health information *may* I report to law enforcement or others outside the provider-patient relationship?

- Serious and imminent threats
- Crime on the premises
- Crime in an emergency setting
- Minors' records (to parents or guardians)
- Patient authorized information

Mass Medical Society, "Talking to patients about gun safety".

http://www.massmed.org/uploadedFiles/massmedorg/Patient_Care/Health_Topics/Firearm%20Guidance%20for%20Providers%20final.pdf

How can I advocate?

- Providers can have a major voice on healthcare policy and legislation
- Stay informed!
- Speak out!

Stay informed!

- Understand the policies under consideration on the state and local level
- Learn how your community is effected
- Understanding risk factors

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<https://everytownresearch.org/>

Speak out!

- Contact legislators
- Collaborate with groups whose values you align with
- Write for professional organizations

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Editorials

Primary Care Physicians' Role in Counseling About Gun Safety

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ANUPAM B. JENA, MD, PhD, Harvard Medical School, Boston, Massachusetts
VINAY PRASAD, MD, Johns Hopkins University, Bloomberg School of Public Health, Baltimore, Maryland
Am Fam Physician. 2014 Nov 1;90(9):619-620.

News stories of gun violence have ignited the debate about what public health measures are appropriate for reducing the epidemic of gun injury and death. Although critics of stricter gun policies cite data showing stable rates of gun-related homicide over the past decade, these statistics ignore the increased rate of shootings and that improved trauma care has stabilized the death rate.¹ With the shooting rate climbing, primary care physicians may reasonably ask what role they can play in reducing injuries.



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DELIVERING CARE

Gun violence: Use public health approach in the exam room

JAN 09, 2017



Troy Parks
Staff Writer
AMA Wire

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Counseling patients on proper firearm safety and storage comes with cultural, societal and political barriers. But when physicians focus on the well-being of their patients, risk factors and research, and use an empathetic and knowledge-driven approach, firearm safety can improve. It's not about politics. It's about keeping

Clinical Scenario 1

38 year old patient was recently discharged after voluntary psychiatric commitment but has had a relapse of symptoms and is brought to your office by his wife. His wife tells you that the patient has a firearm and she is concerned about his access to the weapon.

What should you do?

- HIPPA should not prevent you from working with couple as a team, as long as the husband agrees to having his wife present.
- No privacy limitations on asking the wife more questions about the patient's risk without disclosing the patient's health information.
- Can speak to wife outside of patient's presence if you believe that it is directly related to the patient's safety
- May want to discuss ways to make gun less accessible – keeping gun locked, unloaded, and with ammunition stored somewhere else or store temporarily gun somewhere else
- IF wife has concerns that you can not address you can recommend she report it to the police department
- IF patient is an imminent threat to himself or someone else you can report to the police or consider involuntary admission

Clinical Scenario 2

6 year old patient comes to the ER by ambulance with a gunshot wound. He says he was home alone and playing with his father's unlocked gun.

What should you do?

- Treat gunshot wound
- Report gun shot wound to WRISS
- Reasonable cause to consider neglect of the child – consider contacting DCF
- Talk to parents and child about safe storage of firearms

Clinical Scenario 3

A 40 year old female patient comes in for a routine check-up. She has two young children in her household. When asked about gun safety she refuses to answer.

What should you do?

- Obviously can not force a patient to engage in a conversation.
- Simply offer to the patient information about gun safety.
- Assume the patient is a responsible gun owner and if she does not want information from you that is her choice.

Resources for firearm safety information

Everytown for gun safety - <https://everytownresearch.org/>

Massachusetts Medical Society – <http://www.massmed.org/Patient-Care/Health-Topics/Firearm-Violence-Resources/#.WgnGq4ZryRs>

Firearms Industry Trade Association - <https://www.nssf.org/safety/>

Children's Safety Network -

<https://www.childrenssafetynetwork.org/sites/childrenssafetynetwork.org/files/FirearmResourceGuide2013.pdf>

American Public Health Association - <https://www.apha.org/topics-and-issues/gun-violence>

“Firearm violence is not just a criminal justice issue, but also a public health threat that requires the nation's immediate attention.”

- Thomas Tape, MD, FACP, chair of ACP's Health and Public Policy Committee

