

Gun Control:

A Health Policy Issue?

un violence has a clear and chilling impact on population health. Each year over 31,000 people in the United States die from gunshot wounds; approximately 61 percent of these firearm fatalities are suicides and 35 percent are homicides (CDC 2013a). In addition to these tragic deaths, over 70,000 people are treated in hospital emergency rooms annually for nonfatal gunshot wounds (Webster et al. 2012). The Pacific Institute for Research and Evaluation estimates that medical costs for firearm injuries (both fatal and nonfatal) totaled more than \$2.8 billion in 2010. Approximately one-half of these costs were publicly funded through Medicaid and Medicare (Pacific Institute for Research and Evaluation 2010).

Because African Americans are disproportionately affected by gun violence, gun-related morbidity and mortality contribute to racial inequities in health. In 2010 the rate of firearm fatalities among African Americans (17.7 per 100,000) was nearly double the rate among whites (CDC 2013b). When suicides are excluded from these statistics, African Americans are over seven times more likely than white Americans to be killed by a firearm. For African-American adolescents, guns are the leading cause of death (Children's Defense Fund 2012).

Although the health-related consequences of gun violence are undeniable, the need for stronger gun control policies to address these health outcomes is hotly contested. Gun rights activists maintain that more stringent gun control laws will not deter criminals, but will only burden law-abiding Americans and infringe on their Second Amendment rights. Gun control advocates point to permissive gun laws and high rates of gun ownership in the United States as key factors driving our nation's high rate of firearm fatalities.

Statistics show that strong gun control policies are associated with lower rates of gun violence. States with the highest rates of gun ownership have the highest rates of gun fatalities (Violence Policy Center 2011). International comparisons also suggest that increased access to guns is associated with higher rates of gun death. The homicide rate in the United States far exceeds the rate experienced in other affluent countries where gun ownership is far less prevalent. This difference in total homicide rates is largely due to a firearm homicide rate that is over 20 times greater in the United States compared to other high-income nations (Webster et al. 2012).

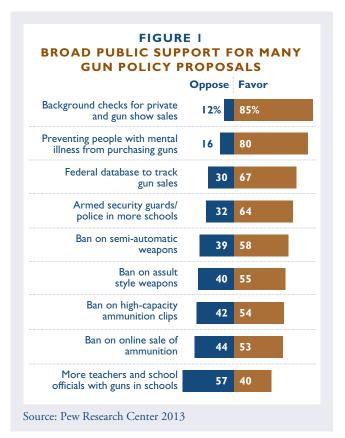
Despite these compelling associations, the impact of legal restrictions on reductions in firearm deaths and injuries cannot be fully assessed due to an underdeveloped evidence base that has been stunted by limited funding for policy-relevant research. The Centers for Disease Control and Prevention conducted gun violence prevention research in the 1980s and 1990s. However, beginning in 1996 such research has been

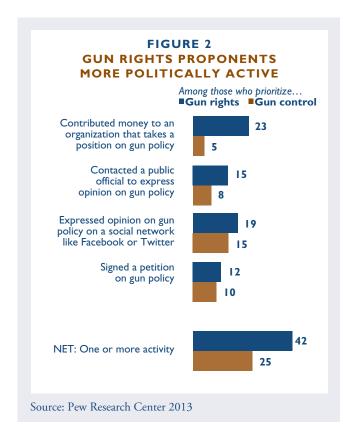
severely restricted since Congress began inserting language into the agency's annual appropriation bill banning efforts to "advocate or promote gun control."

THE FEDERAL POLICY LANDSCAPE

To date, legislative proposals to address gun violence have made little progress in Congress. Proponents of Second Amendment rights have been effective in opposing restrictions on gun sales and gun ownership at the federal level. The horrific attack in Newtown, Connecticut, galvanized gun control advocates, inspired leadership from the Obama Administration, and refocused the terms of the policy debate around gun control. While this momentum was palpable, it was not sufficient to overcome entrenched barriers to change.

On April 17, 2013, the U.S. Senate could not muster enough votes to expand background checks for gun buyers. The Manchin-Toomey proposal would have expanded existing background checks to sales at gun shows, in-state transactions made over the Internet, and other commercially advertised sales. Unable to secure the supermajority needed to withstand





a filibuster, this bipartisan proposal was defeated in a <u>54-46</u> <u>vote</u> (U.S. Senate 2013a). A proposed amendment to ban assault rifles was rejected by an even wider <u>40-60 margin</u> (U.S. Senate 2013b).

National polls conducted by the Pew Research Center for the People and the Press (2013) indicate broad public support for the key gun control measures defeated in the Senate (as illustrated in Figure 1). Yet this polling also reveals the political calculus of the Senate roll call. Gun rights proponents are much more politically active and more likely to live in rural areas than respondents who favor limits on gun access (as shown in Figures 2 and 3). These differences in political engagement, coupled with supermajority requirements and over-representation of rural states in the Senate, led to the defeat of relatively modest gun control provisions. Although the Senate may revisit expanded background checks in the future, the prospects for stronger federal gun control policy are uncertain.

GUN POLICIES IN THE STATES

Reflecting the minimal nature of federal gun control laws, states have historically played an important role in regulating the sale and transfer of guns. States vary significantly in the strength of their gun control policies. The <u>Law Center to Prevent Gun Violence</u> (2012) has compiled information to facilitate comparative analyses of gun laws across states (as summarized in Figure 4). This interactive database of enacted laws shows substantial state-to-state variability in measures related to persons prohibited from purchasing firearms, restric-

ATTIT	UDES ABOU		
What do you think is of Americans to own ownership?			e right
p.	January 2013		
	Protect right to own guns		Jan N
Urban	37	57	493
Suburban	44	51	700
Rural	60	37	307
White, non-Hispanic	53	42	1087
Black, non-Hispanic	24	66	127
Hispanic	27	72	142

tions on sales and transfers, regulation of gun dealers and other sellers, licensure of owners, safety requirements, restrictions on types of weapons and ammunition magazines, and enforcement provisions.

While state laws are influential in reducing gun violence, protections established at the state level can be undermined by lax rules in neighboring states. A <u>study</u> conducted by <u>Mayors Against Illegal Guns</u> found that 30 percent of guns recovered at crime scenes in 2009 could be traced to sales originally made in another state. Compared to states with strong gun controls, states with relatively weak gun laws are far more likely to "export" crime guns to other jurisdictions. Ten states (Mississippi, West Virginia, Kentucky, Alaska, Alabama, South Carolina, Virginia, Indiana, Nevada, and Georgia) supplied almost half of all guns that crossed state lines before being recovered at a crime scene (Mayors Against Illegal Guns 2010).



A ROLE FOR HEALTH PHILANTHROPY?

Several philanthropic organizations, including the <u>loyce</u> Foundation, the Broad Foundations, the Open Society Foundations, and the David Bohnett Foundation, have played visible leadership roles in promoting stronger gun control policies and have publicly urged other foundations to engage in this arena. In 2011 the Joyce Foundation established the Fund for a Safer Future to give donors a collaborative vehicle for advancing comprehensive policies to reduce gun injury and death. More recently, Joyce created a rapid response fund to support gun control advocates working to achieve near-term policy objectives. While other foundations have made significant contributions to these and related efforts, the highly politicized nature of the debate has attenuated broad philanthropic investment in gun control advocacy. Observers have also noted that gun control policy often "falls through the cracks" of foundation program areas as related grantmaking does not fit squarely within traditional health, education, criminal justice, or community development portfolios.

Is the field of health philanthropy particularly "gun shy" about engaging in the contentious policy debate surrounding gun control? A number of health funders have supported grants and initiatives related to violence prevention, but relatively few have explicitly recognized gun control as a health policy objective. In light of substantial investments being made to support health reform implementation, some health funders may be hesitant to take on another high profile issue that has been framed largely along partisan lines. Others may feel that they lack adequate resources to devote to gun control advocacy given the magnitude and urgency of health reform commitments.

Despite these legitimate concerns, some health philanthropies have broadened the scope of their policy advocacy agendas to address gun violence prevention and gun control policy. For example, The California Wellness Foundation (TCWF) became the nation's first major philanthropic organization to embrace a public health model for violence prevention after it launched a comprehensive 10-year, \$60 million Violence Prevention Initiative in 1992 that included policy advocacy and policy development, research, community-based prevention, leadership development, and evaluation. Early advocacy efforts centered on a sophisticated multiyear, multimillion dollar public education campaign to increase public awareness that violence, including gun violence, was preventable. This awareness building evolved to include more targeted grassroots advocacy for policies related to reducing youth access to firearms in order to prevent injuries and deaths and increased public funding for youth violence prevention. These efforts informed California policymakers who in turn passed more than 40 laws 1 and more than 300 local ordinances, including mandatory background checks; a statewide ban that eliminated access to inexpensive, cheaply made guns

known as "Saturday Night Specials"; and as a six-fold increase in state funding for youth prevention programs between 1996 and 2011 (Sotomayor 2011).

Since 2002 TCWF has continued to fund violence prevention as one of the eight issues prioritized in the foundation's responsive grantmaking portfolio, investing an additional \$64 million during the last 11 years. Complementing investments in advocacy, data collection, and policy-relevant research related to gun violence prevention, TCWF has also supported a broad range of interventions to reduce violence among youth, including mentoring and after-school programs to provide constructive alternatives to gangs, drugs, and crime; alternative sentencing and restorative justice programs to address the needs of youth involved in the juvenile justice system; mental health and counseling services for trauma-exposed youth living in neighborhoods plagued by violence and poverty; and educational and job training supports for currently and formerly incarcerated youth.

These investments, coupled with collaborative support from other California funders, have contributed to enviable results. California has reduced its youth homicide rate by more than half since 1993. While acknowledging that multiple factors led to this decrease, evaluators credit philanthropic investments as being a critical catalyst to a stronger statewide violence prevention movement and successful policy change.

California's experience offers a promising model for addressing gun violence across the nation and suggests a variety of roles for health philanthropy. In addition to supporting community-based interventions to prevent gun violence, health funders can also influence policy change related to gun violence prevention and stronger gun laws by:

- supporting objective research that both examines the causes of gun violence and evaluates the effectiveness of policies that set reasonable limits on access to guns and ammunition;
- conducting public opinion polling to track public support for stronger gun control laws at local, state, and national levels;
- convening advocates, community leaders, law enforcement officers, school personnel, and elected officials to discuss gun violence; its impact on population health, education, civic engagement, and economic investments; and the potential for gun control policies to reduce gun deaths and injuries; and
- funding advocacy efforts that engage the public, give voice to under-represented populations, and encourage a balanced and participatory debate about gun control policies.

These strategies offer permissible and powerful avenues of policy engagement to health foundations that view gun violence as a significant threat to public health.

¹ Laws included requiring all gun sales to be processed through a licensed dealer, with a background check; prohibiting the sale or transfer of large capacity ammunition magazines; requiring handgun purchasers to obtain a license, after passing a written test; regulating gun shows; and limiting handgun purchases to one per person per month.

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