

# Stemming the rising tide of firearm violence using a comprehensive public health approach

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Leading medical and public health professional organizations across the United States are coming together to form the Healthcare Coalition for Firearm Injury Prevention to push for a comprehensive public health approach to advance firearm injury prevention efforts through

education, advocacy, and community-centered approaches to address this growing problem.

Representatives from 46 organizations convened for the second Medical Summit on Firearm Injury Prevention in September 2022, one of the largest gatherings of medical and [injury](#) prevention professionals on this issue. This Summit featured a review of community violence initiatives, strategies to support healthcare-centered communication, and a review of the evidence informing public policy for firearm injury prevention. The objectives of the Summit focused on identifying consensus-based, non-partisan strategies that can be effective in reducing the burden of firearm injury in communities across the United States. The proceedings from the Summit are published today in the *Journal of the American College of Surgeons (JACS)*.

Healthcare professionals see the impact of firearm violence in their communities every day. This perspective, and the direct contact they have to those at risk of firearm violence, allow [medical professionals](#) to propose real, workable solutions to reduce firearm-related injury, death, and disability.

## **The scope of the problem**

The [inaugural Medical Summit on Firearm Injury Prevention](#) took place in 2019. Since then, levels of violence have continued to increase in the U.S.—firearm-related deaths increased 28.4% during the first year of the COVID-19 pandemic and non-fatal firearm injuries increased 34.2% during the same period. Further, firearm-related injury has now eclipsed motor vehicle fatalities as the leading cause of death in the U.S. for children and adolescents, age 1-19 years.

To renew efforts to address this ongoing public health crisis, leaders of the American College of Surgeons (ACS), American College of

Physicians (ACP), American College of Emergency Physicians (ACEP), American Academy of Pediatrics (AAP), and the Council of Medical Specialty Societies (CMSS) cohosted the second Medical Summit on Firearm Injury Prevention. Forty-six organizations attended the Summit, during which sessions were held on public policy initiatives, addressing community violence, and effective healthcare-centered communication on firearm injury prevention.

## **Community-level firearm injury prevention efforts**

"All clinicians who care for patients have the opportunity to identify those at risk of firearm injury and provide counseling to mitigate these risks," the authors wrote in the article. They provided specific examples of what these clinical opportunities include:

- Education on secure firearm storage
- Lethal means safety counseling, where healthcare providers work with patients who are at-risk of injury or death and their families to reduce access to firearms
- Family support in the implementation of extreme risk protection programs (to temporarily remove firearms from the homes of those at risk for suicide or domestic violence)
- Hospital and community-centered violence intervention programs
- Mentoring programs for at risk youth
- Integration of social care into the delivery of health care

These community engagement programs are rooted in the understanding of social determinants of health and the principles of Trauma Informed Care, which is an approach that addresses implicit bias and creates an environment for patients that promotes equity, sensitivity of broader needs, and empowerment.

## **Engaging firearm owners as part of the solution**

Summit attendees noted the importance of broad community engagement to address firearm violence, which requires engagement from everyone dedicated to reducing firearm injury.

"All too often the community of firearm owners in the U.S. are approached as part of the firearm injury problem, and less commonly as part of the solution," the authors wrote.

An example of this engagement is a strategy pursued by the ACS Committee on Trauma (COT) that acknowledges both the constitutional right to keep and bear arms and the critical and significant problem of intentional firearm violence in the U.S. The ACS has established a Firearm Strategy Team (FAST) of firearm-owning surgeons to inform and advise on firearm safety initiatives.

The authors also noted that there have been successful partnerships between health professionals and firearm retailers, instructors, and advocates. Firearm owners and experts are seen as "trusted messengers" and have effectively delivered firearm safety messages in their communities.

Summit attendees called for further engagement with firearm owners through the new Healthcare Coalition for Firearm Injury Prevention.

## **A consensus-based, comprehensive public health approach**

Just as motor vehicle deaths have sharply declined over the years due to public health-based injury prevention strategies, a comprehensive public health and medical approach is necessary to reduce firearm injury,

death, and disability.

To achieve the goals outlined at the Summit, the sponsoring organizations agreed to establish the Healthcare Coalition for Firearm Injury Prevention. This Coalition will include the following workgroups: Health Professional Education, Advocacy and Policy Initiatives, Healthcare Professional Engagement for Firearm Safety, Communications, and Community-Centered Approach for Violence Prevention.

"Establishing this coalition provides a venue to continue ongoing multidisciplinary collaboration and leverage the resources of the entire public health and healthcare community," the authors concluded. "The opportunity is before us, and the time is now to address this critically important American public health problem."

**The following comments were issued by article authors and leaders from the five organizations that co-hosted the Summit:**

"Preventing firearm violence requires a multifaceted approach, one that includes not only common-sense firearm legislation, but also addressing the underlying social and economic factors that contribute to it," said Joseph V. Sakran, MD, MPH, MPA, FACS, survivor and trauma surgeon at Johns Hopkins Medicine. "We have come together as a medical community to create a society where every person feels safe and valued, and where the senseless loss of life due to firearm violence becomes a thing of the past."

"Effective healthcare is not just about treating the wounds of firearm violence, but also preventing them in the first place. By addressing the root causes of violence and providing education and support, [healthcare](#)

[professionals](#) can play a crucial role in preventing firearm violence and promoting a safer, healthier society," said Eileen M. Bulger, MD, FACS, Medical Director, ACS Trauma Programs. "This renewed effort to create a Healthcare Coalition for Firearm Injury Prevention leverages the talents of major medical organizations across America as we guide the nation in tackling this public health crisis."

"The crisis of firearm violence continues to afflict communities across this country, day after day. The American College of Surgeons and our coalition partners have come together because the medical community is well positioned to help address this vexing issue," said Patricia L. Turner, MD, MBA, FACS, ACS Executive Director & CEO. "By taking an approach that we know works for other public health issues, and by engaging all stakeholders, including those who own firearms, we can create actionable solutions to reduce death and save lives."

"Firearms-related deaths and injuries are a public health crisis that need immediate action. We need to employ commonsense strategies that will help to keep our patients and our communities safe. For nearly 30 years, the American College of Physicians has called attention to this issue and believes that as trusted resources for our patients, physicians should be part of informing our patients about what they can do to keep themselves and their families safer," said Sue S. Bornstein, MD, MACP, chair, ACP Board of Regents.

"Firearm violence indelibly affects emergency department patients and their families as well as those of us who care for them," said Christopher S. Kang, MD, FACEP, president of ACEP. "Efforts to curb firearm violence and promote safety and injury prevention are a public health imperative. Emergency physicians are a vital partner in these collaborative efforts by the healthcare community to improve treatments, save lives, and prevent more tragedies from occurring."

"As firearms are now the leading cause of death for U.S. children and youth, the American Academy of Pediatrics was proud to be one of the organizing members of the Medical Summit on Firearm Injury Prevention," said Lois K. Lee, MD, MPH, FAAP, chair of the AAP Council on Injury, Violence and Poison Prevention. "We understand the lifelong consequences firearm injuries and deaths have to children, their families, and communities, and we must do better for our children. By using a multi-pronged approach, we can start to address this serious [public health](#) crisis."

"The complex topic of firearm injury prevention requires a coordinated and concerted effort on the part of the entire medical community. As an organization of 50 specialty societies, we recognize the enormous potential of working together in this new coalition to prevent firearm injuries," said Helen Burstin, MD, MPH, chief executive officer of the Council of Medical Specialty Societies. "By jointly addressing key levers that prevent [firearm](#) injury, including health professions education, community engagement, and advocacy, we can ensure that our collective efforts will be greater than the sum of individual organizational efforts."

**More information:** Proceedings from the Second Medical Summit on Firearm Injury Prevention, 2022: Creating a Sustainable Healthcare Coalition to Advance a Multidisciplinary Public Health Approach, *Journal of the American College of Surgeons* (2023). [DOI: 10.1097/XCS.0000000000000662](#)

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