CPA POLICY

COMMUNITY RELATED FIREARM VIOLENCE*

CPA will seek to develop or support policies related to firearms which (1) provide access to care for those who are impacted by firearm related violence; (2) prevent psychiatric morbidity related to firearms including domestic violence, known-party homicide and suicide; (3) raise public awareness about psychiatric morbidity related to firearm violence; (4) support systematic inquiry of patients by psychiatrists regarding patients’ access to firearms and oppose gag laws that would preclude a physician from discussing firearms related issues with their patients; (5) substantially decrease access to firearms by those individuals who are cognitively and psychologically predisposed to impulsive violent behavior by supporting universal background check requirements for all gun purchases or transfers of ownership. In those cases where an individual’s right to purchase or possess a firearm is suspended, assure that there is a fair and reasonable process which balances a person’s right to restoration with public safety; (6) advocate funding for psychologically focused training of law enforcement in de-escalation of violent confrontations; (7) advocate for increased research about gun related violence and oppose laws which prohibit this; and (8) add restrictions on rapid-fire weapons, better reporting of lost or stolen weapons, and require background checks for the purchase of ammunition.

The ubiquitous presence of guns in American society is an unfortunate reality. According to data published in the Annals of Internal Medicine (April 2015) Americans own three hundred million guns and 32,000 people die annually due to gun homicide, suicide or accident: the equivalent of 88 persons per day at societal costs approaching 174 billion dollars yearly. More than fifty million Americans own two hundred million guns. Research published in the American Journal of Epidemiology reflects that the presence of guns in the home increases the risk of death by homicide by 90%. Research published in the New England Journal of Medicine indicates that when guns are stored in the home the risk of death increases 40 to 170%. Other research indicates that when guns are stored in the home, the risk of homicide increases threefold while the risk of suicide increases fivefold.

The majority of guns available in homes are often loaded, unlocked and potentially available to family members, including children, who do not have sufficient training nor the necessary judgment to correctly operate these firearms. Approximately five percent of high school youth, which is approximately one million high school students, carry a gun to school out of fear or due to peer pressure.

The U.S. has the highest rates of firearm related deaths in industrialized countries, including homicide, suicide and unintentional deaths. The Council on Foreign Relations data reflects a gun ownership rate of 88.8 per 100 persons (although only in about 42% of households) and a homicide rate of 345 per 100,000 individuals in the United States, by far the highest in the developed countries of the world. Mass shootings have gradually increased in the U.S. during the past decade.

Public media often erroneously suggests that firearm violence is directly related to mental illness despite the fact that only three to five percent of violent crimes are committed by people with mental illness. About one quarter of Americans have a mental illness at any given time, and the vast majority pose no risk to anyone, are more frequently the victim of violence than they are perpetrators of violence.

In 2016, 1,094 people died by gun suicide in California (Centers for Disease Control and Prevention). The Sacramento Bee reported in 2012 that about 1,540 Californians killed themselves with a gun while about 1,430 were murdered with a gun, illustrating that suicides have surpassed homicides as the leading cause of firearm death.

The most effective measure to prevent firearm related deaths is to reduce the presence of guns in homes and communities, and when they are present, to assure that they are securely stored and without access to anyone under 18 unless supervised by an adult, or to anyone who is severely depressed, suicidal or homicidal.

*Adopted by the CPA Council April 4, 2016