2024

The Epidemic of Gun Violence and the Role of Health care Professionals

Daniel Meyer
Department of Internal Medicine, Maine Medical Center

Et al.

Follow this and additional works at: https://knowledgeconnection.mainehealth.org/jmmc

Part of the Medicine and Health Sciences Commons, and the Social and Behavioral Sciences Commons

Recommended Citation
Available at: https://knowledgeconnection.mainehealth.org/jmmc/vol6/iss1/4 https://doi.org/10.46804/2641-2225.1181

The views and thoughts expressed in this manuscript belong solely to the author[s] and do not reflect the opinions of the Journal of Maine Medical Center or MaineHealth.

This Invited Editorials is brought to you for free and open access by Maine Medical Center Department of Medical Education. It has been accepted for inclusion in the Journal of Maine Medical Center by an authorized editor of the MaineHealth Knowledge Connection. For more information, please contact Dina McKelvy mckeld1@mmc.org.
The Epidemic of Gun Violence and the Role of Health care Professionals

Authors
Daniel Meyer and Kurt Granhke
The recent Lewiston shootings have shaken our community and forced us to ask what can be done to prevent such events in the future. Health care professionals can play an important role in responding to these crises, but many may feel uncertain as to exactly how to best serve the public good.

HEALTH CARE PROFESSIONALS HAVE A RESPONSIBILITY TO ADDRESS THE EPIDEMIC OF GUN VIOLENCE

Historically, most medical schools and residency training programs have not provided consistent training on the impact of firearms on public health. Surveys indicate that most physicians feel underprepared to discuss firearm safety with their patients and do not make these discussions a regular part of their practice. Health care professionals have a responsibility to educate themselves about the health impact of firearms, to use that knowledge to the benefit of their patients by offering an unbiased source of information, and to help their patients make informed decisions about gun ownership. This responsibility requires understanding the evidence-based literature about the health impact of gun ownership.

DO GUNS MAKE US SAFE?

Surveys of firearm owners show that most patients purchase a firearm with the intent of making themselves safer. However, rather than providing safety, having a firearm in the home has been consistently shown to increase the risk to the occupants of the home—doubling the odds of death by homicide, tripling the odds of suicide, and, similarly, increasing the risk of firearm-related injury among all residents of the home. Additionally, studies suggest that in patients with mental health crises, suicide risk increases more than 50-fold in the days after purchase of a firearm, and that the risks of domestic violence are escalated by the presence of a gun as well. The clear and consistent message is that gun ownership does not offer safety and, rather, is a modifiable health risk factor that can be impacted to improve the health of our patients.

HOW TO COUNSEL PATIENTS FOR FIREARM SAFETY

However, not all patients who own firearms are at the same level of risk, and most authors recommend focusing on high-risk groups. People with suicidal or homicidal ideation, substance misuse, small children in the home, a history of violence, or dementia or other cognitive impairment are commonly identified groups that are likely to benefit most from risk reduction. When counseling patients, health care professionals should generally focus on harm-reduction strategies that emphasize safe gun ownership and reserve recommending removal of weapons for the highest risk situations. Studies show that safe-storage practices, including keeping a weapon locked or in a gun safe, and keeping ammunition stored separately and also locked, are associated with a significant reduction in the risk of firearm ownership. Additionally, brief counseling by a health care professional has been shown to be effective in inducing patients to adopt safer storage practices.
by making them routine, while emphasizing safety over value judgments about gun ownership, are likely to improve patients’ receptiveness as well.

SHOULD HEALTH CARE PROFESSIONALS ADVOCATE FOR STRICTER GUN LEGISLATION?

Health care professionals should be informed by the evidence-based literature about gun-safety legislation. Studies show that states that enact tighter controls on access to firearms experience lower rates of firearm-related suicide and homicide. These benefits have even been shown to extend across state lines, suggesting that Maine has likely benefited from stricter gun laws in other New England states. Health care professionals should support gun-safety legislation that seeks to keep firearms from people with high-risk behaviors, such as with so-called “red flag” laws that might have prevented the Lewiston shootings. Waiting periods and limiting assault weapons are also initiatives that health care professionals should stand behind because these initiatives are aligned with responsible gun ownership.

HONORING THOSE WHO HAVE DIED

Ultimately though, there is no way to undo the events of Lewiston. Honoring those who have passed and healing our communities can occur though, if we work to live our commitments to our patients. That means talking openly and responsibly with our patients about the risks of owning weapons, supporting them to adopt safer practices, and advocating for legislation that promotes safe gun ownership.

The opinions expressed in this editorial are solely the authors’ and do not reflect the opinions and beliefs of the Journal of Maine Medical Center or MaineHealth.

REFERENCES