

This document outlines a framework for California's Mental Health Commission to explore the impacts of firearm violence on individual, family, and community mental health and wellbeing and strategies to respond. A subcommittee of Commissioners, including Commissioner Keyondria Bunch (chair) and Commissioner and Santa Barbara County Sheriff Bill Brown (vice chair), leads the project.

## Exposure to Firearm Violence

Millions of Californians are exposed to firearm violence – whether directly or indirectly – each year, some daily.<sup>1</sup> Direct exposure to firearm violence refers to being injured or killed by a firearm. Firearm injuries can be fatal or non-fatal and can be self-inflicted (suicide attempt or suicide), inflicted against others (assault or homicide), or both. While direct exposure has the most serious impacts on survivors, indirect exposure – including witnessing a shooting or hearing gunfire nearby – can also cause mental and physical health problems.<sup>2</sup> A recent survey indicated that 7.4 percent of Californians consider firearm violence to be a serious concern in their neighborhood, with nearly two-thirds reporting at least one experience of violence.<sup>3</sup>

The most recently available data on firearm deaths is from 2020, in which 3,430 people were killed by a firearm in California.<sup>4</sup> About 50 percent of these firearm-related deaths resulted from assault, while 45 percent were deaths by suicide.<sup>5</sup> Other forms of firearm-related deaths include legal intervention, or when an individual dies as from a firearm injury inflicted by a law enforcement agent acting in the line of duty (2.9 percent), unintentional firearm deaths (0.8 percent), and deaths of undetermined intent that involve a firearm (0.6 percent).<sup>6</sup> Mass shootings, or an event where four or more people are injured or killed, are highly charged and publicized episodes of firearm violence, but they make up less than 0.5 percent of all firearm-related deaths.<sup>7</sup> However, mass acts of public violence are certainly not rare. As of September 8<sup>th</sup>, 2022, there have been 155 school shootings in the United States, with 9 of these occurring in California.<sup>8</sup> In addition, there are about 7,000 nonfatal firearm injuries in California every year.<sup>9</sup> In 2020, there were 5,719 visits to the emergency department due to a firearm injury and 3,855 hospitalizations.<sup>10</sup>

Rates of death by firearm vary widely by location, both within the U.S. and on a global scale. According to data from the Centers for Disease Control and Prevention, the rate of death by firearm is about 8.5 per 100,000 residents in California, significantly lower than the national average of 13.6 per 100,000 residents.<sup>11</sup> The firearm death rate in the U.S. far outpaces other countries.<sup>12</sup> In particular, the U.S. is an outlier among similar countries on firearm homicide rates, with a rate 22 times greater than countries within the European Union and 23 times greater than Australia.<sup>13</sup>

## Impacts on Mental Health

Trauma can be experienced before, during, and following firearm violence, causing lifelong changes in the nervous system of children and adults.<sup>14</sup> Exposure to firearm violence can cause a toxic stress response, which may lead to the development of maladaptive behaviors, feelings of isolation, and ultimately long-term mental health challenges.<sup>15,16</sup> Those who are exposed to firearm violence – whether they are injured by a firearm or witness the shooting – are more likely to develop post-traumatic stress disorder, a diagnosis with far-reaching impacts on physical and mental health.<sup>17</sup> Children exposed to firearm violence in their neighborhood experience greater incidence of mental health challenges in the weeks and months that follow, leading to more pediatric emergency department visits.<sup>18</sup>

Firearm violence also impacts the survivors and their families, increasing the prevalence of mental health challenges for everyone.<sup>19</sup> Toxic stress in childhood also is linked to poorer health in adulthood, including greater risk for cancer, obesity, chronic obstructive pulmonary disease, substance use disorders, depression, and suicide attempts.<sup>20</sup> The cycle of trauma and violence is self-perpetuating, as those who experience trauma resulting from violence may be at increased risk for engaging in future violence themselves.<sup>21</sup>

## Impacts of Firearm Violence Subcommittee

On August 25, 2022, California’s Mental Health Commission formed the Impacts of Firearm Violence Subcommittee, which includes Commissioner Keyondria Bunch (chair) Commissioner and Santa Barbara County Sheriff Bill Brown (vice chair) to lead the Commission’s work to explore the impacts of firearm violence on individual, family, and community mental health and wellbeing and strategies to respond.

## Project Goals and Process

The goals of this project include:

- a. Explore the impacts of firearm violence on mental health using data and information on state and local programs, systems, and policies.
- b. Collaborate with firearm violence prevention partners to leverage existing efforts and to consider policy recommendations that have been developed by public health entities and others.
- c. Develop an action agenda with research, policy, and practice recommendations that show promise in addressing the impacts of firearm violence on mental health and wellbeing, while reducing mental health stigma and discrimination.

The project will incorporate community engagement, policy and research reviews, and data integration and analysis. The project also will explore current efforts underway in California to address firearm violence and identify opportunities to use existing resources to improve policy and practice, including building or improving collaborations between agencies and organizations currently leading these efforts. Additionally, the project will examine existing data sources, where possible and appropriate. Below is a tentative outline and timeline for project engagement activities.

**An expert panel** will present at a Commission meeting in late 2022 or early 2023. Subject matter experts will be invited to present on issues related to firearm violence and mental health, including the impacts of unaddressed trauma. Project staff will prepare an informational brief as background material to support the panel.

**Subcommittee meetings** will be held with community members and other experts to develop a shared understanding of challenges and opportunities. The first meeting will be held in September 2022 and will highlight firearm violence data. The subcommittee will meet again in October or November 2022, as needed. The subcommittee will meet to review and approve the draft final report prior to submission to the Commission for consideration of adoption.

**Site visits** will be organized to acquire first-hand knowledge and understanding of challenges and opportunities for addressing the impact of firearm violence on mental health and wellbeing.

**Key informant interviews** will be conducted with experts, such as people who have experienced firearm violence, firearm violence prevention advocates, first responders, schools, hospitals, gun violence researchers, firearm violence prevention community providers and administrators, and representatives of firearm rights organizations and firearm clubs and associations. Interviews are ongoing through the beginning of 2023. Data and information collected through project activities will be compiled into a final project report that will be presented before the Commission for consideration of adoption in mid-2023.

## References

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