
Firearms: Ownership, Laws and the Case for Community Mobilization

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ABSTRACT

The United States (U.S.) currently ranks number one in the world in both the quantity of privately owned guns and the rate of private gun ownership. These privately owned firearms, which include rifles, shotguns and handguns, are predominantly owned by middle-aged, 35-54, white men, but the gaps have been steadily closing over the years, especially depending on the type of firearm, in all areas including gender, age, race, education level, political affiliation and geographic location.

Gun violence is a leading cause of injury death in the U.S. In examining gun violence and potentially reducing its incidence, this article reviews gun ownership, access and utilization in the U.S., outcomes of gun violence, and the impact of community involvement in reducing gun violence. Specific areas of focus include the current state of background checks, with a focus on mental illness, and the role of medical professionals in guiding gun policy development. Gun violence continues to negatively impact the safety of individuals, families and communities. This article will emphasize the importance of social mobilization in enacting meaningful changes in gun policy and the development of relationships among healthcare professionals, social workers, and community members so as to further reduce and/or prevent gun violence.

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1. INTRODUCTION

Within the U.S., gun ownership and the associated gun laws, such as what background checks are required prior to gun ownership, who is allowed to own guns, and where guns can be carried have ranked among the main, and most heated, points of conversation across social networks, throughout the media and between lawmakers (e.g. Congress). Though much of the population of the U.S. owns guns and gun violence is almost a daily occurrence in certain areas, tragic events, such as the mass shootings in Fort Hood, Texas, Aurora, Colorado, and Newtown, Connecticut serve as sparks for debate on the issue of gun violence, continuously bringing this issue to the forefront of national attention.

Regardless of efforts taken to curtail and/or end gun violence through an increased police presence, more strict background checks for gun buyers, stringent rules regulating the sale and purchase of firearms, and the continued funding of numerous federal, state, local and nonprofit organizations dedicated to gun safety, murders and mass shootings continue to be an ever present threat. Therefore, to assist with effectuating social change in the area of gun ownership and gun laws, in an attempt to improve the well-being of individuals and the U.S. population as a whole, further research is needed on gun ownership, access to and utilization of guns in the U.S., outcomes of gun violence, and how community involvement could make a difference in the reduction of gun violence. Such research will aid in the development of new

policies, or the improvement of current policies or laws aimed at preventing gun violence and saving lives. While policies and laws are passed at the state and federal levels, community involvement in efforts ranging from enhancing local firearms policies to changing national policies is also advocated as an important component in preventing future gun violence.

2. GUN OWNERSHIP IN THE U.S.

Concerning U.S. gun ownership, the 2007 Small Arms Survey found that there are over 270,000,000 privately owned firearms, including rifles, shotguns and handguns, with a rate of gun ownership of roughly 88.8 firearms per 100 people [1]. With these numbers, in a 2007 comparison of civilian gun ownership among 178 countries, the U.S. ranked as number one in the world in both the number of privately owned guns and the rate of private gun ownership [1].

To gain insight into the demographics of these gun owners, Gallup, an organization which conducts research and analytics on a wide array of topics, especially politics and the economy, conducted a national poll of a random sample of 1,005 adults in 2011. According to the poll results, 47% of American adults own a gun or have one on their property/in their household while 34% claim to personally own a gun.² In regards to gender, 52% of men and 43% of women reported household gun ownership, with a sharp rise in female household gun ownership in the past two years, from 33% to 43% [2]. Concerning personal gun ownership, of these two groups, 46% of adult men, as compared to 23% of adult women, personally own a gun [2]. Furthermore, gun owners, according to the poll, are more likely to be between 35 and 54 years of age, have no college education, live in the South or Midwest, and identify with the Republican Party [2]. However, as with the discrepancy between genders in gun ownership, the number of individuals reporting household gun ownership has risen substantially in the West, 4%, and the East, 13%, in the last year [2]. Similarly, though a higher percentage of Republicans, 55%, up from 52% in the previous year, claim household gun ownership, Democrats saw a spike in household gun ownership, from 32% to 40%, in 2011 [2]. Concerning age and college education, graphs depicting an increase or decrease in household gun ownership were not made available.

Comparatively, the National Institute of Justice (NIJ) previously conducted research in the 1990s to determine the demographics of those who own guns in the U.S. Much of the NIJ's data during this time period was based on information collected, in 1994, through the National Survey of Private Ownership of Firearms (NSPOF), a national telephone survey. Among their findings, they noted that gun ownership was highest among middle-aged, college-educated residents of small, rural towns throughout the U.S [3]. Males were much more likely to own guns than women, 42% versus 9%, while gun ownership was found to be higher among whites than any other racial group, though handgun ownership was similar among blacks and whites, 13.1% and 16.5% respectively, in 1994 [3]. In terms of an individual's motivation to own a gun, further findings from this survey noted recreation as the most common motivation for gun ownership, followed by protection against crime [3]. This research, as compared with current data, as obtained by Gallup, suggests a shift in the characteristics of gun owners from the 1990s, with both rising numbers of female gun owners and household gun ownership in the Eastern U.S.

Finally, researchers from the Harvard School of Public Health made multiple findings concerning gun prevalence in the U.S. through an analysis of the 2004 national firearms survey, a representative household survey of 2,750 adults. Specifically, the survey results indicated that nearly "38% of households and 26% of individuals reported owning at least one firearm" (p. 15) [4]. Additionally, 64% of gun owners reported owning at least one handgun while 48% reported owning four or more firearms [4]. Supporting the findings of the above studies, in terms of prevalence of gun ownership by gender, the researchers found that 45% of men surveyed reported the personal ownership of at least one firearm, as compared to 11% of women [4].

3. OUTCOMES OF GUN AVAILABILITY

Regarding the widespread prevalence of handguns, shotguns and rifles throughout the U.S., there has been speculation, and debate, about the relationship between gun availability and gun violence. On one side of the debate, individuals note that guns are primarily used for recreation with a secondary use as a deterrent of violent crimes, such as rape or murder, or lesser crimes, such as petty theft. On the other side of the debate, it is believed that a greater availability of guns may encourage people to act on thoughts of committing crimes or, in instances where gun violence is not premeditated, to use a gun solely due to its convenience.

As noted, there is much debate over whether an increased availability of guns increases the incidence of violence in a community, town or other defined area. Whereas many guns are used to protect

homes and businesses, guns which are stolen, bought through illegal means, or otherwise obtained in violation of standing laws, may be used to commit crimes. In support of this statement, investigative reporting by the Public Broadcasting Service (PBS) found, through discussions with police officers, that many guns are illegally obtained by straw purchases, having someone else purchase the gun on behalf of another individual, illegal transactions with commercial gun deals or Federal Firearms Licensees (FFLs), or by theft [5]. In fact, stolen guns have been found to only account for 10-15% of those guns used in crimes [5]. However, as it affects this statistic, guns stolen from FFLs are often underreported [5].

In these cases, the availability of a gun may give the criminal greater confidence in carrying out criminal activities/actions, often resulting in injury and/or loss of life. Of course, in this instance, it is necessary to note that stricter gun laws or more education and training concerning gun ownership may not have an effect on those individuals illegally obtaining their weapons. Furthermore, penalizing those individuals who lawfully obtained their guns, along with the applicable permits and/or training, will have no effect on the incidence of gun violence as those individuals were not engaging in illegal behaviors in the first place. Therefore, analysis should be done on each of these situations to provide a balanced view of the entire issue, subsequently aiding in the development of measures designed to aid lawful gun owners while preventing ownership and use of guns for criminal means.

4. SCOPE OF GUN VIOLENCE

In 2011, 31,672 deaths were attributed to firearms in the U.S., consisting of both homicides and suicides, or about 10.3 people per 100,000 [6]. For this same time period, a CDC Web-based Injury Statistics Query and Reporting System (WISQARS) report, "Overall Firearm Gunshot Nonfatal Injuries and Rates per 100,000," noted that approximately 73,883 Americans were treated in hospitals for non-fatal gun wounds [7]. As such, per the CDC's WISQARS report concerning "Leading Causes of Death Reports, 1999-2010, for National, Regional, and States," CDC data as recent as 2010 shows that guns are among the top five leading causes of injury deaths in the U.S [8]. These numbers show a continuation of trends seen in the past, such as in 1989 whereby the NIJ found that approximately 60% of all U.S. murder victims, roughly 12,000 people, were killed with firearms [9]. As it relates to the present issue of gun violence, the NIJ found that handguns were the weapon of choice in these situations, accounting for 80% of all murders committed with firearms, though only making up about one-third of all firearms owned in the U.S [9]. Concerning non-fatal gun wounds, roughly 70,000 people were injured in firearm attacks during this same time period, with many being left permanently disabled [9]. Additionally, in a separate study looking at the annual number of medically attended injuries in nonfatal shootings or firearms attacks, data compiled from 2001 to 2004 found an range of 58,000 to 64,000 injuries treated per year, or 20.4 to 21.9 people per 100,000 [10].

In regards to the negative outcomes associated with gun violence, the NIJ found, based on 1985 data, that the cost of shootings, whether accidental, self-inflicted, or purposefully carried out by another individual, was "estimated to be more than \$14 billion nationwide for medical care, long-term disability and premature death" (p. 1) [9]. In addition to the financial cost of the deaths or injuries resulting from gun violence, the physical and social impact of gun violence also plays a significant role in the lives of individuals, families, and communities. Though deaths from gun violence have immediate effects, disabilities related to gun violence can also significantly affect the well-being of individuals and communities. In fact, aside from death, the consequences of gun-related injuries can range from physical to psychological and can cause negative long-term outcomes.

5. GUN VIOLENCE & PHYSICAL DISABILITY

In an examination of the effect of gun violence on individuals, families, and communities, Carla DiScala and Robert Sege studied health outcomes among children and young adults, ranging in age from newborn to 19 years, who have been hospitalized for firearm-related injuries. Among the cases studied, the researchers found that almost half of the children and young adults who suffered either unintentional or assault-related injuries were discharged from the hospital with disability [11]. In a breakdown of the resulting disabilities, short-term disability injuries were attributable to wounds to the extremities while long-term disability injuries were predominantly attributable to injuries involving the central nervous system [11]. Concerning the demographics of children and young adults injured in unintentional or assault-related gun violence, the majority of the patients, 80%, were male [11]. Females injured as the result of gun violence were more likely to be assaulted than injured unintentionally [11]. In terms of age and race, children suffering assault-related injuries were older and more often black than those unintentionally injured [11]. This study also noted the association between nonfatal gun-related injuries and the high utilization of medical resources to treat such injuries and the lasting disability resulting from these injuries [11]. As such, the

researchers advocated the development and implementation of measures to reduce the incidence of gun violence [11].

Similarly, a study conducted by Gabriel Eber, Joseph Annest, James Mercy, and George Ryan examined nonfatal and fatal firearm-related injuries among children 14 years of age and younger through a review of data, for 1993 through 2000, from the National Electronic Injury Surveillance System (NEISS). Among the findings, children within this age group were almost equally impacted by nonfatal assault-related, 41.5%, and unintentional, 43.1%, injuries [12]. Concerning unintentional injuries, the study findings revealed that roughly 4 out of 5 children who sustained a non-fatal injury either shot themselves or were shot by a friend, relative, or acquaintance [12]. As it supports the development of public policy focusing on reducing firearm-related injuries, the researchers also noted that “the burden of morbidity and mortality associated with FA injuries falls disproportionately on boys, blacks, and children 10 to 14 years old” (p. 1686) [12].

6. GUN VIOLENCE & MENTAL HEALTH

While the previous sections focused on gun availability and ownership, followed by an examination of the physical health outcomes associated with gun violence, another key component of the gun control debate includes mental illness and gun violence. Following an act of gun violence, there is much debate surrounding whether the act was either intentional or unintentional, self-protection or a malicious action. However, in situations where mental health comes into consideration, the mental health of an individual plays an important role in trying to determine whether they are capable of understanding the importance and responsibility of gun ownership and their predisposition towards committing gun violence. With numerous recent acts of gun violence, whether targeted or mass shootings, committed by individuals with mental illness, efforts need to be made to address this issue.

Currently, each state often has their own procedures for the completion of background checks required prior to the purchase of firearms. Recently, an exploratory study conducted by Bisakha Sen and Anatachai Panjamapirom examined the types of background checks required by states before the purchase of a firearm and their relationship to firearm-related homicide and suicide deaths. To complete this study, data on background checks was obtained from the Surveys of State Procedures Related to Firearm Sales while data on homicides and suicides was obtained from WISQARs. Following the completion of the study, the researchers found that more background checks were associated with fewer homicide and suicide deaths [13]. Specifically, they noted that states with background checks for restraining orders and fugitive status have lower firearm homicide deaths while states with background checks for mental illness, fugitive status, and misdemeanors have lower firearm suicide deaths [13]. These results appear to support the current push for more extensive background checks and/or similar high standards for background checks in all states, such as checks for mental illness, fugitive status, and restraining orders, so as to potentially reduce firearm homicide and suicide deaths going forward.

Focusing on background checks for mental illness, there has been ongoing support for the development of more stringent requirements for gun ownership among mentally ill individuals, especially those who may be more prone to violent/harmful actions. A focus has been placed on limiting the availability of guns to mentally ill individuals while ensuring that implemented regulations do not infringe on the Second Amendment rights of other groups. In an article exploring federal and state firearm regulations related to mental health, author Jason Sterzer notes that more attention has recently been drawn to the need for more extensive gun control laws regarding mentally ill individuals, especially with the occurrence of tragic events such as the shootings at Virginia Tech and in Tucson, Arizona [14]. Expanding upon this finding, Sterzer analyzed the backgrounds of the shooters at both sites and concluded that “although there were background checks handled in accordance with the law, the laws did not require the names of all those adjudicated as mentally ill to be reported to a firearms background check system, and the database was incomplete” (p. 179) [14]. This finding serves as an example of the inability of some states to obtain complete and accurate background checks prior to the purchase of firearms.

As such, given the many recent and tragic incidents involving gun violence, many states have taken steps to reduce gun violence caused by those with varying levels of mental illness. In the article, “The State of the Mental Health System,” authors Arthur Caplan and Joseph Pyle examined the New York Secure Ammunition and Firearms Enforcement Act of 2013 (NY SAFE Act). One particular section of the NY SAFE Act requires that mental health professionals “report to local mental health officials when there is reason to believe a patient is likely to engage in conduct that will cause serious harm to himself or herself or to others” [15]. Following this action, if the patient owns a firearm, the patient’s license will be summarily suspended, requiring law enforcement to take away the firearm. Unfortunately, the authors also note that the difficulty in implementing this aspect of the NY SAFE Act due to evidence which suggests that those who suffer from mental illness often do not have access to adequate mental health care. Thus, mentally ill

individuals often do not have access to mental health professionals who would otherwise be able to evaluate the extent of their illness, and their potential for violence, and subsequently report on their mental health and/or send them to outpatient treatment [15].

Though laws such as the NY SAFE Act may prevent future gun violence committed by mentally ill individuals, they must be critically reviewed in terms of their effectiveness in producing positive long-term outcomes. Specifically, for these laws to effectively reduce gun violence, through assisting individuals with mental illness to get the proper mental health treatment and removing their access to firearms, evidence suggests that those suffering from mental illness first need to have access to adequate mental health services. Therefore, to reduce the prevalence of gun related violence among those with mental illness, it is also important to primarily address the availability of and access to competent health care.

7. GUN VIOLENCE & PUBLIC HEALTH

As examined above, gun violence affects the health and quality of life of individuals, families, and communities. Therefore, from a public health perspective, it is important to devise solutions to this issue that not only aid individuals and families, but also their communities.

Recently, a group of physicians, Christine Laine, Darren B. Taichman, Cynthia Mulrow, Michael Berkwits, Deborah Cotton, and Sankey V. Williams, discussed the importance of physicians becoming active, vocal participants in the discussion(s) on U.S. gun policy. They noted that although many physicians primarily focus on maintaining health and treating disease, physicians have played an important role in the development of policies and practices for a variety of health issues, such as tobacco advertising and drunk driving [16]. However, they also noted that similar levels of attention have not been given to the ongoing issue of gun violence [16].

The lack of attention given to this health issue by physicians is important in that, aside from the victims of gun violence who are killed, for those individuals who are injured or those who are close to the victims, gun violence can also permanently diminish quality of life through grief, depression, anxiety, and post-traumatic stress disorders (PTSD) [16]. The authors also note that gun violence further affects the health of individuals, families, and communities through arousing fear and making people feel unsafe in schools, workplaces and other public venues [16]. For these reasons, and many others, these physicians suggested that health professionals play a larger role, going forward, in conducting research on firearm safety, opening the lines of communication between physicians and patients concerning guns, and advocating for policies that help reduce gun violence [16].

8. SOCIAL/COMMUNITY MOBILIZATION

Concerning the development of policies aimed towards reducing gun violence, the fact that every community is different and has their own unique cultures, needs, and ideas serves as a challenging aspect towards the achievement of this goal. An issue presented by communities affected by violence, such as gun violence, is that many individuals remain uninformed of the policies enacted to keep them safe. Furthermore, many communities may not have the necessary resources available for them to engage policy makers and other important policy figures to amend current policies to curtail gun violence. As such, laws alone will not reduce the incidence of gun violence in the U.S. Instead, in order to have a greater societal impact, social/community mobilization should be implemented so as to actively involve communities as a whole in the process of amending policies on guns. Specifically, social mobilization may be utilized to provide communities with the resources, connections, skills, and knowledge to take control of their situation, advocate for change, and sustain change. However, to be effective, this process requires the dedication and involvement of community members, policy analysts, politicians, and public health professionals to create lasting, long-term change within a community.

Shannon Frattaroli, author of “Grassroots Advocacy for Gun Violence Prevention: A Status Report on Mobilizing a Movement,” reviewed the state of gun violence prevention through an analysis of interviews given by key advocates. Her findings indicated that there is a general consensus about the positive effects of community mobilization. Especially in regards to policy change surrounding the manufacture and sale of guns, the author found that “educating voters about candidates’ positions...provide[s] people with information to take into the voting booths. Voters’ ability to remove elected officials from office remains a powerful way to hold politicians accountable to the public” (p. 338) [17]. However, even before communities can be motivated to take action through voting, grassroots movements must first develop a sense of unity within a community and aid the members of the community in identifying a causal relationship for an issue, such as gun violence and negative health outcomes [17]. Once a causal relationship has been established, it is easier to mobilize a community to advocate for change.

To fully understand the potential impact of community/social mobilization, it is important to examine previous efforts utilizing this method. In one example, authors Lawrence Wallack, Liana Winett, and Linda Nettekoven examined the Million Mom March (MMM), a march on Washington, D.C. organized by a mother angered by the 1999 Southern California Community Center daycare shooting. This march, once organized, rapidly gained momentum, attracting several hundred thousand people from cities all over the U.S. With overwhelming public support for the event, the march served as a means for the community affected by the shooting, and those communities represented by the MMM supporters, to send a message to Congress, statehouses, and the country as a whole, that immediate action must be taken to end gun violence [18]. Additionally, following the event, the MMM organizers and their supporters took the opportunity to channel the support for the march and their goals into an organization of grassroots volunteers dedicated to continuing the campaign for effecting change in gun policies and/or laws.

As such, the MMM is just one example of ways that social mobilization can empower communities to take action on issues affecting them, such as gun violence. As seen through the success of the MMM, the authors note that “social movements come about and are sustained by political crises and opportunities, the ability to create and mobilize resources that can take advantage of these opportunities, and the capacity to frame policy issues in ways that can capture public opinion” (p. 337) [18]. Going forward, in order for individuals to more effectively advocate for policy change concerning their health and quality of life, and that of their families and communities, they must work within their communities, utilizing social mobilization. If communities are both passionate about an issue and united in their cause to bring about positive change, they will work more effectively to achieve their goals, such as amending policies, in an effort to develop sustainable methods for reducing gun violence. Researchers should examine the MMM, and similar movements, in order to develop new strategies and/or interventions aimed at utilizing social mobilization to work with communities and achieve their goals.

9. CONCLUSION

In order to address gun violence effectively, it is important to recognize that this multi-faceted issue requires research and action at many levels. Foremost, it is important to approach the topic of gun violence with the awareness that, under the Constitution of the United States, citizens have the right to keep and bear arms, whether for recreation, collecting, or self-preservation. As such, unilaterally banning guns is not an effective method for addressing gun violence. However, researchers and policy analysts can go about reducing gun violence through other means, following research and analysis, such as reducing the ease with which criminals can obtain guns, implementing more punitive policies concerning the illegal sale and distribution of firearms, and developing more stringent background checks, especially in the case of individuals with mental health issues. In regards to these efforts, Susan B. Sorenson and Katherine A. Vittes, in an article on mental health and gun ownership, argue that although the policies regarding gun ownership are based on assumptions that high risk individuals or those with mental illness can be weeded out, the benchmarks utilized do not fully capture characteristics such as impulsivity and other personal tendencies that can be used to diagnose mental illnesses [19]. Sorenson and Vittes also note that although background checks are required when purchasing a firearm, gun purchases are prohibited from being recorded in a national database [19]. While such a database may have positive uses, the potential development of a national database of all gun owners in the U.S. leads to numerous questions including who will have access to such a database, what kind of information is accessible, and to what end(s) will the information in the database be utilized.

Currently, the scope of the issue of gun violence is very complex and policies focused strictly on gun control will not solve the underlying problem of gun violence. Instead, to create effective interventions, policies aimed at reducing gun violence should focus on addressing mental health, the accuracy and consistency of background checks, the ease of access to illegal firearms, and the availability of guns to criminals. Furthermore, as it concerns the development or amendment of policies concerning these issues, the utilization of social/community mobilization to inform communities of means at their disposal for actively reducing gun violence can be very effective in bringing about positive social outcomes.

Finally, gun violence is not a problem unique to the U.S. Advocates for the reduction of gun violence in other countries can, and should, examine current policies surrounding the sale, ownership, and utilization of firearms and both the extent of and outcomes of gun violence in their country. Through examining the issues previously discussed, and analyzing the potential utilization of and positive outcomes associated with social/community mobilization, advocates within these other countries will be better able to advocate for appropriate policy changes. Among other potential outcomes, changes may include greater access to mental health services and stricter background checks. This approach will help ensure that gun

polices reflect specific problems presented by communities throughout the country, rather than blanket polices delivered through a top-down approach.

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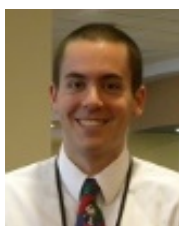
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Muhiuddin Haider is a skilled public health professional who has managed and led diverse public health projects and research studies in more than a dozen countries worldwide over thirty years, on behalf of several international agencies and universities. He has developed expertise in the areas of health communications, health promotion, health education, and social marketing, health policy and assessment. His research into strategies of behavior change, application of social marketing tools and communications capacity building has led to several acclaimed publications. He has led major public health projects in several countries in Africa and Asia, for which he utilized technical skills to stimulate innovative and culturally sensitive approaches grounded in organizational and technical soundness. Dr. Haider teaches several courses on Global Health. His recent research and programmatic work has focused on avian and pandemic influenza.



Jared Frank is a recent graduate of the Master's of Public Health with concentration in Epidemiology program at the University of Maryland, College Park (UMCP), School of Public Health. Over the years, he has served as a research assistant and co-author on many articles/papers with Dr. Muhiuddin Haider. These articles focus on various Global Health projects analyzing topics including Avian Influenza in Pakistan, Neonatal Health in South Asia, and Gestational Diabetes in Iran.