ATTACHMENT

Gun violence is a complex problem that requires evidence-based, multifaceted solutions. In 2013, following the tragedy at Sandy Hook, the American Psychological Association (APA) published a report summarizing the scientific research on gun violence, entitled Gun Violence: Prediction, Prevention and Policy, and in 2014 adopted a Resolution on Firearm Violence Research and Prevention. In both our report and resolution, we strongly support the growing consensus among health professionals and scientists that, to reduce the deaths and injuries associated with firearms, the nation must take a public health approach to violence prevention.

APA recommends that the 115th Congress consider a public health approach to gun violence using the following evidence-based prevention strategies:

1) Pass common sense restrictions on firearm access to reduce the harm caused by violence.

Access to firearms is the common denominator in firearm violence, and policies limiting access to firearms for certain populations to prevent gun violence are strongly supported by scientific research. However, ready access to military-style weapons and loopholes in our current gun laws have limited the effectiveness of those policies, and research has shown that absent rigorous military or law enforcement training, the presence of a gun does not make people safer (and may not under those conditions either). For this reason, we urge Congress to pass legislation that:

- Expands background checks to all gun sales.
- Incentivizes state reporting to the National Instant Criminal Background Check System.
- Bans assault-style weapons and high-capacity ammunition clips.
- Resists calls to arm teachers or school personnel.

2) Invest in greater support for individuals in crisis, who are at risk for violence.

Contrary to the current widespread narrative, the most significant risk factor for violence is a history of violence, not a history of severe mental illness. People with mental illness are much more likely to be victims of violence than perpetrators; thus, the problem of gun violence will not be solved by efforts solely focused on serious mental illness. We do know that suicide accounts for nearly two-thirds of all gun deaths in the United States, and while depression underlies many of those deaths, the role of job loss, romantic entanglements, and other crises cannot be overlooked. Given that people in crisis are at a much higher risk of violence, we must improve the services available to those in need. This includes interventions for both individuals at risk of harming themselves and those at risk of harming others. Prevention efforts aimed at high-risk individuals can also reduce the rare occasions when severe mental illness contributes to homicide, or more commonly, when depression or other mental illness contributes to suicide. APA recommends that Congress:

- Enact legislation to improve the National Suicide Prevention Hotline.
- Invest in Crisis Intervention Training.
- Establish federal support and technical assistance for states to implement Gun Violence Restraining Orders.
- Support school- and community-based behavioral threat assessment teams that include mental health and law enforcement partners.
• Fully fund Garret Lee Smith Suicide Prevention Programs through the Substance Abuse and Mental Health Services Administration. These funds support suicide prevention initiatives for states, tribes, and college campuses.

3) Prioritize the development of effective preventive interventions by increasing funding for gun violence research.

APA has consistently advocated for federal funding for gun violence research and for violent death reporting as crucial components of the public health framework. The evidence generated by a public health approach will enable the development of sound policies that support both the rights and the responsibilities central to gun ownership in the United States. Without ongoing scientific research into the causes and prevention of all types of violence, policy makers will be left to debate controversial policies without information about their potential effects. APA calls on Congress to:

• Affirm the authority of the Centers for Disease Control and Prevention (CDC) to carry out research into the causes and prevention of gun violence.
• Support research on self- and other-directed violence at the CDC, the National Institutes of Health, the Veterans Health Administration, and the Department of Justice.
• Fund ongoing evaluations of state and local efforts in implementing cross-sector, coordinated approaches to violence prevention.

4) Strengthen support for school, family, and community-based prevention efforts, which can reduce the risk of violence by targeting structural inequalities and increasing resilience.

Research shows that childhood experiences, both positive and negative, have an impact on the lifelong health and opportunity of individuals. Adverse childhood experiences (ACEs) have been associated with risky health behaviors, chronic health conditions, low life potential, and early death. Prevention efforts guided by research on developmental risk can reduce the likelihood that firearms will be introduced into community and family conflicts or criminal activity.

There is evidence showing that targeting structural inequalities, such as poverty and access to health and social services, can decrease violence and increase resilience. At the population level, research has found that women's ability to resist violence is strongly connected to their access to economic and social resources, and that diminished opportunities and poor neighborhood cohesion are risk factors for child maltreatment, intimate partner violence, youth violence, and suicide. Conversely, strong connections to school, access to health, mental health, and substance abuse treatment and coordinated social services serve as protective factors. Research also points to interventions that support family connectedness, and increased access to mental health and substance use services as protective factors for violence victimization and perpetration. APA recommends that Congress:

• Foster positive school climates and fund school-based mental health and anti-bullying programs.
• Address adverse childhood experiences (ACEs) through early intervention and prevention.
• Increase access to evidence-based behavioral health care and treatment for substance use disorders and provide broader access to these services under Medicaid.
• Increase access to evidence-based integrated care models in primary care settings.
• Adequately fund federal safety net programs that support low-income people's access to food, healthcare, housing, education, and income supports.