



APHA Gun Violence Prevention Policy Statements

<u>Policy Name (Year)</u> <u>Number</u>	<u>Relevant Excerpts</u>	<u>Online link</u>
<p>Support Renewal with Strengthening of the Federal Assault Weapons Ban (2003) #200320</p>	<p>Noting that in 1994, Congress passed, and President Clinton signed, a ban on the production for civilian use of certain semiautomatic assault weapons¹ and high capacity ammunition magazines that hold more than 10 rounds;</p> <p>Noting that assault weapons are routinely used in acts of mass murder such as the massacre at Columbine High School in 1999 that left 15 dead and 23 wounded;</p> <p>Noting that the National Institute of Justice found that “evidence suggests that the ban may have contributed to a reduction in the gun murder rate and murders of police officers by criminals armed with assault weapons;”</p> <p>Therefore, the American Public Health Association supports the enactment of a federal law to strengthen and renew the 1994 federal assault weapons ban.</p>	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=1258</p>
<p>Handgun Injury Reduction (1998) #9818</p>	<p>The American Public Health Association, Recognizing that handgun deaths and injuries-including suicides, suicide attempts, homicides, assaults, and unintentional shootings-constitute a major public health problem in the United States</p> <p>Understanding that the United States lacks a comprehensive licensing and registration system which would help to curtail the movement of handguns into the illegal market;</p> <p>Recognizing that the collection and analysis of detailed information about handgun injuries and the movement of handguns in the population is essential to the design and evaluation of injury prevention interventions.</p> <ol style="list-style-type: none"> 1. Supports the enactment of federal, state, and local laws designed to limit access to handguns, to limit handgun purchases, including those at gun shows, to limit access to high-powered assault pistols with no legitimate sporting or hunting purpose, and to reduce access to permits-to-carry a concealed handgun; 2. Recommends the creation and evaluation of comprehensive national, state, and local data collection systems to facilitate research on the prevention of handgun-related fatalities and injuries and the movement of handguns within the population; 3. Recommends regulation of the gun industry in order to reduce handgun injury attributable to industry practices, including the design, marketing, and distribution of handguns; 4. Encourages the creation and evaluation of community- and school-based programs (including coalitions) targeting the prevention of 	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=170</p>

handgun injuries including suicides, homicides, and assaults;
5. Recommends education on the dangers of handguns, especially in the home for public health and mental health professionals;
6. Recommends that health and mental health providers advise their clients about the hazards of handguns.

**Support for Curricula in
Firearm Related Violence
Prevention
(2001)
#200118**

Recognizing that there are many risk factors for violence, such as alcohol, drugs, child abuse, inadequate mental health services, and poverty, but that firearms play a central role in interpersonal violence, and increase the cost of injuries from violence, the lethality of violence, and the emotional toll on victims and witnesses;

Noting further that the Department of Health and Human Services acknowledges the need for research to understand the factors that contribute to racial and ethnic disparities in fatal and nonfatal firearm-related injuries and to identify prevention efforts to reduce these disparities;

Supports the development of curricula or teaching modules that address violence as a public health issue and focus attention on government regulation of firearms, the most lethal agents of violence.

<http://www.apha.org/advocacy/policy/policysearch/default.htm?id=257>

**Building Public Health
Infrastructure for Youth
Violence Prevention
(2009)
#200914**

The American Public Health Association (APHA) recognizes the need to build a public health infrastructure for youth violence prevention that include academic institutions, local health departments, and community-based organizations to implement more effective youth violence prevention and improve public health.

This proposed policy builds on and advances APHA's existing policies for the prevention of firearm violence and violence research as well as policies for health education and promotion, prevention of child abuse, and injury and violence prevention and control. Cognizant of the need for public health infrastructure in youth violence prevention, the APHA—

Urges the Congress and states to fund comprehensive, culturally based programs based on scientific evidence and using the following guidance from Youth Violence: A Report of the Surgeon General and other evidence: Accelerate the decline in gun use and stabbings by youths in violent encounters;

Urges federal, state, and local governments to improve data collection, including supporting nationwide expansion of CDC's National Violent Death Reporting System.

Provide training and certification programs for intervention personnel.

Convene youths and families, researchers, and private and public organizations for a periodic youth violence summit.

Urges support of CDC in the development and implementation of a National Public Health Prevention Strategy to Prevent Youth Violence that aims to create a national movement with the collaboration of partners and stakeholders (e.g., parents and educators), working together to reduce youth violence.

Calls for resources to support dissemination and implementation of evidence-based youth violence prevention programs, strategies, and

<http://www.apha.org/advocacy/policy/policysearch/default.htm?id=1392>

	<p>policies and on-going evaluation to ensure that these efforts are being implemented appropriately and that they are having the intended effects on youth risk for violence.</p>	
<p>Promoting Public Health and Education Goals through Coordinated School Health Programs (2004) #200409</p>	<p>School-based mental health services provided in partnership with community organizations can help elementary and secondary students succeed in school.</p> <p>APHA supports the implementation of effective coordinated school health programs in every public and private elementary, middle, and high school across the nation and gives the following recommendations: School Counseling and Psychological Services: Professionals such as certified school counselors, psychologists and social workers provide services to improve students' mental, emotional, and social health and remove barriers to students' academic success, through such means as individual and group assessments, interventions, referrals, tobacco cessation programs and consultation with other school staff members.</p>	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=1292</p>
<p>Encourage Healthy Behavior by Adolescents (2000) #200027</p>	<p>Noting that adolescents at high risk for health and criminal problems also tend to have multiple predisposing factors, including poor academic achievement, lack a caring adult, and have access to illegal substances or guns;</p>	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=234</p>
<p>Building Public Health Infrastructure for Youth Violence Prevention (2009) #200914</p>	<p>Calls for resources to support dissemination and implementation of evidence-based youth violence prevention programs, strategies, and policies and on-going evaluation to ensure that these efforts are being implemented appropriately and that they are having the intended effects on youth risk for violence.</p>	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=1392</p>
<p>Health of School-Age Children 1979 #7905</p>	<p>Considering that the community has the responsibility of providing comprehensive health and related services and that school health programs will assist parents and youth to utilize such community services effectively</p> <p>Takes appropriate actions to secure sufficient numbers of qualified health professionals, who have the professional expertise and educational background to provide assessment, follow-up, counseling, and health education skills;</p>	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=927</p>
<p>Handgun Regulation (1976) #7620 <i>*this policy has been archived</i></p>	<p>Whereas the United States has the greatest number of handguns in the world and the highest handgun homicide rate;</p> <p>Therefore Be It Resolved that the American Public Health Association, recognizing the crisis created by the increase in fatal injuries inflicted by those in possession of handguns, endorses and supports legislation prohibiting the manufacture, sale, transfer, or possession of handguns and handgun ammunition for private use.</p>	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=822</p>
<p>Plastic Handguns (1987) #8718 <i>*this policy has been archived</i></p>	<p>Being aware of the direct relationship between increased handgun availability and the increase in crimes involving guns;</p> <p>Having in 1976 endorsed and supported legislation prohibiting the manufacture, sale, transfer, or possession of handguns for private use, a policy also recommended by the Surgeon General's Workshop on Violence and Public Health;</p>	<p>http://www.apha.org/advocacy/policy/policysearch/default.htm?id=1147</p>