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Addressing Gun Violence on College and University Campuses

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Abstract

The continued increase of gun violence in the U.S. is a public-health crisis, impacting numerous communities, including colleges and universities nationwide. The American College Health Association (ACHA) views this phenomenon as a health crisis with the potential to seriously impact students' mental health, well-being, and sense of safety; however, there remains a lack of consensus on gun violence prevention. As ACHA considers this contentious issue, it also seeks to determine the best measures to ensure that our campuses remain safe learning environments. This paper explores the data—past and present—on gun violence, promising practices, and strategies for higher education institutions to consider and implement now, and potential directions to enhance understanding and advocacy.

Introduction

Gun violence in the U.S. has risen to the level of a public health crisis. Over the last decade, gun violence increased by 43% from the previous decade.¹ This increase includes the use of guns to attempt or complete suicides, injure or kill, and other types of gun-related fatalities. According to the U.S. Centers for Disease Control and Prevention (CDC), in 2020, guns were used to complete suicides at a higher frequency (54%) than guns were used to murder (43%).

Shootings on schools and campuses across the U.S. are also increasing. Most college students surveyed say school shootings impact their sense of safety on campus (65%) and favor stricter campus gun policies (63%).² At the time of this writing, there have been 71 shootings at K–12 schools and on college campuses.³ These shootings have resulted in grief-wrenching, heartfelt outrage, and a palpable societal impact. This paper focuses on gun violence involving college campuses, which are idealized as safe havens for learning where we educate our future leaders. The threat of gun violence is real; it must be brought into the light for examination and measurement so that we can begin addressing the current practices and policies—or the lack thereof—that can help diminish this threat.

According to Smart and Schell, mass public shootings

are rare events, constituting less than 15% of all mass killings in the U.S., and are responsible for less than 1% of all homicides; however, they have an immense impact on our mental health, anxiety, and perceptions of safety.⁴ It is this impact that illustrates the need to see mass shootings and all gun violence as a public health concern; this paper discusses and provides recommendations for addressing this concern, particularly in college and university settings.

While ACHA is primarily concerned with student health and wellness, by using a public health approach to review the current impact of gun violence on our campuses, the organization seeks to highlight the challenges of ensuring that college campuses remain safe and to help further the discussion around general safety for all. Through this approach, ACHA seeks to reduce and prevent gun violence, addressing both firearm access and the factors that contribute to and protect from gun violence.

Public Health Approach

A public health approach is used to address broad societal concerns, but the same approach scales down to the population of particular interest to ACHA. The morbidity and mortality linked to gun violence can be addressed through a public health approach as was used to successfully “decrease premature death rates... including by eradicating diseases like polio, promoting widespread usage of vaccines, reducing smoking-related deaths, addressing environmental toxins, and decreasing motor vehicle crashes.”⁵ Most recently, people have come to know this approach in addressing the COVID-19 pandemic—working towards protecting individual health and the health of the public at large.

By acknowledging that gun violence is an epidemic that affects the health, safety, and well-being of all Americans, we can begin to understand the larger burden that gun violence poses on society in terms of potential lives lost. The public health approach offers a four-step process to determine how to protect the well-being of our communities,⁶ and in the context of this paper, higher education communities. The process, [as defined by CDC](#), serves as a guide to 1) help define the

¹ Pew Research Center: What the data show about gun deaths in the U.S., February 3, 2022; <https://www.pewresearch.org/fact-tank/2022/02/03/what-the-data-says-about-gun-deaths-in-the-u-s/>

² Best Colleges: Shootings at colleges: U.S. statistics, May 11, 2023; <https://www.bestcolleges.com/research/college-shootings-statistics/>

³ Shootings at colleges: US statistics; <https://www.bestcolleges.com/research/college-shootings-statistics/>

⁴ Gun Policy in America: Smart, Rosanna and Schell, Terry L., Mass shootings in the United States, April 15, 2021; <https://www.rand.org/research/gun-policy/analysis/essays/mass-shootings.html>

⁵ The Educational Fund to Stop Gun Violence: Public Health Approach to Gun Violence; <https://efsgv.org/learn/learn-more-about-gun-violence/public-health-approach-to-gun-violence-prevention/>

⁶ Ibid.

issue of gun violence in our communities, but more specifically in colleges and universities; 2) identify the risks and protective steps necessary to prevent deaths and/or injury on our campuses; 3) develop and test effective strategies in reducing and preventing gun

violence; and 4) ensure widespread adoption by campus communities of effective strategies that result in colleges and universities being safe environments for learning and thriving.



Source: [The Educational Fund to Stop Gun Violence](#)

The recommendations in the four-step public health approach serve only as a pathway and continuous improvement loop for making colleges and universities safer spaces and fostering a sense of security through the reduction and prevention of gun violence. This pathway is not meant to dictate how each campus should implement an active shooter and/or gun-safety program, nor should this paper and its recommendations be construed as addressing the Second Amendment or impacting an individual's gun ownership.

Background and Context

Excluding firearms owned by the military or law enforcement, the Small Arms Survey estimates there are 393 million firearms in the U.S.⁷ That works out to be 120 guns per every 100 Americans; however, these

firearms are not uniformly distributed. Roughly one-third (32%)⁸ of Americans are gun owners, and the average gun owner owns five weapons. Twenty-two percent of gun owners own one gun and only one gun.⁹ Pistols are the most owned firearm.

There are roughly 258 million citizens in the U.S. over the age of 18. If one-third of this group are gun owners, then around 86 million citizens own guns. Extrapolating from survey information, they are more often male and more often residents of the South and Midwest than they are of the East and West. They are of all ages, all races, all levels of education, and all incomes (see Appendix A).

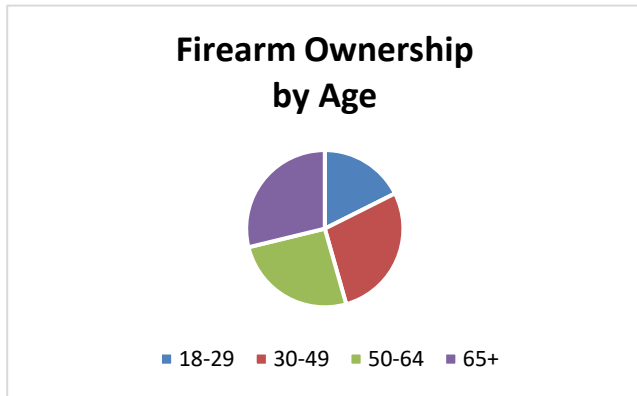
⁷ Small Arms Survey: Estimating Global Civilian-Held Firearms Numbers June 2018;

<https://www.smallarmssurvey.org/sites/default/files/resources/SAS-BP-Civilian-Firearms-Numbers.pdf>

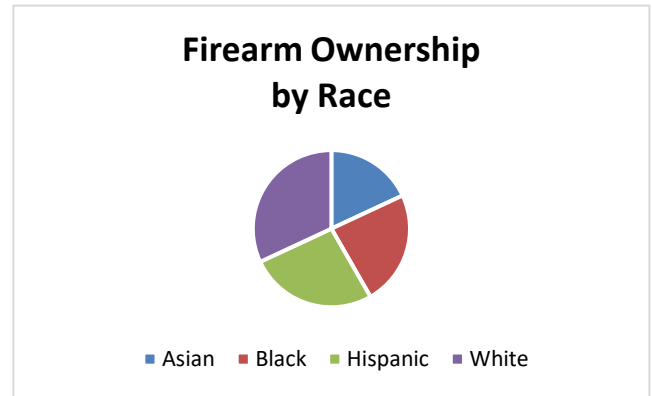
⁸ Georgetown University 2021 National Firearms Survey; https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3887145

⁹ Ibid.

By age:¹⁰



By race:¹¹



The reason most given for owning a gun is self-protection. Other reasons given for owning a gun are clear to the owners, although the perceptions associated with gun ownership and the right to own guns are less concrete, but enlightening, nonetheless: 74% of gun owners say that the right to own guns is associated with their personal sense of freedom; 35% of non-gun owners say the same. Half of all gun owners say that gun ownership is important to their overall identity.¹²

Higher Education's Purview

Research on the impact of gun violence on higher education campus communities exists, but the body of knowledge is small. ACHA states its mission clearly: "To serve as the principal leadership organization for advancing the health of college students and campus communities through advocacy, education, and research."¹³ Gun violence in campus communities is a problem in dire need of that thoughtful approach.

The Problem

Gun violence in the U.S. is a national public health epidemic, and it has an impact on the perception and

understanding of safety and security on American college campuses. While mass shootings produce arresting headlines, they are less common than other firearm-related injuries. Gun violence includes homicide, suicide, violent crime, and accidental shootings. In comparison to other high-income countries, the rate of homicide by firearm in the U.S. is the highest; it is 8 times that of Canada, 11 times that of Italy, 22 times that of Australia, and 100 times that of the UK.¹⁴ In the U.S., more than 120 people die from firearm-related injuries every day.¹⁵ Firearm homicide victims are most often teens and young adults ages 15-34; they are most often male, Black or African American, American Indian or Alaska Native, or Hispanic or Latino populations. From the fall semester of 2001 to the spring semester of 2016 there were 190 incidents of gun violence on college campuses, 437 people shot, 167 people killed, and 270 people wounded.¹⁶ These are people who should be teaching, learning, and working on our campuses rather than having lost their lives to gun violence or suffering from the trauma of gun violence.

Responding to the Problem

Both in the broader societal context and on campus, the alarming statistics call for advocacy and action. The

¹⁰ What Percentage of Americans Own Guns? – Gallup Poll updated 13 NOV 2020; <https://news.gallup.com/poll/264932/percentage-americans-own-guns.aspx>

¹¹ Georgetown University 2021 National Firearms Survey; https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3887145

¹² The demographics of gun ownership – Pew Research Center; <https://www.pewresearch.org/social-trends/2017/06/22/the-demographics-of-gun-ownership/>

¹³ American College Health Association; <https://www.acha.org/About>

¹⁴ Institute for Health Metrics and Evaluation, University of Washington, Global Burden of Disease – Interactive Data Visualization <https://vizhub.healthdata.org/gbd-compare/#>

¹⁵ Violence Prevention/Fast Facts: Firearm Violence Prevention, CDC <https://www.cdc.gov/violenceprevention/firearms/fastfact.html> Last reviewed May 4, 2022

¹⁶ Cannon, A. (2016). Aiming at students: The college gun violence epidemic. Citizens Crime Commission of New York City. <http://www.nycrimecommission.org/pdfs/CCC-Aiming-At-Students-College-Shootings-Oct2016.pdf>

human cost, the economic impact, the complexity, and the ongoing frequency of gun violence suggest that a public health strategy should be central to understanding and controlling this ongoing health hazard. A public health framework fits hand in glove with the mission of ACHA. In a public health framework, the first step is research: unfettered access to ideas on what to study, how to study it, and going where the research leads. After research and understanding comes education that brings the knowledge and implications to a broad constituency. The final step is advocating for evidence-based policy change and legislative initiatives to promote safety and security balanced with sensible accommodation of responsible gun ownership.

National Perception

The national conversation around gun violence is divisive and influenced by numerous factors including, but not limited to, lived experiences, vicarious trauma, fear, politics, mental health, industry (any businesses or organization that benefits from gun manufacturing, sales, advertisements, policies, and more), financial incentives, disparities, and media. In such an environment, it grows hard to know which is authentic from that which is only a perception. Often factors that have great influence have no evidence to support them, while other factors have significant evidence to support the cause or correlation but go without attention, have ineffective plans, inadequate resources, or serve to distract from the real issues threatening communities. The actions and beliefs of individuals are formed congruent with their perceptions, regardless of the validity of those perceptions. Thus, seeking to understand perception will help guide the efforts related to prevention, policy, and practice.

Powerful images, exploitation, sensationalism, and misuse of data in the media can lead to an inaccurate narrative. While it is important to acknowledge and understand the undeniable impact on those who have experienced or witnessed gun violence, it is important to understand how the media exploits information and contributes to a trauma response or vicarious trauma. Both media and political messaging promote ideas that are often self-serving, representing only one viewpoint

and making it difficult to understand the complexity of the issue. Furthermore, the use of media and politics for personal gain often comes at the cost of exploiting or diminishing the lived experiences of those who have been impacted by gun violence.

According to research by Saha and Choudhary,¹⁷ those exposed to campus shootings via media often experience increased fear and anxiety. This leads to efforts towards self-protection, including gun ownership, without a full understanding of the risk factors of gun ownership or responsible safety measures.¹⁸ A 2021 Gallup poll¹⁹ shows 88% of gun owners have guns for self-protection, up from 67% in 2005. In contrast, the most recent report by the Department of Justice indicates a firearm was used only 2% of the time for self-defense—a statistic not readily promoted through media, politics, or industry.

Both the media and politics play a large role in perpetuating the narrative that gun violence is solely a mental health issue. This narrative often promotes the belief that increasing mental health resources is a simple solution to address this complex public health issue. According to research by Pescosolido, Manago, and Monahan, in 2019, more than 50% of Americans believed that people with schizophrenia and alcohol use disorders posed a danger to others, and 30% believed that people with depression posed such a threat.²⁰

Additionally, given the rise in attempted and completed suicide by firearm in recent years and its correlation with depression and other mental health concerns, there is understandably a heightened awareness of suicide with guns in the media and the political arena. As such, many advocacy issues have focused on the rising mental health needs and the lack of resources. While there is evidence to support this need, mental health is often leveraged in conversations about gun violence and suicide. The conflation of mental health and gun violence dismisses the volumes of research showing that access to guns, with or without mental health concerns, increases the risk of suicide, as well as the risk of victimization. The continued conflation lends hope to those who see this as a ready answer and minimizes the multiple issues of gun access.

¹⁷ Saha, K. and Choudhary, K.M., *Modeling Stress with Social Media Around Incidents of Gun Violence on College Campuses*, Vol. 1, No. 2, Article 92. Publication date: November 2017; https://koustuv.com/papers/PACM_HCI_CSCW2018_Stress.pdf

¹⁸ Gun Owners Increasingly Cite Crime as Reason for Ownership; <https://news.gallup.com/poll/357329/gun-owners-increasingly-cite-crime-reason-ownership.aspx>

¹⁹ Ibid.

²⁰ Pescosolido, B. A., Manago, B., and Monahan, J., "Evolving Public Views on the Likelihood of Violence from People with Mental Illness: Stigma and Its Consequences," *Health Affairs*, Vol. 38, No. 10, October 2019, pp. 1735–1743.

According to the 2021 National College Health Assessment (NCHA), 75% of college students reported moderate or severe psychological distress. The NCHA Spring 2022 survey period indicated 22% of cis men and 27% of cis women have had thoughts of suicide.

Alarming, transgender and gender-expansive students report suicidal thoughts at a rate of 63%. Rates of attempted suicide are 3%, 2%, and 7%, respectively.

Suicide Behavior Questionnaire-Revised (SBQR) Score (Range is 3-18)

Percent (%)	Cis Men	Cis Women	Trans/Gender Non-conforming	Total
Negative suicidal screening (3-6)	78.1	73.3	37.1	72.4
Positive suicidal screening (7-18)	21.9	26.7	62.9	27.6
Mean	4.93	5.28	8.26	4.37
Median	3.00	4.00	8.00	4.00
Std dev	2.84	3.08	3.89	3.17

Cis Men n = 19,219; Cis Women n = 44,855; Trans/GNC n = 4,011

Suicide attempt: 2.6% of college students surveyed (2.7% cis men, 2.1% cis women, and 6.7% trans/gender non-conforming) indicated they had attempted suicide within the last 12 months.

Source: ACHA-National College Health Assessment, [Reference Group Executive Summary, Spring 2022](#)

While these numbers demonstrate the need for greater mental health resources, the data regarding student mental health shows the numbers are considerably lower than the general population, seeming to indicate the mental health of college students is better than the general population.²¹

Challenging the perceived intersections of guns and suicide on college campuses, college statistics indicate most suicide attempts and completed suicides are not the results of guns. Students on campuses are less likely than their peers to be victims of or perpetrators of gun violence. Nonetheless, research shows that there were 10 suicides by gun, including murder/suicides, on campus between 2013 and 2016.²² Multiple studies indicate college student rates of suicide are half the national average of their non-college student peers. One study indicates the rates of death by firearm are significantly and substantially lower among male and female students.²³ When interjecting the concerns of guns and suicide, research indicates firearms are used in only about 5% of suicide attempts and that access to guns leads to increased risk for completed suicide.²⁴

Skeem and Mulvey report that “in studies that define mental illness expansively and include untrained ‘diagnoses’ made in the wake of the rampage (two serious methodological problems explained above), estimates of the proportion of mass shooters with confirmed or suspected mental health problems range from 30% to 60%. In studies that focus on formal diagnoses of psychotic disorders (including those made after the incident), estimates range from 13% to 15%.”²⁵ The authors note that there are “serious methodological problems” in using broad definitions of mental illness and informal diagnoses after the act to assess the “causative role of mental illness in these incidents.”

Current evidence suggests that perceptions of safety influence how students feel about campus danger. Research by Wilcox and colleagues demonstrated a correlation between students’ assessment of campus danger and their level of worry and belief in campus danger.²⁶ Those who were concerned about campus safety had higher levels of fear of victimization. It is

²¹ WISQARS: [Explore Fatal Injury Data Visualization Tool](#). Centers for Disease Control and Prevention. Accessed April 2023.

²² Donohue, J.J. (2016). Firearms on College Campuses: Research Evidence and Policy Implications.

²³ Schwartz A.J. Suicidal behaviors among college students. In: Lamis D, Lester D, eds. *Understanding and Preventing College Student Suicide*. Springfield, IL: Charles C. Thomas Publisher; 2011:5-32.

²⁴ Donohue, Firearms on College Campuses

²⁵ Skeem, J. and Mulvey, E., “What Role Does Serious Mental Illness Play in Mass Shootings, and How Should We Address It?” *Criminology and Public Policy*, Vol. 19, No. 1, 2020, pp. 85–108.

²⁶ Wilcox, P., Jordan, C. & Pritchard, A. (2007). A Multidimensional Examination of Campus Safety: Victimization, Perceptions of Danger, Worry About Crime, and Precautionary Behavior Among College Women in the Post-Clery Era. *Crime & Delinquency*, 53. 219-254.

reasonable to infer that these perceptions are shaped by lived experiences, as well as politics, media messages, and disparities, which often result in vicarious trauma and serve to increase the perception of danger.

Research on discrimination and systemic inequities faced by college students indicates that racial minority students experience higher levels of fear than their white peers because they may not be comfortable contacting law enforcement and often do not feel they would be believed or protected. Some students also indicated a fear of being harmed by law enforcement. These experiences and perceptions foreshadow a belief in increased campus danger.²⁷ Additionally, members of the LGBTQ+ community are more likely to have greater fear of victimization.²⁸ These bodies of research reasonably imply that these groups would be more likely to express concerns about campus gun violence.

There is a plethora of literature and commentary that speaks to the intersections of industry (e.g., manufacturing, sales, advertising, policies, etc.) and politics. In his book, *Firepower*, Matthew Lacombe notes the power of the National Rifle Association (NRA) and its influence on the political landscape and the American public.²⁹ Lacombe notes the NRA wields control through vast membership, deep financial pockets, and influence over persons, agencies, the economy, and the Republican party writ large. Lacombe describes how gun ownership has become a social identity often used to politically weaponize gun owners. The utilization of power in molding perceptions is evident. The use of propaganda, fearmongering, expansive membership, and money by the NRA, its affiliates, and its beneficiaries defines policy and serves to bias the perception of others by creating fear and the belief in the need for protection, among other ideas. The NRA's control of industry makes it difficult to gain traction related to gun control policies.

Effectively addressing the public health crisis of gun violence deserves intentional considerations, starting with understanding the competing influences that shape perceptions and the attitudes and behaviors that

result from those perceptions. Firearm violence on college campuses is intrinsically high profile. Notoriety leads to a great deal of speculation about frequency, motives, and predictive characteristics; the resultant perceptions promote both truth and deception. There is a compelling need to look at what is known about firearm violence on college campuses in isolation as well as in the national context.

Firearm Statistics

Data specific to gun violence on college campuses is sparse. In contrast, many of the most notorious mass shootings in the U.S. involve college campuses. The 1966 University of Texas tower shooting was a watershed moment; 15 people were killed and another 31 were injured. Since then, the number of shootings on college campuses has grown, and that growth has accelerated in the last 20 years.

Several have been high profile and thoroughly covered by the media; however, many others are known only to their local communities and campus families. This is one of the challenges in understanding the role of gun violence in campus communities. The issue is broader than just the number of mass shootings as defined by the FBI. Although horrific when they occur, these happen relatively infrequently compared to all other forms of gun violence, including through the day-to-day use of guns by individuals, accidentally or on purpose, that don't meet the criteria for mass shootings. These also include self-inflicted firearm injuries; indeed, most shootings in the U.S. are self-inflicted.

Research into gun violence on campus documents a variety of incidents in which guns were involved. In a survey of news reports collected by Gavran from 2008 to 2023, there are 23 news reports ranging from guns left at a bus stop to mass shootings.³⁰ Welding reports U.S. statistics to show that since 1966 there have been 12 mass shootings on college campuses where more than three individuals were killed.³¹ While these lists are not exhaustive and there are other incidents not captured by the methodology used to assemble them, it is nonetheless powerful in lived experience.

²⁷ Reynolds, B.W., Fisher, B.S., and Sloan III, J.J. *Predictors Of College Students' Concern About Campus Gun Violence: A Comparison Of Men And Women*, Taylor & Francis Online: <https://www.tandfonline.com/doi/full/10.1080/15564886.2022.2124567>

²⁸ Ibid.

²⁹ Lacombe, M.J. "6 The Party-Group Alignment of the NRA and the GOP". *Firepower: How the NRA Turned Gun Owners into a Political Force*, Princeton: Princeton University Press, 2021, pp. 149-185.

³⁰ Gavran, J. Incidents on Campus in States That Allow guns on Campus; <https://www.keepgunsoffcampus.org/wp-content/uploads/2019/05/Incidents-in-States-that-Allow-Campus-Carry-2.21.19-1.pdf>

³¹ Welding, L., Best Colleges: Shootings at College Campuses: U.S. Statistics; Feb 2023; <https://www.bestcolleges.com/research/college-shootings-statistics/>

In 2016, the Citizens Crime Commission of New York City published a report³² titled *Aiming at Students – The College Gun Violence Epidemic*. Their analysis included incidents from the academic year 2001-2002 through the academic year 2015-2016. The report identified 190 incidents in which at least one person was intentionally shot, 437 people were injured, and 167 people were killed. These incidents included mass shootings (seven to forty-nine victims per seven incidents), but most of the victims were injured in incidents with a more restricted focus (one to eight victims per 183 incidents).

When comparing the report’s first five years with the last five years, the number of shooting incidents increased by 153% and the number of casualties went up 241%. Analysis of victims shows 290 were students, 77 were not associated with a college, 40 were employees, and 5 were former students. Analysis of shooters shows that 59% were not associated with a college, 28% were students, 9% were former students, 4% were employees, and 31% had an unknown relationship to the institution.

The report goes on to draw a correlation between the number of incidents and the states with a relatively permissive regulatory stance toward gun ownership and possession. In short, over the 15 years studied by this group, incidents of gun violence on campus

increased, victims of gun violence on campus increased, most victims were students, most shooters were not part of the campus community, and ease of access to the purchase and possession of firearms correlates with the likelihood of these incidences.

Although specific research numbers are not readily available for suicide deaths involving guns and occurring on a college campus, the data on gun-related deaths in the U.S. public at large note the number of deaths that are self-inflicted. According to the Centers for Disease Control and Prevention (CDC) statistics, there are 26,328 firearm suicides in the U.S. each year.³³ Pairing this information with the fact that death by suicide is the second most common cause of death among college students³⁴ and use of a firearm in a suicide attempt is more lethal than other forms, we are compelled to consider the accessibility of guns as a significant risk factor for college students at a moment of increased vulnerability.

Criminal gun violence on campus is tragic, and by circumstance varies from foolish accident to deplorable depravity. The following chart indicates how campus communities are both part of and separate from the larger society.

Average student population 2010-2015 ³⁵	Firearm-related deaths ³⁶	Rate per 100,000	Firearm-related injuries ³⁷	Rate per 100,000
21,582,770	167	0.77	437	2.02
Population USA 2011 census	Firearm-related deaths 2010-2011 ³⁸	Rate per 100,000	Firearm-related injuries 2010-2011 ³⁹	Rate per 100,000
306,110,000	32,529	10.6	67,197	22.0

³² Citizens Crime Commission of New York City; <http://nycrimecommission.org/pdfs/CCC-Aiming-At-Students-College-Shootings-Oct2016.pdf>; Oct 2016

³³ National Vital Statistics System – Mortality Data (2021) via CDC Wonder; <https://wonder.cdc.gov/controller/saved/D158/D321F261>

³⁴ Turner, J. et al. Causes of Mortality Among American College Students: A Pilot Study. *J College Stud Psychother.* 2013 Jan 1; 27(1): 31–42. Published online 2013 Jan 10. <https://doi.org/10.1080%2F87568225.2013.739022>

³⁵ National Center for Education Statistics; https://nces.ed.gov/programs/digest/d17/tables/dt17_303.20.asp

³⁶ Citizens Crime Commission of New York City, <http://nycrimecommission.org/pdfs/CCC-Aiming-At-Students-College-Shootings-Oct2016.pdf>

³⁷ Ibid.

³⁸ Fowler K.A., Dahlberg L.L., Haileyesus T., Annett J.L., Firearm injuries in the United States. *Prev Med.*, 2015;79:5–14. - [PMC](#) - [PubMed](#)

³⁹ Ibid.

In an issue dedicated to examining firearms and violence, contributors to an article published by the Journal of the American Medical Association (JAMA) observed “Even though there is no comprehensive national resource that documents firearm-related injuries in real-time, available data provide some insight into the epidemiology of firearm injury.”⁴⁰ Even clear and consistent definitions are lacking. While the numbers used within this paper are extracted from unrelated studies and different methodologies, and while the span of two years may not adequately reflect variability over time, the comparison is still striking. It suggests there is more than a tenfold difference in the recorded incidence of gun violence resulting in death or injury in college students vs. the general public.

Recommendations Actionable Now

Current Approaches to Firearm Violence Risk Management

A review of the literature and data regarding firearm safety reveals a clear theme. Education, intervention, training, and collaboration are key to campus safety and gun violence prevention initiatives. Gun violence has become normative in the daily news feed. Each occurrence spurs a call for legislation to develop an initiative to reduce this type of violence. Legislative action is complex, contentious, and slow; from a risk management point of view, universities cannot wait for local, state, and federal guidelines to implement these initiatives. Campuses are a collective of community members who reside and engage both on and off the campus. There is an overall thought that reduced firearms access impacts gun violence outcomes on campus; this is not conclusively proven. Not allowing guns in residence halls correlates directly with the reduction of the potential for a firearm incident; however, that does not mean that those campuses who allow guns in residence halls have an increased rate of incidents. Overall, gun incidents directly related to campus violence are much lower than in surrounding communities. Firearm violence on campus more often involves guns being transported onto campus in possession of those with the intention to perpetrate violence.

Gun incidents involving higher education receive national attention through news and social media, and this attention has promoted the perception that individual risk is high on campus. The data do not validate this perception, but proximity to the incident

confers immediacy and lived experience; those who experience direct or vicarious trauma react profoundly. Gun-related incidents on campus can have a direct impact on students, impact the campus community’s concern for individual safety, and impact the perception of safety in the campus environment from those outside the campus community. Therefore, from a risk management perspective, a campus has the obligation to examine every gun-related incident and to identify preventive measures for future incidents.

Listed below are recommendations of various interventions for campuses to consider as they seek to strengthen their safety measures. This is not an inclusive list as this topic is fluid and dependent on each campus environment. The challenge for campuses is to continually survey their unique campus environment and adapt to ensure the continued safety of their campus community.

- **Behavioral intervention teams:** A collection of key stakeholders who come together to identify at-risk students who may need a variety of interventions and/or resources. These groups may consist of key employees from the dean of student’s office, mental and student health office, campus and or community police, safety office, housing, disability resources, academic coaching, and others. Reporting of students can be initiated by a student or staff member and can be anonymous.
- **Campus task force on violence prevention:** A group created to look at violence prevention with a global perspective on campus safety. This group may include campus and off-campus stakeholders. For example, violence prevention task forces have included faculty, staff, students, parents, security, and housing both on and off campus, safety offices, prevention staff, and outside organizations such as hospitals. The goal of this program may include physical safety measures such as cameras, lighting, safety phones, security staffing, and violence prevention programming. A task force allows the campus to expand its community outreach and use resources beyond the traditional on-campus resources. It also allows parents and community members to take an active part in discussions about campus security. Examples of programming include funding for privately owned campus housing to improve lighting and cameras in their neighborhoods and creating funds for private security details on private off-campus

⁴⁰ Kaufman E.J., Delgado M.K. The Epidemiology of Firearm Injuries in the US – The Need for Comprehensive, Real-time, Actionable Data. JAMA. 2022; Vol. 328 N. 12: 1177-1178.

housing. Hospitals have partnered with campus communities to offer violence prevention training for college-age community members and to teach about the emotional aftermath of gun violence.

- **Active shooter programs:** These programs are used to teach campus community members effective defensive actions if engaged in an active shooter scenario. This can be done virtually but is often held in person.
- **Self-protection training:** There are several programs available to assist a person on how to take personal accountability in their environment. This may include self-defense classes, active shooter classes, or violence prevention programming and may focus on a variety of topics including but not limited to the practical application of self-protection while living on a college campus, with such examples as awareness of surroundings, locking doors, traveling in groups, and social environment techniques.
- **Technology:** Various software apps are now being offered to assist with tracking and emergency information, prevention classes on techniques for self-protection using social media, and how to use the emergency line on your phone and campus emergency lines.
- **Clear policy on gun guidelines established for your specific campus:** Identifying policy for key groups as it may pertain to them and the environment where they interact and live. If there is a policy that allows guns on campus within the residence, provide clear guidance on expectations. This may include required classes on gun storage and handling, the use of gun safety locks, background clearance, and clearance specific to the individual's role on campus.
- **Identified campus resources to assist students:** Mental health and student resources, campus safety resources, and support programs are all clearly identified with prominent contact information, and cooperatively linked to support each other.

Universities assume the responsibility for their campus community's safety. Parents and students arrive with the understanding that it is our responsibility to keep the campus safe. Collectively, the campus should review its safety measures often to ensure that the campus community is doing all that it can to assist its members. Institutions also have a great opportunity to train campus community members to understand their accountability for their safety. Together we have the best opportunity to protect each other.

Advocacy and Next Steps

In summary, gun violence is a leading cause of premature deaths in the U.S., and it is preventable. Gun violence has been repeatedly characterized as a public health crisis by the American Medical Association, American Public Health Association, and other leading public health organizations. The public health approach should be adopted by campuses as well. ACHA's advocacy for a public health approach promotes the creation of impactful gun safety policies and programs which can be done by implementing the following steps.

- **Define and monitor the problem:** Gun violence contributes to over 40,000 deaths and 70,000 non-fatal injuries annually. Firearms are the leading means of suicide deaths, and suicide attempts with a firearm are nearly always successful. While often considered for personal protection, possession of a firearm rarely prevents victimization of the firearm owner. Guns are readily accessible for legal purchase with minimal or no restrictions in most parts of the U.S.
- **Identifying the risk factors:** Easy access to purchase or acquire firearms with rapid rates of firepower (also known as semiautomatic or automatic weapons) and high-capacity magazines are frequent factors in firearm violence leading to deaths or injuries. These factors are more apt to disproportionately impact marginalized populations.
- **Developing and testing prevention strategies:** Effective public health approaches to reduce injury or death in the automotive industry lowered incidents by 80%. Those strategies were informed by robust federally funded research on automotive safety, effective regulation of manufacturers, required proper training and licensure of operators, implementing age restrictions, registration of vehicles, and establishing liability responsibilities for both manufacturers, owners, and operators.

Similar strategies can be implemented to mitigate or prevent injury or death resulting from the dangerous use of firearms. Examples of potentially effective strategies include:

- Limit unauthorized use of firearms through policies that require securing firearms in a locked container or installing a firearm locking device to render the firearm inoperable. Create personal liability for a firearms owner who fails to secure their

firearm when not in use and subsequently is used in a crime.

- Require background checks for all transfers or sales of all firearms.
- Federally regulate firearm manufacturers to ensure they are designing, manufacturing, and distributing firearms that are safe to operate.
- Increase the age requirements to purchase or possess semi-automatic firearms to age 21 or greater.
- Restrict magazine capacity to equal less than 10 rounds.
- Require a minimum level of safety training for anyone purchasing or possessing a firearm.

For more examples, see the Educational Fund to Stop Gun Violence's [website](#) for a chart on "Applying the Public Health Successes of Auto Safety to Gun Violence Prevention."

- **Ensuring widespread adoption of effective strategies:** Create legislation that enables federal agencies and state and local governments to develop, implement and enforce specific prevention policies and strategies. Promoting guidelines and recommendations are insufficient alone to significantly reduce preventable death and injuries.

Next Steps

Research: Provide sufficient federal funding to the Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH), institutions of higher education (IHEs), and other not-for-profit agencies to research gun violence and recommend best practices. Notably, the college or university community represents a rich opportunity to further evaluate the effectiveness of the public health approach to improving the safety and well-being of a population in comparison to similar populations non-enrolled in a college or university.

- Oppose any restriction of research: human research committees and ethical guidance should frame research, not a priori restriction of subjects and ideas.

- Evaluate and implement further approaches suggested by research: combining a robust and unrestricted research agenda with a closed-loop quality approach will produce rapid results and continuous refinement of recommendations for policy and legislative initiatives.
- Review of current data on gun-related violence in campus communities: these areas can provide accurate and fertile ground to initiate research.
- College students are less likely to be victims of crime or gun violence than their peers not enrolled in college. Current evidence suggests a campus community is somehow safer than the community outside the campus. Incidents of firearm violence are often perpetrated by someone without a clear relationship to the campus bringing a firearm onto campus in violation of campus policy and/or state law.
- College students are not immune to becoming victims of firearm violence. Most students reside and socialize outside of the campus purview, beyond the campus' ability to regulate the possession or use of firearms.
- Firearms are the most lethal method of suicide for college-aged students; suicide attempts using a firearm are nearly always successful.

Respond: With research and reflection comes understanding. Understanding supports the promotion of beneficial aspects and the restriction of dangerous aspects as identified by research.

- Track the correlation to mental health issues with rigor and define the needs and the misperceptions.
- Develop systemic reporting: standardized definitions and event reporting will provide the data that researchers need for observation and analysis.

Resources

[ACHA Healthy Campus Inventory](#)

[National Public Health Information Coalition \(NPHIC\) - Is Gun Violence a Public Health Crisis?](#)

[Gun Violence \(apha.org\)](#)

[APHA Advocacy Fact Sheet for Gun Violence Prevention](#)

[Gun Violence Archive](#)

[Gun Threats and Self-Defense Gun Use | Harvard Injury Control Research Center](#)

[Gun Control On University & College Campuses - Guns On Campus](#)

[Public Health Approach to Gun Violence Prevention - The Educational Fund to Stop Gun Violence \(efsgv.org\)](#)

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Appendix A: Demographics of Gun Owners

Age ⁴¹	Percentage by age
18-29	22%
30-49	35%
50-64	32%
65+	36%
Race ⁴²	Percentage by race
Asian	19%
Black	25%
Hispanic	28%
White	34%
Gender ⁴³	Percentage by gender
Female	19%
Male	45%
Highest education level ⁴⁴	Percentage by education level
No college	31%
Some college	34%
College graduate	35%
Postgraduate studies	26%
Income level ⁴⁵	Percentage by income level
≥\$100,000/yr	38%
\$40,000 to <\$100,000	34%
<\$40,000	25%
USA region ⁴⁶	Percentage by USA region
East	21%
Midwest	34%
South	40%
West	26%
Community description ⁴⁷	Percentage by community description
City	23%
Suburb	25%
Town/rural	48%
Types of firearms ⁴⁸	Percentage by types of firearms
Pistol	72%
Rifle	62%
Shotgun	54%

⁴¹ What Percentage of Americans Own Guns? – Gallup Poll updated 13 Nov 2020

⁴² Georgetown University 2021 National Firearms Survey

⁴³ Gallup Poll 2020

⁴⁴ Ibid.

⁴⁵ Ibid.

⁴⁶ Ibid.

⁴⁷ Ibid.

⁴⁸ Ibid.

Major reasons for ownership ⁴⁹	Percentage by major reasons
Protection	67%
Hunting	38%
Sport shooting	30%
Gun collection	13%
Job	8%
Age	Percentage by age
18-29	22%
30-49	35%
50-64	32%
65+	36%
Race	Percentage by race
Asian	19%
Black	25%
Hispanic	28%
White	34%
Gender	Percentage by gender
Female	19%
Male	45%

⁴⁹ The demographics of gun ownership – Pew Research Center

Appendix B: Gun Violence on Colleges/Universities from 2007-2023⁵⁰

College/university and date	Type of incident	Outcome
Colorado State University July 2008	Suicide	1 dead (student)
University of Northern Colorado August 2016	Suicide	1 dead (student)
University of Idaho July 2017	Suicide	1 dead (relationship to campus not defined)
Kennesaw State University August 2018	A student carrying a gun with articulated homicidal ideation	No injuries (student was arrested and taken for mental health evaluation)
Delta State University September 2015	Homicide suicide	3 dead (a domestic dispute, including 2 faculty members)
University of Utah December 2016	Homicide suicide	2 dead (domestic dispute in the campus parking lot)
University of Kansas Hospital December 2018	Homicide suicide	2 dead, 1 injured (non-campus members in a conflict drove to the hospital on campus)
Virginia Tech University April 2007	Mass shooting	32 dead, 23 injured, shooter was a student and died of a self-inflicted gunshot wound
Northern Illinois University February 2008	Mass shooting	5 dead, 17 injured, died by self-inflicted gunshot wound (was a graduate student at the University of Illinois/Urbana-Champaign)
Oikos University April 2012	Mass shooting	7 dead, 3 injured, shooter was a former student of Oikos University
Santa Monica College June 2013	Mass shooting	5 dead, 3 injured, shooter dies after being shot by law enforcement (no connection with college)
Umpqua Community College October 2015	Mass shooting	10 dead, 8 injured, the shooter (a student) committed suicide
Texas Tech University October 2017	Homicide	1 died (a student shot a police officer at the police station)
University of Virginia November 2022	Mass shooting	3 dead, 2 injured, shooter was a former student and was arrested by law enforcement
Michigan State University February 2023	Mass shooting	3 dead, 5 injured, shooter died of a self-inflicted gunshot wound (no campus connection)
University of Georgia December 2017	The student left the gun unattended	No injuries (left a holstered gun in a restroom)
Wichita State University July 2017	Unattended firearm	No injuries (staff member found a handgun in the restroom)
Wichita State University August 2017	Unattended ammunition	No injuries (discovered during the move-in day)
University of Kansas September 2017	Unattended firearm	No injuries (gun reported stolen; found in the restroom)
University of Georgia March 2018	Student left the gun unattended	No injuries (left a loaded gun at a bus stop)

⁵⁰ Category: University and college shootings in the United States;
https://en.wikipedia.org/wiki/Category:University_and_college_shootings_in_the_United_States

University of Kansas August 2018	Unattended ammunition	No injuries (loaded magazine found in the parking lot)
University of Texas at Austin February 2018	Unattended firearm	No injuries (handgun found in the academic building)
Colorado University – Denver November 2012	Accidental discharge	2 injured (1 staff, 1 other)
Weber State University January 2012	Accidental discharge	1 injured (carried gun in pocket, shot self in the leg)
Idaho State University September 2014	Accidental discharge	1 faculty injured (the professor had a CCL and had a loaded gun in his pocket)
Utah Valley University May 2015	Accidental discharge	1 injured (occurred on the way to a gun safety class)
University of Southern Mississippi October 2015	Accidental discharge	1 injured (a student with CCL shot himself in the leg)
Tarleton State University September 2016	Accidental discharge	No injuries
Texas A&M University September 2017	Accidental discharge	No injuries
Texarkana Community College November 2017	Accidental discharge	1 injured (in school parking lot)
Utah Valley University April 2017	Accidental discharge	No injuries (Valid CCL, handgun in backpack)
University of North Florida September 2017	Firearm discharge in the dorm	No injuries (student arrested under suspicion of aggravated assault)
Fort Collins Community College December 2017	Displaying a gun to a faculty member	No injuries (student arrested under suspicion of felony menacing)
Tennessee State University September 2017	A former student was shot and injured	1 injured
Kennesaw State University July 2017	Armed robbery by two men with guns	No injuries (the victim was a student whose gun and wallet were stolen)
Georgia Tech University September 2017	Student shot by campus police	1 dead (student was carrying a knife; 911 call reported he was carrying a knife and a gun)
Gordon State University November 2018	Possession of a gun and marijuana on campus	No injuries

