

**Gun Violence in Low-Income Communities:
A Public Health Approach**

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Abstract

Background: Gun violence in low-income communities has been overlooked for many years, and its importance has become more urgent, requiring more research.

Objective: The study aims to research solutions that can be adopted to help reduce gun violence in low-income communities while understanding what barriers exist that do not allow them to work.

Design and Method: The study was qualitative and covered works from 2013 to 2022 with peer-reviewed publications, systematic reviews, dissents, opinions, editorials, and websites comprising the peer-reviewed literature in which the research methodology is founded. Solutions to gun violence were evaluated from previous researchers' studies and a results section, where they are detailed. The research was led through these research questions: *What solutions can be placed to lessen weapon-involved violence in low-income communities in the United States? What barriers still exist that prohibit solutions from being effective in low-income communities?*

Results: The significance of this study is that a public health approach could be adopted to reduce gun violence in low-income communities while understanding that access to guns is a barrier instead of what the media portrays; mental illness.

Conclusions: A public health approach gives members of low-income communities the power to make changes without requiring legislators' involvement. This is achievable through the remediation of vacant lots and abandoned buildings, non-profit youth advocacy programs, and more physician intervention in conversations about guns and mental illness.

Keywords: *Gun Violence, Low-Income Communities, Public Health Approach, Gun Access, Mental Illness*

Chapter 1: Introduction

Background and Overview

High rates of gun violence in low-income communities have come with a significant cost: the lives of many individuals. Much research has recently been conducted to adopt a public health approach in low-income communities to reduce gun violence (Goldstein, 2020; Branas et al., 2016; Calhoun, 2014). A public health approach pushes for change because policymakers will not enforce stricter gun control laws due to commercial interests that use the “gun right” narrative to allow lenient gun laws (Kapadia, 2022, P. 1790). As a repercussion, many high-risk individuals are equipped with guns and transported to states with strict gun laws from the illegal underground gun market, leaving low-income communities vulnerable to gun violence (Braga et al., 2020).

There are several common kinds of interpretations as to what risk factors are causing high gun violence rates in low-income communities. Sanchez et al. (2020) classify access to firearms and mental illness as risk factors, while Y. Lu and J.R. Temple (2019) determined that SMI symptoms are not as close to having access to weapons associated with gun violence. To date, there has been little agreement on whether individuals with SMI are to blame or have access to firearms for such high gun violence rates. In the United States, approximately 7% of the crimes are committed by individuals with SMI, and 2-3% are with guns (Simonsson & Solomon, 2021). Recent theoretical advances have demonstrated that news media is at fault for stigmatizing individuals with SMI responsible for high gun violence rates (McGinty et al., 2014).

Moreover, only some studies have focused on putting together multiple strategies that can be classified under a public health approach like this study. While efforts have been made to reduce the gun violence rate, politicians are reluctant to acknowledge the scope of the issue. This

study takes an extreme stance, which is appropriate for the problem. There is a problem in low-income communities when it comes to gun violence. Despite all the lives lost at the end of a gun, more research on public health approaches is occurring. This problem has negatively impacted marginalized groups because they are the dominant population of low-income communities. A possible cause of this problem is easy access to guns and little to no action from the legislative body, which has the power to enforce gun reform. Perhaps a study that investigates strategies that members of low-income communities can adapt by giving them the ability to change could remedy the situation. To overcome this problem, in the next section, we demonstrate previous studies that support finding a solution to gun violence in low-income communities.

Research Questions

This study will further look into the following questions:

RQ 1: *What solutions can be in place in low-income communities to lessen weapon-involved violence in the United States of America?*

RQ 2: *What barriers still exist that prohibit solutions from being effective in low-income communities?*

Definitions of Key Terms

Public Health Approach: *This field focuses on safeguarding and enhancing community and individual health.*

Marginalized Groups: *socially, politically, and economically disadvantaged communities and groups with unequal power.*

SMI: *Serious Mental Illness.*

Gun Violence: *Refers to acts of violence done with a firearm, such as a handgun, shotgun, assault rifle, or machine gun.*

Low-Income Communities: *A Census tract that fits the IRS's definition of a low-income community must, among other things, have a poverty rate of at least 20%.*

Chapter 2: Literature Review

Researchers repeatedly find that gun violence is connected with rates of economic distress, even though it is a complex case driven by various factors (Austin, 2022). Considering these conclusions, it is appropriate to research public health approaches that can be in place to lessen the weapon-involved violence in low-income communities in the USA and what barriers exist to decreasing weapon violence in our communities. For example, the Second Amendment once allowed all United States citizens the right to own a gun without that right being infringed. Although, according to Cornell Law (2022), there is no individual right to own a firearm, according to the Second Amendment collective rights argument, local, state, and federal legislative bodies have the authority to regulate firearms without violating a person's civil rights (Cornell Law, 2022, para 1).

Most reviewed literature had principal findings identifying a public health approach as needed to reduce gun violence in low-income communities. Public health is known as the sciences that preserve small communities to entire regions by adopting healthier lifestyles and researching the threats a population faces. Recent developments in the field of gun violence have led to a renewed interest in what explicitly poses a barrier to lessening weapon-involved violence. A common finding among the studies is that having access to guns is one of the most prominent barriers to decreasing gun violence. Knowing that having open access to guns creates an environment where gun violence prevails, policymakers do not favor laws restricting them. Instead, mental illness is framed as the primary culprit to the rise of firearm violence in low-income communities. However, many studies argue that this stigma is invalid and poses a barrier to creating policies that will impact the gun violence epidemic.

Public Health Approaches

Public health approaches are prevalent to consider when dealing with gun fatalities/injuries. In light of reported blight remediation of vacant lots and buildings, it is conceivable that this approach can lessen gun violence by removing private spaces that can hide individuals committing illegal acts (Branas et al., 2016). Approximately 5,112 abandoned buildings and lots were used for the experiment, resulting in building remediation and reducing firearm violence to -39%. Branass et al. (2016) stated in the study that, to their knowledge, this is the first study to provide cost-benefit outcomes from a blight remediation program dedicated to reducing firearm violence. The study offers an approach that does not depend much on active human resources like many other studies, as well as the gun violence rate in Philadelphia being sustained from 1-4 years. Having vacant lots and abandoned buildings in a community damages citizens' sense of belonging to the neighborhood, causes tension and fear, and, according to these findings, encourages gun violence (Branas et al., 2016). In Santilli et al. (2017) study, gun violence is linked to areas where there is social disorder (i.e., there is less social cohesiveness and collective efficacy among residents) and physical loss of the urban environment (i.e., vacant lots and buildings, abandoned automobiles, and graffiti). The study determined that preventive measures targeting the underlying causes of violence are vital to an effective public health strategy. Regreening abandoned sites in Philadelphia and Pennsylvania was one of the measures used in the study supported by research and associated with a drop in violence. (Santilli et al., 2017).

Santilli et al.'s (2017) theory that interventions from gun shop employees have been successful when identifying an individual who is not in the right state of mind and providing them with appropriate information about firearms to lessen weapon-involved crime. The method

introduced by Goldstein et al. (2020) supports Santilli et al. (2017) theory because physicians come in contact with many members of our society to provide physical and mental healthcare, including screening for firearm access and storage habits can reduce weapon-involved crime rates. The study includes questions about the patient's relationship with firearms on the Patient Health Questionnaire (PHQ-9), which screens for depression. The described public health approach can ensure that the healthcare system is not broken down and fails someone who is mentally ill and possesses a firearm. The necessity for primary care physicians to play a more significant role in firearm suicide prevention has increased due to ineffective federal gun control measures and a lack of accessibility to behavioral health services (Goldstein, 2020).

One method Calhoun (2014) employs is non-profits such as Youth ALIVE! the goal of the young adults' was to identify what made them vulnerable to the gun violence epidemic. In their own words, the youth's views relied on published research findings from the public health and criminal justice disciplines. Youth ALIVE! participants understood that more firearms were being sold/purchased as panic rose in response to each gun purchase and each shooting of or by a young person in low-income communities. Calhoun's (2014) study supports the (Collier, 2013) theory that having more guns in rotation creates a hostile/unsafe environment that leaves members of our society vulnerable to violence.

Access to Firearms in Low-Income Communities

Braga et al. (2020) analyzed the number of guns circulating in the streets of the Bronx and Brooklyn, considering them to be the boroughs with the highest gun usage rate. New York has solid gun laws compared to other states but has no impact due to the underground gun market, which transports guns to states with strict gun laws from states with flexible gun laws. The study determined conclusions to support the idea that the open availability of guns imposes a

barrier to public health solutions in place to reduce the gun crime rate. The easy availability of firearms equips some high-risk New York City citizens, such as convicted criminals, minors, and others (Braga et al., 2020). Breaking the supply and demand chain requires policy intervention requiring universal background checks to ensure high-risk individuals cannot access firearms. Unfortunately, policy intervention is not as easy due to the gun rights groups and the gun industry's goal to loosen gun laws so sales can be more successful, according to Kapadia (2022).

Kapadia's (2022) review of gun regulations found that the NYSRPA decision is a prime example of how economic factors compromise health and well-being. They also found that commercial interests constrain research and influence policies that allow lenient access to firearms. However, a separate study indicated that 67% of the US would favor banning assault weapons, ranking it as one of the most effective ways to stop mass shootings (Sanchez et al., 2020). In addition, Sanchez et al. (2020) study concluded that young adults who can access firearms are more likely to be potential perpetrators and physically aggressive. In support of this conclusion, B. Lian et al.(2017) discovered that when it came to violent attitudes and behaviors, teenagers who live in households with guns for protection scored higher than their peers who do not than those who did not. The study found this conclusion using a sizable, low-income community-based sample of teenagers; It investigated the association between the presence of a gun in the home, attitudes toward violence, and actions related to aggression and violence among adolescents (B. Lian et al., 2017).

Mental Illness as a Risk Factor for Firearm Violence

Over time, extensive literature has been developed on the associations between individuals with mental illness and exposure to firearms. M.E. Smith et al. (2020) have conclusively shown through the study that Black, Latinx, younger people, lower incomes, and

less educated individuals are overly exposed to firearms, leaving them prone to mental illness: distress, depression, suicidal thoughts, or psychotic experiences. According to research, mental health symptoms and vast exposure to lethal gun violence are widespread, which affects racial and ethnic minorities more than other groups (M.E. Smith et al., 2020). This study supports the notion that the more firearms are accessible, the more our society deals with mental illness as a barrier to lessening weapon-involved violence. However, Simonsson and Solomon (2021) discussed that mentally ill people committed only 2%-3% of violent crimes in 2013, inferring that mentally ill people are not a significant barrier to lessening weapon-involved violence. Instead, Simonsson and Solomon (2021) argue that people with psychiatric problems are becoming more stigmatized due to news and entertainment media's focus on mental illness as the key contributing reason for high firearm crimes. This stigmatization encourages policymakers to enact laws prohibiting mentally ill people from obtaining guns. However, limiting psychiatric patients' access to firearms would have little effect on the overall rate of gun violence in the United States (Simonsson & Solomon, 2021). McGinty et al. (2014) study findings consist of news outlets that blame gun violence on people with Serious Mental Illness (SMI), resulting in a lousy atmosphere for people in communities throughout the USA. This view is supported by Y. Lu and J.R. Temple's (2019) study, which argues that after researchers examined SMI symptoms, they were not as close to an association with gun violence as having access to firearms was.

Conclusion

Nevertheless, considering the amount of research in this area, it is safe to distinguish a public health approach as a solution to reducing the gun crime rate in low-income communities. Strategies include remediation of abandoned buildings/vacant lots; incorporating non-profit organizations that enable the community members' voices and physicians to take more

responsibility in ensuring patients are informed about gun access/safety. In addition, many of these studies contribute to the field by analyzing barriers to low-income communities, such as access to firearms, and studies that tackle the stigma of mental illness being a prime factor cause for gun violence.

The examined literature's overall strengths are the sources used to extract data. Santilli et al. (2017) acquired their finding by surveying six low-income communities in New Haven, Connecticut. Branas et al. (2016) incorporated quantitative research to support their conclusions alongside in-depth interviews with people at high risk for gang involvement. Research methods show the strengths of these and other sources because they were specific from what group of individuals they collected their data. This data creates very focused research that provides particular findings. However, the lack of funding for gun violence research is a weakness throughout the studies. Kapadia (2022) and many others touch upon the effects of the Dickey Amendment (1996). The purpose of this amendment was to ban funding for the Centers for Disease Control (CDC) for research that would be beneficial in promoting gun control. The successful lobbying for this amendment caused weaknesses in existing research since the findings are minimal due to what still needs to be discovered.

The following steps that can be taken to progress research in this field are utilizing non-profit organizations whose goal is to advocate for gun policy reforms and reducing the supply and demand of guns, such as "Youth ALIVE!". Calhoun's (2014) study concluded that giving the youth of low-income communities a voice in the debate about gun violence can be constructive and provide compelling arguments. The non-profit advocacy group's results supported this theory and can be applied to help fill in the gap of limited funding for gun violence research. Another step that can be taken to fill in specific gaps in this field of study is

creating a data system where research findings can be all allocated in one place. This step can create a more factual and organized database to keep track of the gun violence epidemic and educate others.

Chapter 3: Methods

Phase 1: Design

I chose a semi-systemic approach because of the current issue and progressives of the gun violence epidemic. This research is qualitative because of the methods I discovered. It is qualitative because I collected and analyzed non-numeric descriptive data. First, I reviewed the material, focusing on determining the usefulness and validity of each source to ensure that the proper interpretations were being drawn from them. The literature review is very much needed and provides a practical and theoretical contribution to the overall research field of gun violence. The research findings offer these specific contributions because my research elaborates on existing theories in efforts to lessen gun violence in low-income communities through public health approaches. The study determines its importance because the gun violence rate has skyrocketed over the last few years despite any solution that has been set not working. Second, I reviewed many previous forms of literature to acquire my research which induced peer-reviewed articles, dissents, systematic reviews, commentaries, reflections, editorials, and websites. Much of the literature was retrieved from the online Purchase College Library database, starting with Academic Search Complete and moving to databases like EBSCOhost, ProQuest Central Essentials, and Science Direct for more specific topic focus results. I also used the Cornell Law and the Center For Economic and Policy Research websites to retrieve current information contributing to the overall topic of gun violence. The criteria I used for determining which literature to include were based on whether or not the authors were credible and their sources. Lastly, I tested each piece of literature to their contributions to answering the research questions:

-What solutions can be placed to lessen weapon-involved violence in low-income communities in the United States?

-What barriers still exist that prohibit solutions from being effective in low-income communities?

Phase 2: Conduct

The search gathered in-depth insights into the gun violence epidemic in low-income communities through a thematic analysis. This research goal was to identify pertinent themes, discussions, and research gaps to ensure the validity of what is being stated. To ensure I completed this goal, the research was scouted through specific keywords to provide particular results of literature to examine. Keywords that were included in the search but not limited to were *public health approaches, firearms, adolescence, gun control, mental illness, socioeconomic factors, gun violence research funding, firearm homicide, mental health/psychological outcomes, racial/ethnic minorities, federal funding, poverty, low-income neighborhoods*. I ensured research quality by printing hard copies and organizing each piece of literature in a binder according to their contribution to specific themes. The themes proposed through the literature adopt a public health approach as a solution to reduce gun violence in low-income communities, gun access being the culprit to the high rate of gun violence, and the stigma that mental illness is the leading cause of gun violence. Alongside the hard copies, I created an online folder on Google Drive to organize the literature chronologically from when they were published to establish the progressiveness of this topic. The final sample is appropriate and can be trusted due to the extended time I spent analyzing and interpreting the literature to ensure they correlated with recurring themes in other works of literature.

Phase 3: Data Abstraction and Analysis

Data that was abstracted from the sources were deemed appropriate concerning the overall purpose of the review because each piece of literature provided insight into the topic of

gun violence. Outlining the data used in the literature review was acquired using specific colored highlighters while reading the literature, with each color categorizing the data to a theme. This technique ensured that the sources I used were correlating with each other and the themes and provided the relevance of each article to gun violence in low-income communities. The method used to collect and analyze data is adequate for my gun violence research because interpreting past studies can shed light on the problems in our country that lead to high rates of gun violence. Having a vast amount of literature to choose from was great because it emphasizes my topic of study as relevant and vital. However, an enormous amount of literature caused limitations in my research because this caused my research to sometimes turn too broad. Since gun violence is a current societal issue, it was difficult to find research on low-income communities specifically since it is an uprising topic. I overcame this by analyzing specific states with high rates of low-income communities instead of just researching low-income communities because it gave me more detailed data.

Phase 4: Structuring and Writing the Review

The approach I used when retrieving data helped me structure my review because every source was categorized into their appropriate theme contribution. The organization made my review understandable and flowed to answer my research question. Individuals can do further research based on mine because my study provides a new lens for incorporating a public health approach to reduce the gun violence rate but still highlights the barriers that prohibit its goal. The research on gun violence needs to continue. It is recommended to incorporate quantitative data because it provides more insight into how the rates are increasing and helps identify trends leading to the increased speed.

Gun violence is a pressing topic today because of mass shootings, homicides, and suicides involving a gun. My research can contribute to this field because the lack of studies on gun violence has been frozen due to limited funding. Groups like the National Rifle Association (NRA) lobby to prohibit federal funds to the CDC, creating a gap between lowering the gun violence rate and what we know about the topic. My study can contribute to this topic by expanding the amount of research already suffering due to limited funding as well as my results proving that society should take gun violence more seriously in low-income communities.

Chapter 4: Results

Through the analysis, three themes were discovered about gun violence in low-income communities: (1) public health approaches can support the decrease of gun violence, (2) access to guns is the primary culprit for such high gun violence rates, (3) and the stigma that severe mental illness is a leading cause of gun violence creates a barrier for any solution to be effective. The results described in this chapter are informational to the overall topic and research question providing in-depth findings.

RQ 1: What solutions can be in place in low-income communities to lessen weapon-involved violence in the United States of America?

After the research was concluded, it was determined that public health approaches had been overlooked for many years. With the current ongoing investigation, it might be the most effective solution we have to date. The answer to gun violence is still a very controversial debate. Still, the fault of this debate is that it does not try to find a solution for those it affects, like members of low-income communities but instead focuses more on fighting for gun-carrying rights. Public health approaches interact with members of communities and target the real issues.

Blight remediation of vacant lots and abandoned buildings was deemed a cost-effective way to decrease gun violence in low-income communities, according to Branas et al. (2016) study. The remediation lowered firearm assaults by 39% and -4.5 per square mile of each remediated lot and building. The effectiveness of the remediation of vacant lots was proven as an important approach. This approach also managed to save the criminal justice system \$16,554 per abandoned building and \$43,037 per vacant lot, while members of society save up to \$205,019 per vacant lot and abandon building remediation (Branas et al., 2016). In addition to Branas et al. (2016), key findings emerge from Santilli et al.'s (2017) study, concluding that the physical

deterioration of landscapes, vacant lots, and buildings heavily influence gun violence in low-income communities.

Alongside these findings, Santilli et al.(2017) determined another public health approach which was described as, “Successful interventions have worked with gun shop owners to identify customers in crisis and disseminate important gun safety and mental health information” (Santilli, 2017, p. 377). Comparing these results to Goldstein et al. (2020), it was determined that physicians could play a significant role in decreasing gun violence by being more present in conversations about firearm access and storage habits with patients during doctor visits. These results would be achievable by utilizing the Patient Health Questionnaire (PH-9), commonly used for depression screening, and incorporating questions about the patient's relationship with firearms.

Lastly, Calhoun's (2014) study provides results supporting the public health approaches because it employs a non-profit advocacy program for the youth living in low-income communities with high gun violence. The participants' accomplishments highlight how direct nonprofit service organizations are ideally positioned to advocate for legislative and regulatory changes that benefit program participants and society. Youth ALIVE! Contributed to the subsequent decrease in gun homicides by providing health and criminal justice data in the context of their own experiences living in communities endangered by gun violence. Participants of this non-profit overcame the obstacles preventing them from finishing high school because of the program, with all of the students who were taught to be peer educators graduating from high school while attending institutions with graduation rates of around 40% (Calhoun, 2014).

RQ 2: What barriers still exist that prohibit solutions from being effective in low-income communities?

Access to Firearms

In Collier's (2014) dissent, it was stated, "With ever more guns in circulation, it becomes ever more "reasonable" to suspect (or fear) that someone else has one—and to shoot first" (P. 82). This finding ties in well with future studies wherein Braga et al. (2020) assisted in finding "easy access to guns" as a recurring theme for discovering barriers in low-income communities that prohibit gun violence rates from decreasing. The present study confirmed that strong gun laws in certain states like New York have no effect due to lenient gun laws in other states that enable the underground gun market in Brooklyn and the Bronx. Gun tracing was utilized, and most guns recovered by law enforcement were traced back to states with fewer gun laws with changed illegal ownership from purchase owners. The results confirm that it is a good idea to reform gun policy to stop the supply and demand of illegal gun flow (Braga et al., 2020).

However, Kapadia's (2020) study highlighted the disadvantage to achieving gun policy reform from the overturned ruling of *New York State Rifle and Pistol Association (NYSRA) v. Bruen* (2020) that once required anyone applying for a permit to carry a concealed gun to demonstrate "proper cause," or a unique necessity that is distinguishable for carrying a firearm in public, in their application. This finding can confirm that commercial interest is more of a priority than public health because gun lobby groups focus on a gun "right" narrative that influences policymakers to create more lenient gun laws. Sanchez et al. (2020) can argue that commercial interest can be out-ruled in the gun control debate due to a survey that concluded that 67% of the US population would support a ban on assault weapons to prevent mass shootings. Alongside these findings, Sanchez et al. (2020) concluded that from 2304 eligible manuscripts contributing factors of gun violence are "suicidal ideation, intimate partner violence,

socioeconomic status, community distress, family life, childhood trauma, current or previous substance abuse, and firearm access” (P. 2169)

Lastly, a community-based survey with close to 2,000 youth members of low-income communities was utilized and achieved to discover heightened aggressive attitudes in youth when access to a firearm is present in the household as opposed to those who do not. (add more)

Mental Illness as a Risk Factor for Firearm Violence

Black, Latinx, and youth of lower-income communities are deemed to be disproportionately exposed to firearm violence which results in “psychological distress, depression, suicidal ideation, and experiences compared to those not exposed” (M.E. Smith et al. 2020, P. ?). The results suggest that as more people access firearms, our society will have to deal with mental illness as a barrier to reducing violence with weapons. Contrary to the findings of Smith et al. (2020), we did not find the same viewpoint in Simonsson and Solomon's (2021) commentary that focused on providing facts regarding the link between mental illness and gun violence. Less than 7% of violent crimes in the United States can be linked to those with a mental illness, and only 3% involve a firearm (Simonsson & Solomon, 2021).

Simonsson and Solomon (2021) also reported that policymakers make rash judgments based on incomplete information to stop shootings from happening again. Increasing limits on how easily people with mental illnesses can get firearms is frequently one of these considerations. However, it is found to have little to no effect because mentally ill people are not the prominent group causing gun violence rates to rise (Simonsson & Solomon, 2021). Lastly, the current knowledge of this study is that gun violence results from a “confluence of biopsychosocial factors.” Unfortunately, as a result of the news and entertainment media's

primary emphasis on psychiatric problems as the critical causal component, people with psychiatric disorders are increasingly stigmatized.

A similar pattern of results was obtained in McGinty et al. (2014) study, in which 25% of new stories regarding gun violence and mental illness were analyzed from 1997 to 2012. In other words, McGinty et al. (2014) statistics can be explained as follows: Most news coverage about the overall issue of SMI and gun violence did not highlight that most people with SMI are not violently creating a hostile public atmosphere. Previous research has demonstrated that those with negative attitudes toward people with SMI are less likely to support policies that might help the SMI population, such as increased government investment in mental health care. Supporting the speculation that people with SMI are not dangerous and contribute the least to the high gun violence rate, Y. Lu and J.R. Temple (2019) conducted a longitudinal study in Texas that included 663 adults who identified as black, Hispanic, and white. This study concluded that most mental health problems had nothing to do with gun violence and identified “hostility as” a reliable indicator of having threatened someone with a gun. Hostility is a symptom of some mental health issues but can also be a typical personality trait rather than a direct indicator of mental disease (Y. Lu & J.R. Temple, 2019). Overall Y. Lu and J.R. Temple (2019) supports the argument that the bulk of mental health issues looked at have nothing to do with gun violence. Instead, the main offender was easy to access weapons.

Conclusion

The results of this study provided a comprehensive look at public health approaches that can be promising to lessen weapon-involved violence. From remediation of abandoned buildings and vacant lots to having physicians more involved in conversations with patients about gun safety practices. Public health approaches also give members of low-income communities a

chance to be involved and pave the future of their communities and members. Non-profit gun safety advocacy programs serve well with the mission goal that public health approaches try to achieve. Having easy access to guns will be the most prominent barrier low-income communities face when dealing with the rise of gun violence despite the disadvantages low-income communities face because mental illness is viewed as the leading cause of gun violence. Identifying these approaches has been essential in acquiring valuable knowledge on what can work to lessen gun violence rates. However, it is also more critical to have a dialogue on the existing barriers which prevent any solution to the rise in the gun epidemic from working.

Chapter 5: Discussion

Several studies stated that members of the United States low-income communities are a high-risk group in the gun violence epidemic (Calhoun, 2014). This study made it a priority to explore what solutions can be in place to lessen firearm-related violence in low-income communities. To find a practical solution, it was also necessary to understand what barriers are present that prohibit any solution at this point in the gun violence epidemic from being effective. The criminal justice approach has continuously failed members of low-income communities because it does not solve the root of the problem like a public health approach.

It has been expected that the only way to fix gun violence in low-income communities is to put individuals who already have access to illegal firearms in jail. Unfortunately, this approach often fails because it does not tackle the issue in its preventative stage but instead when the problem has peaked. Instead, the current study found that public health approaches are proven effective in reducing gun violence rates because they aim to adopt effective preventive strategies from which low-income communities can benefit. These results support the idea that the public must tackle gun violence through more integrated work because policymakers will continue to ease gun laws for commercial interests. Examples of integrated work drawn from the study include the remediation of abandoned buildings and vacant lots and non-profit advocacy programs that aim to fight for gun policy reform (Branas et al., 2016). Alongside these strategies, public health approaches also push physicians to be more involved in conversations about guns and mental illness, which can fill the gap between people who are uneducated about gun violence (Goldstein et al., 2020).

The study looks at the correlation between mental illness being framed as the leading cause of the rise of gun violence and how it creates a barrier to achieving gun policy reform

which would address the real culprit; access to firearms. In line with many studies analyzed, it was discovered that individuals with mental illness are the least active group in the gun violence epidemic because they are not deemed violent—however, most news coverage fails to communicate that. Individuals with mental illness are then vulnerable to backlash from society and policymakers who target them, thinking it will make a difference instead of reducing access to firearms.

So, What?

The findings indicate that urgency is needed to adopt more public health strategies for low-income communities. Finding a solution to lower the gun violence rate in low-income communities is essential to ensure no more lives are lost, especially among members of the most affected youth. This study enhances the understanding of what a public health approach is capable of and how limitless they are. Initially, a public health approach did not seem to be an effective solution. Still, with thorough research, it was deemed one of the most effective strategies that do not require policymakers' involvement. This approach leaves the power in the hands of members of low-income communities with high gun violence rates to start a change right from their homes.

As surprising as it might sound, understanding public health approaches can bring more awareness and funding to gun violence research. In addition, it will show that it is a vital dilemma and that individuals care about making a change because this strategy requires involvement from community members. Alongside using unity as a tool, this approach can address the real issues contributing to such high gun violence rates, such as the appearance of a neighborhood or minimal involvement from the youth, whose voices are the most important.

Now What?

Certain limitations of this study could be addressed in future research. For example, as this issue progresses, it is crucial to analyze the specific circumstances that leave low-income communities prone to high rates of gun violence. Having a better understanding will give more in-depth solutions that are tailored to be used to help reduce firearm violence rates in low-income communities. Additionally, a limitation of this study is the lack of research on gun violence due to funding being restricted by policymakers for commercial interest. Despite these limitations, these results suggest several theoretical and practical implications.

Future researchers should expand on the findings of my study to provide literature to the already limited research on gun violence. In terms of future research, it would be helpful to extend the current findings by examining marginalized groups of low-income communities with high gun violence, such as individuals of color, LGBTQ+ folks, single parents, men of color, and individuals of lower socio-economic status. Utilizing this approach will ensure a better understanding of the inequality they face that leaves them prone to gun violence and an insight into how a public health approach can be tailored to help specific marginalized groups from gun violence. The more research there is on gun violence, the more we understand the crisis taking over our communities and how to prevent it. Most importantly, expanding on my research will prove that funding is not always required for gun violence research that provides actual results considering this research was conducted mainly through the analysis of previous research. This concept leaves the Dickey Amendment powerless against the future of gun violence research. Instead, it gives researchers another way to obtain results that can be used to fight against high gun violence rates. In summary, my current study contributes to a growing body of evidence suggesting that a public health approach is the most promising solution we can adopt. As well as

gun access is the leading cause of gun violence in low-income communities and is not a mental illness.

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