On average, 109 people die from firearms every day in the U.S. and many more come to hospitals with injuries.

Access to firearms comes with risk. Safe gun practices can reduce the risk of harm for everyone who lives in a home with a firearm.

Patients often expect to have conversations with their doctors about risks to health and safety.

We asked Californians whether it was appropriate for doctors and other health professionals to talk with patients about gun safety in general and when there is a gun in the home and the patient or someone in the home was at increased risk for firearm-related injury.

Health professionals can:
- identify patients at higher risk for gun injury
- talk with them about the importance of gun safety
- take action to prevent harm when risk is imminent

2 in 3 said conversations about gun safety were at least sometimes appropriate “in general”

More than 4 in 5 said gun safety conversations were at least sometimes appropriate when there were guns in the home and someone in the home was at increased risk for firearm injury.
Practicing gun safety means safely and responsibly handling and storing firearms. Storing guns securely is important to help prevent gun deaths and injuries.

The most secure way to store a firearm is:

• Unloaded and separate from ammunition
• Locked up using a locking device, such as a cable lock, a lock box, or a gun safe

Health professional counseling on storing guns securely may be important to help prevent injuries.

Guns in the home put everyone who is living or spending time there at increased risk of injury and death.

Most Californians, including most gun owners, agree that:

• gun safety conversations between health care providers and patients are appropriate when there is a gun in the home and risk of injury is elevated.
• health care provider intervention is appropriate when a patient has access to a gun and is at acute risk for injury.

These results support provider engagement in clinical efforts to prevent firearm injury.

WHAT DO GUN OWNERS THINK?

Fewer gun owners thought conversations about gun safety “in general” were appropriate compared with those who don’t own guns.

Although 40% of gun owners thought these conversations were never appropriate “in general,” similar proportions of owners and non-owners thought that conversations when risk was increased and interventions by providers when risk was imminent were appropriate.

MORE ON FIREARMS AND PATIENT HEALTH

• Health care providers might ask about patient access to firearms when the patient or someone in the patient’s home is at increased risk.
• Decreasing access to guns for someone going through a crisis can be lifesaving.
• Health care providers can answer questions about safe gun practices, who is at higher risk and why, and what to do to help when someone’s in crisis.
• If you’re interested in learning more, resources are available at health.ucdavis.edu/what-you-can-do.

The California Safety and Wellbeing Survey (CSaWS) is a statewide, probability-based Internet survey developed by UCFC and administered by Ipsos Public Affairs, LLC in late 2018. CSaWS asked questions on a wide range of topics related to firearm ownership and exposure to violence and its consequences. More than 2,500 California adults completed CSaWS, and their answers are weighted to be statistically representative of the adult population of the state.

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