

## **A Political or Public Health Discussion?**

As we attempt to move the stage of debate on the problem of small arms morbidity and mortality to the public health domain, we must recognize that the primary battlefield will first be political. I will try to address the issues posed by the letters of Mr. Oberle and Drs. Clay and Allen as clearly, concisely and comprehensively as space allows. To do so in a proper manner is a daunting challenge as a broad perspective is needed. Available data and trends from across several fields of study should be considered, including those found in the legislative, criminal, and epidemiologic--medical and public health--literature. In the case of the small arms pandemic, literature from at least five countries and three continents has also been cited, primarily non-medical- pro-gun websites and daily newspapers."

Dr. Clay shares my concern about "political opinion fleshed out with carefully selected statistics and a number of statements which were factually incorrect." The gun lobby attempts to turn the debate of what primarily should be a health issue (in terms of suffering and death) "into one of 'our numbers and experts vs. theirs', and portraying each side as having its biased facts and interpretations. These efforts keep the discussion off of the merits of the studies and the conclusions one might make. Though there is no lack of letters to the editor, particularly in the US, citing protective effect of guns, there is a paucity of articles in the major medical literature -I am unaware of any. This would suggest a publication bias in terms of medical editors who deliberately screen out well-drafted research or a lack of credible work in this direction. I would suggest that the latter is more likely.

Even before looking at data we should look at the sources of information. For instance a 'Google' search on Mr. Oberle brings up the e-mail address [Analysis@keepandbeararms.com](mailto:Analysis@keepandbeararms.com) and website [www.keepandbeararms.com](http://www.keepandbeararms.com). On this site he has posted more than 20 articles and is available as in the last six months advocating boycotts and other political action against proponents of various domestic measures of gun control such as the Brady bill.

However that alone should not disqualify Mr. Oberle from commenting. In fact I accept his contention that most recent figures have MVA deaths again ahead of small arms in the age 15-24 age category in the US so change my "slightly ahead" to "slightly behind". As for his suggestion that we should use the most up-to-date, credible health information whether or not published in paper form I would agree to a point, but don't wish to diminish

the inherent value in referencing peer-reviewed material. I chose to use the last published CDC study on small arms and children-the 1997 MMWR, rather than website information in part because of accessibility to the reader and in part because of the concern that using unpublished documents outside of the medical literature would open it to challenges by the lobby. I was pleasantly surprised to see Mr. Oberle use CDC data since many in the gun community and US “experts” whose articles are quoted on his webpage have questioned the CDC as an information source and lobbied against funding the CDC’s research into violent death.

A more pertinent concern before we cite “egregious errors” is the question of significance of data. I chose to qualify number one cause with “slightly ahead” as I considered this difference between mortality from MVAs and small arms of even 20% whether ahead or behind, while statistically interesting to not to be significant from a clinical or public health policy decision-making point of view. Most physicians would not be impressed with these statistical differences, in contrast to the order of magnitude differences that exist comparing US firearm death rates that of Australia or Britain.

Other salient questions alluded to in my paper and the responses are: ‘Are these gun deaths truly preventable?’ and ‘Do legislation or numbers of weapons have any impact either positive or negative on gun crime, violent crime or total death rate?’

Unfortunately Dr. Clay’s references are the Sporting Shooters Association of Australia website, the Daily Telegraph, Sydney Morning Herald, and Ted Koppel in the National Review. I append selected recent data for the editors and web readers’ benefit from the Canadian, US, British and Australian situations, courtesy of Phil Alpers from the Harvard Injury Control Research Centre at the Harvard School of Public Health, Roland Browne from the National Coalition for Gun Control (Australia) and Amelie Baillargeon and Mark Anto from the Coalition for Gun Control (Canada).

The data in these sources refute Dr. Allen’s contention that violent crime has increased dramatically in countries which have limited access to guns, with the “law-abiding citizen who remains beseiged in his/her home.” Canadian violent crime continued to decline annually from 1992-99 with a slight 3% increase in the year 2000. Centre for Justice Statistics (2001). Nor does the literature back the contention that people desiring to kill themselves or

others will always manage to find a way and therefore that attempts to limit access to instruments is useless. Indeed Killias<sup>i</sup> found that, to the contrary, no evidence that substitution of instrument for homicide and suicide takes place in societies which have reduced access to guns compared those which do not. Dr. Allen's further contention that the US is just a more violent society is addressed at length in the book **Crime is Not the Problem: Lethal Violence in America** by Zimring and Hawkins published by Oxford in 1997.

Readers can look at original sources should they wish to develop their own conclusions. A few suggestions for the countries cited in the letters are found below<sup>ii</sup>. I would suggest caution in interpreting cross-country comparisons keeping in mind the differences in methodology of collection of data. For example the US data defines Criminal Homicide as "Murder and non-negligent manslaughter" as "excluding "deaths caused by ... attempts to kill, assaults to kill..." [www.jrsa.org/jaibg/UCR\\_methods.htm](http://www.jrsa.org/jaibg/UCR_methods.htm) while the Canadian one's do not.

As for Dr. Allen's tongue-in-cheek call for the banning ropes, knives or cars, Chapdelaine<sup>iii</sup> found that gunshot wounds to have 5 to 15 times the mortality rate of knife wounds. Most people I know say that they'd rather be chased around by a crazed person wielding a knife or baseball bat than a gun. Also evidence for the utility of handguns other than violence or threat of violence is somewhat less than that for ropes, knives and cars. Many physician /gun owner friends in my country, Canada welcomed registration of all firearms and banning of handguns as an at least somewhat effective in controlling misuse and as their collective responsibility as Canadian citizens to enhancing security much as registration of many other less lethal devices.

Dr. Clay further goes on to question my statement "Law enforcement officials in both countries affirm the effectiveness of these measures in reducing damage by these weapons." No references are given to support this statement." This was true because of editorial space constraints. However for the readers' benefit I will conclude with quotations from one open letter of the Attorney-General of Australia Mar 22, 2000, The Hon Daryl Williams AM QC MP to Charlton Heston of the NRA, affirming the measures and questioning data similar to those reported by Dr. Clay.

Mr. Williams states that figures from the Australian Bureau of Statistics showed that "firearms are being used less often in murder, attempted

murder, assault, sexual assault and armed robbery in 1998 compared with 1997” and concludes in a rather decisive fashion, “There are many things that Australia can learn from the United States. How to manage firearm ownership is not one of them. The 54 firearm-related homicides in Australia in 1998 equate to a rate of only 0.28 per 100,000 people. I have been advised that this compares to a rate which is in the order of 4 per 100,000 in the United States. Now that you have the facts, I request that you withdraw immediately the misleading information from your latest campaign.”

Neil Arya

**<sup>i</sup> Killias, Martin Gun Ownership, Suicide and Homicide: An International Perspective, Canadian Medical Association Journal. April, 1993, Killias M. International correlations between gun ownership and rates of homicide and suicide. Can Med Assoc J 1998;148:1721-1725**

<sup>ii</sup> Australian Crime – Facts and Figures 2000. Australian Institute of Criminology. Canberra, Oct 2000  
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Centre for Justice Statistics; FBI Uniform Crime Reporting Data, Bureau of Justice Statistics  
Statistics Canada Homicide Survey; Research and Statistics Division Department of Justice (Kwing Hung) June 2001

<sup>iii</sup> **Chapdelaine A, et al. Firearm-Related Injuries in Canada: Issues for Prevention. Can Med Assoc J Nov. 1991; 145 ( 10 ): 1217-1223**