Special Emphasis Report:

Firearm Injuries

UNDERSTANDING FIREARM VIOLENCE

Firearm injuries are a serious public health problem. In 2022, there were 48,204 firearm-related deaths in the United States – about 132 people dying from a firearm-related injury each day. In Montana, there were 274 firearm-related deaths in 2022 (1 death every 32 hours). A firearm injury is a gunshot wound or penetrating injury from a weapon that uses a powder charge to fire a projectile, including handguns, rifles, and shotguns.

Burden of Firearm Injuries and Death

Among Montana residents injured by firearm during 2019-2023, 1,245 (22.0 per 100,000 population) died (includes in-state and out-of-state deaths), another 238 (4.7 per 100,000) were hospitalized with a firearm injury and an additional 507 (9.7 per 100,000) were seen in the emergency departments (ED).* In all instances, the firearm injury could be either the only injury or one of several injuries and/or medical conditions listed.

A total of \$25.7 million in charges from nonfatal hospitalizations and ED visits occurred during 2019-2023 for firearm-related injuries. The top payer was Medicaid (56%), followed by commercial insurance (17%).

Firearm Ownership and Storage

The 2022 Montana Behavioral Risk Factor Surveillance Survey found that 65% of Montana adults have a firearm in their home. Among firearm owners, 50% said the firearms were locked, 26% were unlocked and not loaded, and 21% were unlocked and loaded.

Firearm Injuries and Deaths by Intent

Self-harm (82%) was the leading cause of firearm-related deaths, while most firearm-related hospitalizations (55%) and ED visits (75%) were unintentional.

Figure 1: Firearm-Related Deaths, Hospitalizations, and Emergency Department Visits by Intent, 2019-2023

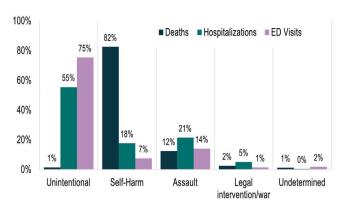


Figure 2: Firearm-Related Deaths by Firearm Type: Count and Crude Rate per 100,000, 2019-2023

Firearm Type	Count	Rate per 100K People	% of Total Firearm Deaths
1. Handgun	289	5.2	23%
2. Rifle, shotgun, and larger firearm	77	1.4	6%
3. Other and unspecified firearm	879	15.9	71%



^{*}This report focuses on Montana residents. During 2019-2023, there were an additional 61 non-residents that died of firearm injuries in Montana, as well as 16 hospitalizations and 35 ED Visits among non-residents.

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Firearm Injury Trends

Figures 3 and 4 illustrate recent tends in intentionally self-inflicted (suicides) and interpersonal violence (homicides) firearm-related deaths by sex. For both suicides and homicides, the death rate was higher among males compared to females over the past 5 years.

The firearm-related suicide rate among males was 6.4x higher than females on average over the last 5 years (Figure 3). The firearm-related homicide rate among males was 4.1x higher than females on average over the last 5 years (Figure 4).

Figure 3: Male and Female Intentionally Self-inflicted (Suicide) Firearm Injuries from 2019 to 2023

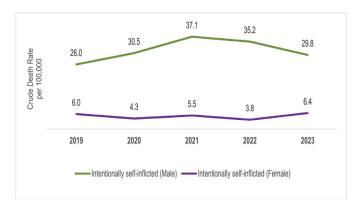


Figure 4: Male and Female Interpersonal Violence (Homicide) Firearm Injuries from 2019 to 2023

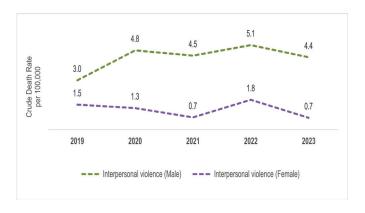
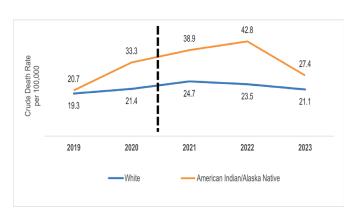


Figure 5 shows trends in firearm-related deaths by race. There insufficient data to calculate rates for Black; Asian, Native Hawaiian and Other Pacific Islander; and multi-racial Montanans over the 5-year time span (N=13, 7, 19 respectively).

The dashed line on Figure 5 denotes that in 2021, a new population data source was introduced that included a multi-racial category, resulting in a 38% reduction from 2020 to 2021 in the estimated population of Black Montanans, and an 8% reduction for American Indians. This could artificially increase the rates for these groups, and trend lines should be interpreted with this in mind.

Figure 5: Firearm Deaths (All Intents) by Race from 2019 to 2023



Firearm Violence by NCHS Rural-Urban Classification

Certain populations have higher rates of firearm violence and may need special prevention measures. The highest rates of firearm deaths per 100,000 residents were among residents of non-core (the most rural) counties in Montana. This pattern was consistent across all 5 data years, and when looking only at suicides or homicides.

NCHS Rural-Urban Classification	All Death (N)	Rate
Small Metro	412	21.5
Micropolitan	350	20.0
Non-core	483	26.1

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Firearm Violence Prevention Activities

CDC's National Center for Injury Prevention and Control (NCIPC) has been the nation's leading public health authority on violence and injury prevention for nearly 30 years. Firearm violence has tremendous impact on the overall safety and wellbeing of Americans. Using a public health approach is essential to addressing firearm violence and keeping people safe and healthy.

CDC's approach to preventing firearm injuries focuses on these elements:

- 1. providing data to inform action
- 2. conducting research
- 3. applying science to identify effective solutions; and
- 4. promoting collaboration across multiple sectors to address the problem.

Through the Core SIPP funding, Montana has partnered with Safer Communities Montana, (SCM) a pilot project in Lewis and Clark County, to support grass roots efforts to promote safe storage of firearms and prescription medications in order to reduce death an injury from accidental or intentional harm from these mechanisms by removing immediate access through safe storage. Montana DPHHS has provided support to Safer Communities Montana to fund a position to run the program and conduct evaluation of the program, media campaigns to be utilized state-wide, and development of a toolkit to help other counties implement the program in their jurisdictions.

The program has also been able to offer mini grants for three consecutive years to help address injury prevention at the local level, and one successful applicant each year has successfully completed a mini grant project around safe storage in their local communities. Through the mini grants and the partnership with SCM, over 2,800 gun locks have been distributed across Montana since 2021.

Note: Firearm-related deaths were identified by searching the underlying cause of death field for a firearm-related code. Nonfatal cases were identified by first limiting the datasets to the injury subset and then searching for any mention of a firearm-related code. Please visit the Montana Injury Prevention Program Injury Indicator Definitions for more details: https://dphhs.mt.gov/assets/publichealth/EMSTS/Data/MTInjuryIndicators.pdf