



# Impacts of Firearm Violence

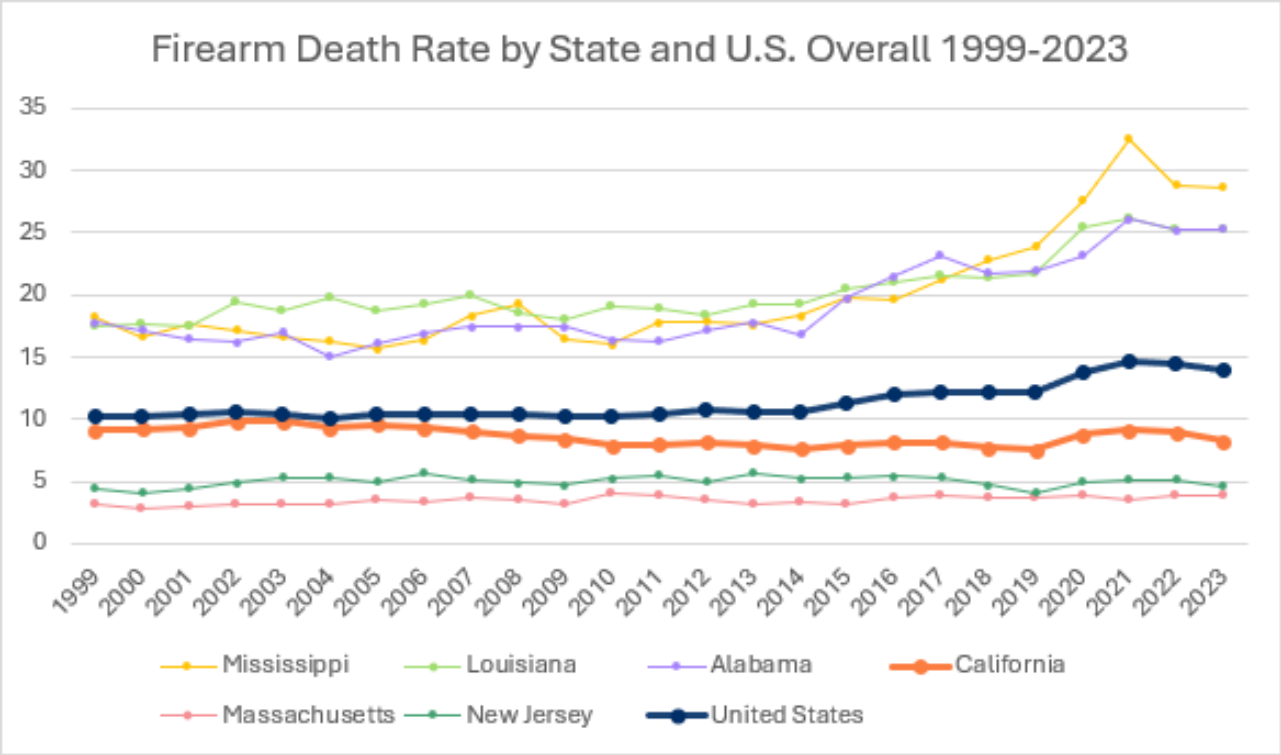
**Courtney Ackerman**, *Senior Researcher*  
May 22, 2025

# Firearm violence is an urgent problem

- Firearm violence is harming California's population
- Mass shootings have increased in recent years
- Firearm injuries are the leading cause of death for children and youth in the United States\*
- Federal funding for firearm violence prevention is being cut



# Firearm violence in the United States and California



**CALIFORNIA HAS THE 7TH LOWEST FIREARM DEATH RATE IN THE UNITED STATES**

8.8

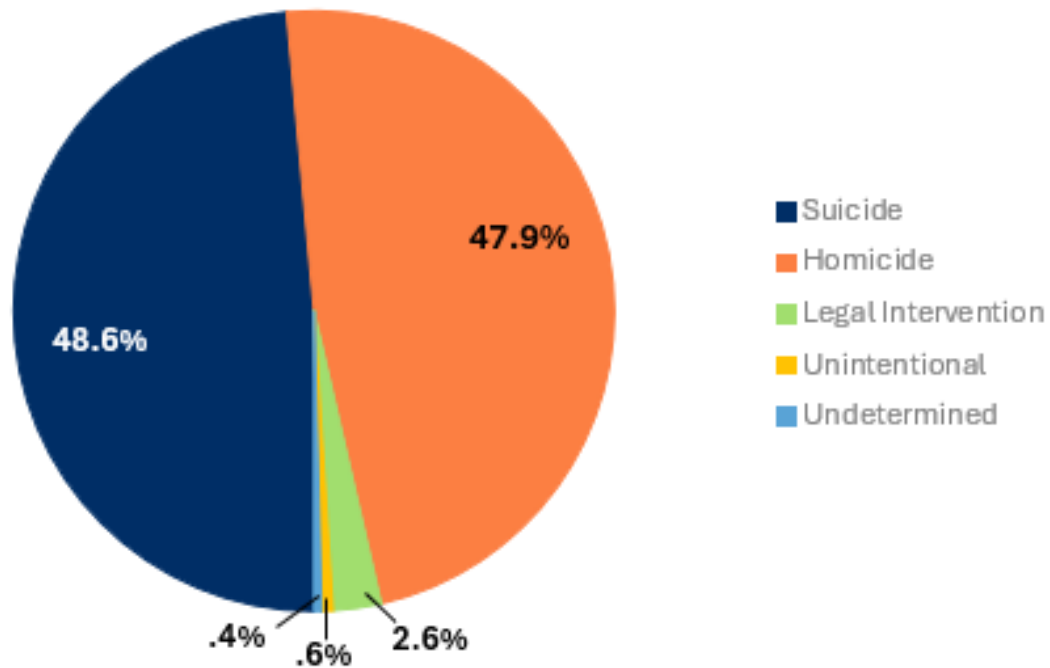
Firearm deaths per 100,000 in **California**

13.6

Firearm deaths per 100,000 in the **United States**

# Firearm deaths by intent

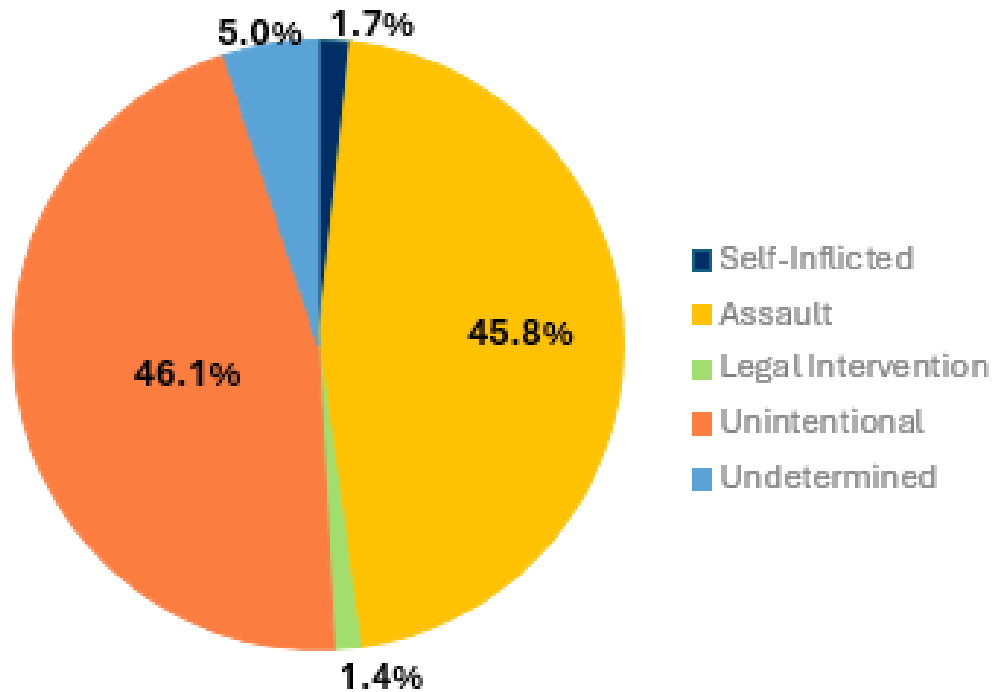
Firearm Deaths in California, 2022



**NEARLY HALF (48.6%) OF  
FIREARM DEATHS IN CALIFORNIA  
ARE SUICIDES.**

# Firearm injuries by intent

Firearm Injuries in California, 2022



**THE VAST MAJORITY OF FIREARM INJURIES ARE ASSAULT (46%) OR UNINTENTIONAL INJURIES (46%).**

# The economic toll

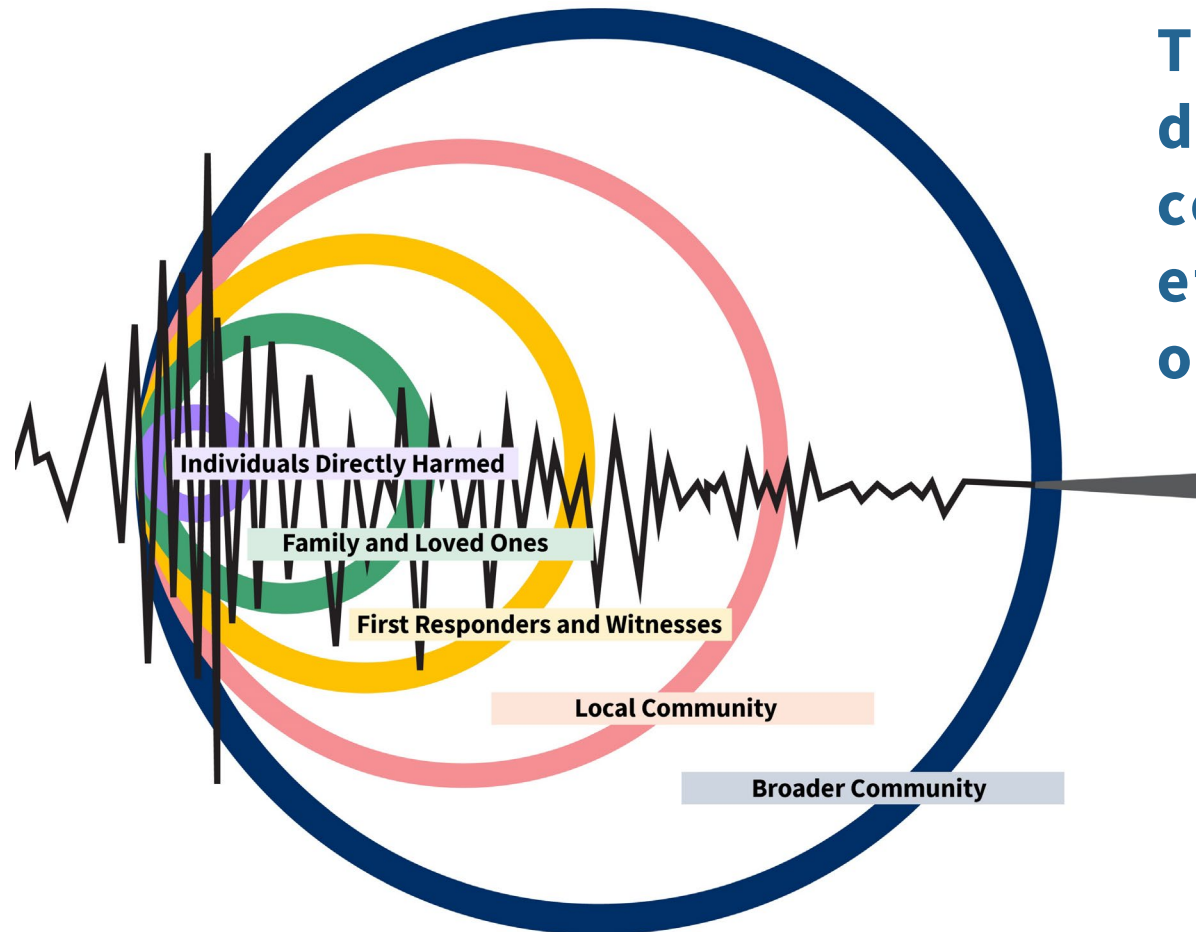
**Estimated Annual Costs to Californians:**

**\$37 billion**

“It’s expensive to have homicides in your community! In terms of investigation, hospitalization, prosecution, devaluation of homes, impact on businesses...”

– Refugio “Cuco” Rodriguez, Chief Equity & Program Officer, Hope and Heal Fund

# Firearm violence is like an earthquake...



There is immense damage at the center, and ripple effects continuing outward.

“The impact isn’t just the direct survivor. There are reverberations for their immediate family, for their community, and beyond.”

– Dr. Sarah Metz, PsyD, Director of the UCSF Division of Trauma Recovery Services



# The Impacts of Firearm Violence Project

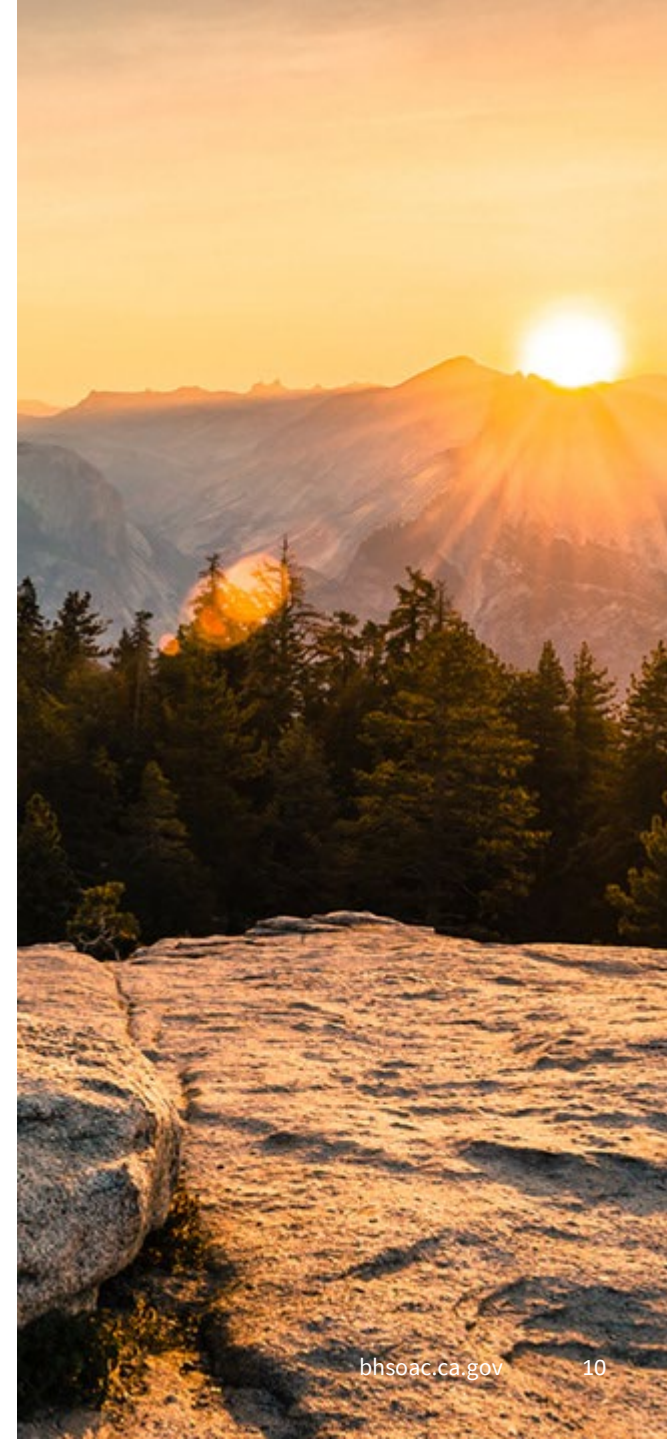


# Guiding Question

Mental illness is often blamed for firearm violence—  
but what really is the intersection between the two?

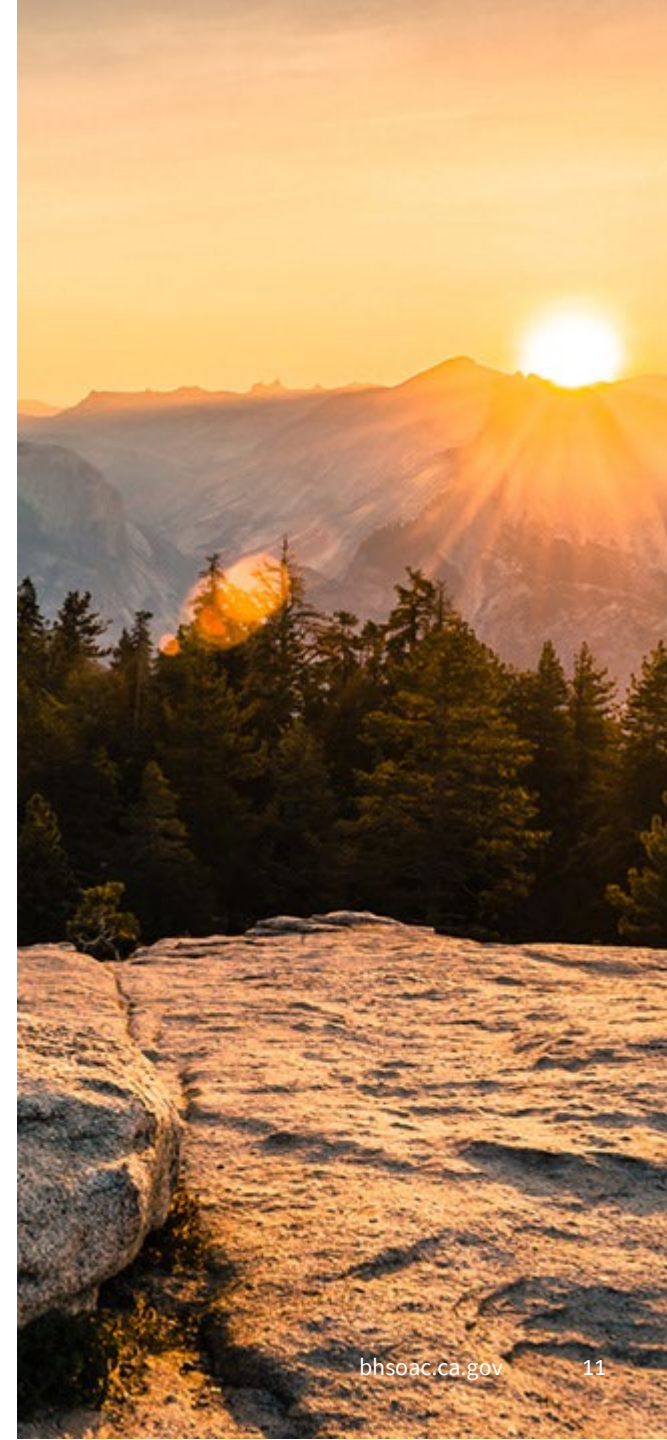
# The IFV Subcommittee

- Formed by the Commission in August 2022
- Chaired by Commissioner and psychologist Dr. Keyondria Bunch
- Vice Chaired by Commissioner and Santa Barbara County Sheriff Bill Brown
- Project Goals:
  - Explore the impacts of firearm violence on mental health using data and information from state and local programs, systems, and policies.
  - Collaborate with firearm violence prevention partners to leverage existing efforts and consider policy recommendations that public health entities and others developed.
  - Develop an action agenda with research, policy, and practice recommendations that show promise in addressing the impacts of firearm violence on mental health and wellbeing, while reducing mental health stigma and discrimination.



# Project Process

- Literature review
- Interviews with over 100 experts and people with lived experience
- Collaboration with State and local partners
  - Including California Department of Public Health and the Office of Gun Violence Prevention
- **Community engagement**
  - **Site visits, listening sessions, town halls, and focus groups**



# Key Context

- There is a bidirectional relationship between firearm violence and behavioral health challenges.
- Risk for violence is contextual and dynamic, meaning it's based on situations and circumstances and it changes over time.
- **Violence is preventable.**

“Serious violence is an evolutionary process, no one just snaps.”

– J. Kevin Cameron, internationally renowned trauma expert



# Findings and Recommendations

## **Finding 1:**

**Firearm violence is a persistent threat to behavioral health, but California is not treating it that way.**

# A behavioral health disconnect

- Firearm violence is not acknowledged in most of California's recent behavioral health investments.
- Yet, firearm violence and behavioral health challenges are deeply intertwined.

“Our mental health challenges in Oakland are not new. It's been passed down from generation to generation. ... We've never had a space for healing.”

– Janiesha Grisham, Violence Prevention Educator

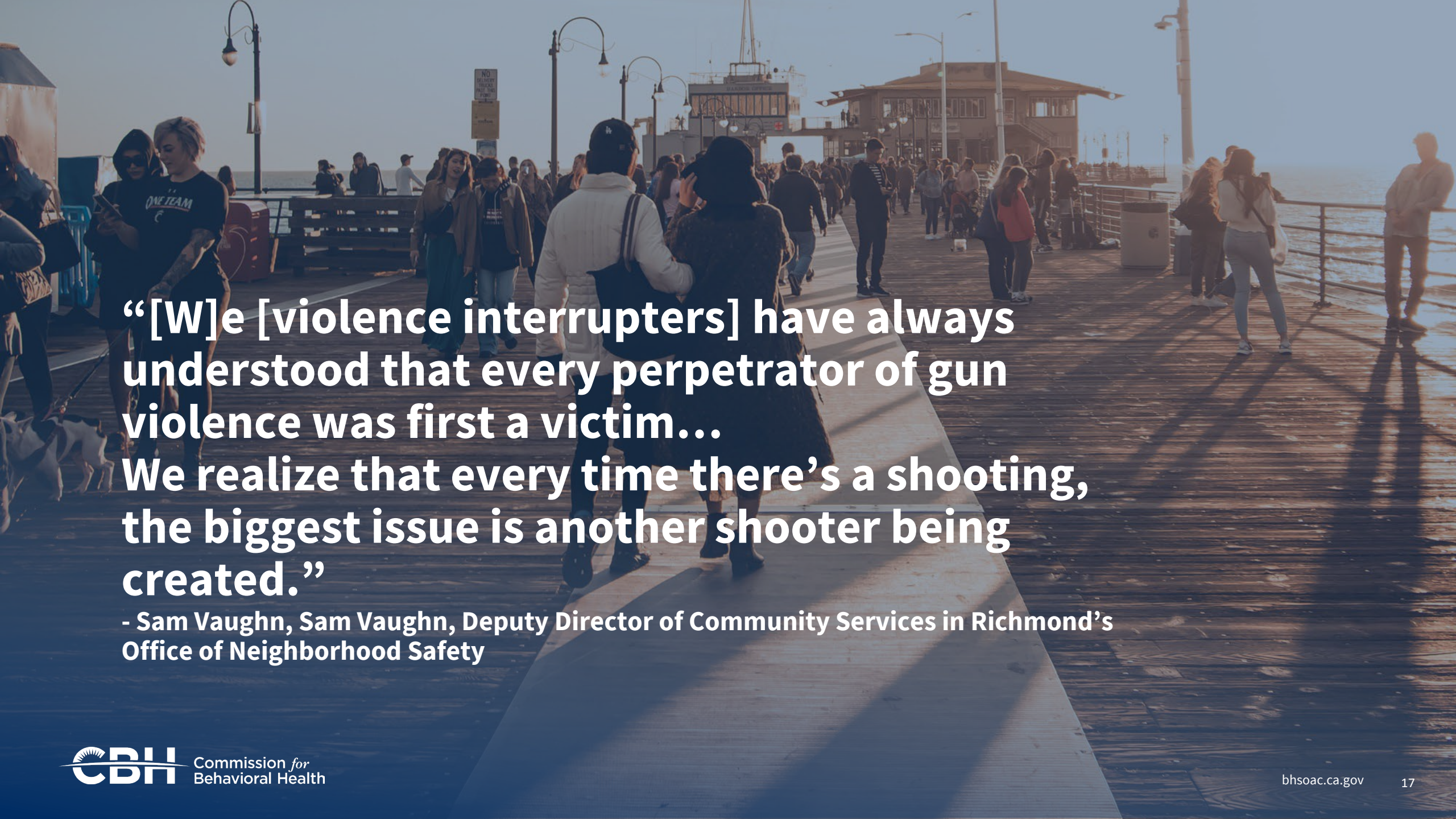
# The cycle of trauma and violence



“... of course we understand that serious violence begets trauma, there’s no question about that. But we also understand that trauma, in and of itself, can beget serious violence.”

– J. Kevin Cameron, Executive Director at the Center for Trauma-Informed Practices





**“[W]e [violence interrupters] have always understood that every perpetrator of gun violence was first a victim... We realize that every time there’s a shooting, the biggest issue is another shooter being created.”**

**- Sam Vaughn, Sam Vaughn, Deputy Director of Community Services in Richmond’s Office of Neighborhood Safety**

**Finding 1:**  
Firearm violence is a persistent threat to behavioral health, but California is not treating it that way.



**Recommendation 1:**  
California must establish trauma-informed violence prevention as a public behavioral health priority.

# Addressing behavioral health needs

- Firearm violence is not acknowledged in most of California's recent behavioral health investments.
- Prioritizing firearm violence would mean:
  - Acknowledging it as both a factor increasing risk for behavioral health challenges and as a potential outcome of unmet behavioral health needs.
  - Implementing trauma-informed, person-centered firearm violence prevention as part of behavioral health initiatives.
  - Measuring firearm violence as part of the implementation of behavioral health initiatives.
  - Intentionally incorporating behavioral health supports into firearm violence prevention.
  - Implementing prevention efforts to address the shared social determinants, particularly focused on early intervention.
  - Establishing and expanding recovery-oriented services and supports to survivors of firearm violence and others affected.

“When [traumatized] folks were able to start to deal with mental health issues, violence became less of a viable option to them.”

– Jose Osuna, loss survivor, past perpetrator of violence, and violence intervention expert

**Finding 2:  
California faces challenges for effective firearm violence  
prevention stemming from misconceptions, cultural tensions,  
and fear.**



# Major barriers to addressing firearm violence

- Lack of awareness
- Misconceptions and myths
- Distrust between communities
- Focus on access alone

“When we think about public health to gun violence... it is not just about the individual who may have partaken in a violent act or owned a gun. It is how did we enable that person to get to a point where they have access to a gun but also don’t feel any sense of hope or upward mobility.”

– Rita Nguyen, Assistant Health Officer at the California Department of Public Health

**Finding 2:  
California faces  
challenges for effective  
firearm violence  
prevention stemming  
from misconceptions,  
cultural tensions, and  
fear.**



**Recommendation 2:  
California must deploy a  
public engagement and  
awareness initiative to  
regain trust and build  
relationships with firearm-  
owning communities and  
other communities  
impacted by violence.**

# Meaningful community involvement

- Building out a cohesive awareness and education campaign on firearm violence, behavioral health challenges, and shared risk and protective factors.
- Involving the communities most affected by firearm violence or at highest risk in strategy and policy development and implementation.
- Fostering community-based and community-driven solutions to firearm violence and associated harms.

“This new law has 100% killed the [temporary storage] program at both of our locations... It breaks my heart that this is happening because I worry what can happen to those people who just want help.”

*– Danielle Jaymes, General Manager at PWG Range in Poway and the Sacramento Gun Range*

**Finding 3:**  
**California's public investments have not been coordinated effectively to address the underlying causes of violence and other public health concerns.**



# Shared risk and protective factors

- Risk factors
  - Parental trauma and childhood abuse/neglect
  - Unstable, high-distress, and high-crime neighborhoods
  - Substance use
  - Low socioeconomic status and high income inequality
- Protective factors
  - Strong family bonds
  - Healthy relationships
  - Neighborhood attachment

“Countless more people live, learn, work, and play in communities and social networks plagued by the collective grief and anticipatory trauma stemming from the threat of firearm violence... whether they have experienced violence directly.”

– Dr. Nicole Kravitz-Wirtz, Associate Professor at UC Davis Centers for Violence Prevention



**“[Others have] said it’s important to invest in CBOs to do this work. I’m a firm believer that it’s government.”**

**- Sam Vaughn, Sam Vaughn, Deputy Director of Community Services in Richmond’s Office of Neighborhood Safety**

**Finding 3:**  
**California's public investments have not been coordinated effectively to address the underlying causes of violence and other public health concerns.**



**Recommendation 3:**  
**California must develop a unified statewide strategy, with an appointed leader to guide a public health approach to firearm violence prevention that integrates data, resources, and partners from across sectors.**

# A statewide strategy

- Integrated
- Collaborative
- Trauma-informed
- Public health approach
- Directed by appointed leadership
- Accompanied by appropriate infrastructure

“It’s not one division’s responsibility. There is a responsibility of our agencies to work across sectors in order to take care of the whole child, the whole family, the whole community.”

– Mayra Alvarez, Commission Chair



**Proposed Motion: That the Commission adopt the Impacts of Firearm Violence final report.**