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No, Guns Are Not A 'Public Health Crisis'

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In a purely political stunt, the American Medical Association has decided that it is time to declare gun violence a “public health crisis.” American gun violence is “a crisis unrivaled in any other developed country” that requires further research by the Centers for Disease Control and Prevention to “help us understand the problems associated with gun violence.”

By definition, however, gun violence is not a “public health crisis,” and a group of physicians, especially those in a political trade group like the AMA, cannot invent a “public health crisis” by simply declaring one.

Properly understood, “public health” deals with the provision and distribution of public goods, that is, commonly owned or government-owned resources over which no one person or group of people have control. Mostly this includes air and water, which are the primary transmission mediums for most diseases. Since those resources are truly “public,” no one has sufficient interest in maintaining their cleanliness. Thus, one person pouring tainted water into a well can start an epidemic that can kill hundreds, if not thousands.

Guns and gun violence are not in the same category. Gun violence may be widespread, but that does not turn it into a “public health crisis.” Bullets do not float around in the air, randomly finding victims and then multiplying to infect more. Guns are possessed by individuals, not owned by the “public,” and more than 99 percent of those guns will never be used to commit a crime. Moreover, many people derive benefits from guns, both in terms of enjoying owning them and by protecting themselves from attackers.

Thus, unlike, say, cholera or the Zika virus, there is no “scientific” answer to the question, “how many guns should there be?” Such an answer, if it existed, would require a cost-benefit analysis, something that doctors are ill-equipped to do. Doctors are good at combating things from which no one benefits—from heart attacks to AIDS to high blood pressure—not things that some people prominently display above their fireplaces.

Nevertheless, gun control advocates have been trying to get people to think about guns as a “disease” for decades. The supposed dangers of guns in the home are discussed in the same way

we talk about lead paint or asbestos, as if a passive hunk of metal can emit a miasma that causes psychotic impulses.

Yet, again, there is no “scientific” answer to whether you should have a gun in your home any more than there is a “scientific” answer to whether you should own a pool, a stove, or a gas fire pit, all of which can pose dangers to children and others. There are risks and there are rewards, and only you can decide whether the benefits outweigh the costs.

Parents are being encouraged to ask about guns in homes where their children may be playing. If you’re uncomfortable with guns, then this is a good idea. Gun rights supporters are also free to keep their children from playing at houses that lack guns because they fear the parents would not be able to protect their children from assailants.

These are questions about personal values, not objective science. But modern public health zealots tend to disregard personal values they don’t like. Smokers, soda drinkers, fast-food eaters, and gun owners are just a few groups that are in the sights of public health warriors. Any subjective benefit someone derives from those things is disregarded and treated as unworthy of respect. It’s not a war for “public health,” it is a war against lifestyle choices that elites don’t share.

Despite these concerns, some may wonder why organizations like the CDC shouldn’t be allowed to simply research guns in order to get a better picture of how guns are used and misused. This is okay in theory, but promises to be illegitimately biased against guns in fact.

In 1979, the public health establishment laid out a clear anti-gun agenda that it has been pursuing to this day. In the Surgeon General’s report *Healthy People* declared that “Easy access to firearms appears to be the one factor with a striking relationship to murder.” In 1980, the Department of Health and Human Services called for substantial reductions in “the number of privately owned handguns” by 1990.

But, since the 1990s, the number of guns in America has risen every year, and, over the same period, gun violence has decreased dramatically, falling nearly by half from 1993 to 2013. (The rate of fatal gun accidents has also fallen significantly). This hugely important trend has not come about through stricter gun laws, and social scientists are still investigating why this dramatic change occurred. At the very least, it’s odd that the AMA chose this time to declare gun violence a “public health crisis,” when the prevailing trends work against this conclusion. Again, this is more evidence that the AMA’s declaration was a political decision, not a scientific one.

As a general rule, public health advocates have refused to seriously investigate whether the guns have both violence increasing and violence decreasing effects. In the hands of criminals, guns might increase some types of violence, but in the hands of would-be victims, guns can deter crime. There is no *a priori* reason to assume that gun ownership should only have violence augmenting effects, and any good social scientist should not begin her research presuming that conclusion. Serious social science research could help illuminate this question, but there is little reason to believe that serious research will come from public health zealots with predetermined conclusions.

There are those who argue that, clearly, more guns equal more crime. Yet for decades criminologists with a bias against guns ignored a very rudimentary question: do more guns cause more crime or does a higher crime rate cause more people to own guns for protection? Which way does the causal arrow run? So blinded by their bias against guns, this basic question from the first day of statistics 101 was ignored by most researchers. When people started asking the question, the results became much less clear.

By wrongly declaring that gun violence is a “public health crisis,” the AMA and others have put their biases against guns on the table. What will inevitably result are studies that focus only on the costs of guns and none of the benefits, either in the form of subjective pleasure or in personal defense.

Finally, by focusing on guns themselves rather than other factors, such as the conditions under which people decide to commit crimes, the results of the CDC’s research are essentially predetermined. A serious, scientifically based study of gun violence would leave a variety of options on the table, including the possibility that more guns in law-abiding hands might create less crime. Other factors not directly related to guns, especially the question of ending the drug war—arguably the single biggest driver of gun violence—should also be on the table. Yet the CDC, being an arm of the very government that is fighting that drug war, cannot reasonably be expected to call for its end, even if the data demands it.

Despite the smug sanctimony of gun-control advocates, not all questions have a simple “scientific” answer. Doctors, scientists, and other experts are prone to thinking that they could answer our vexing problems if they were only given the permission and resources to try, and the magic words “public health” are intoned as a way to claim this authority. We should not let them have it.

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