



CANADIAN FEDERATION
OF NURSES UNIONS
LA FÉDÉRATION CANADIENNE
DES SYNDICATS D'INFIRMIÈRES
ET INFIRMIERS

**Submission by
the Canadian Federation of Nurses Unions (CFNU)
to
the House of Commons Standing Committee
on Public Safety and National Security**

**on Bill C-71: *An Act to amend certain Acts and Regulations
in relation to firearms***

May 25, 2018

Introduction

The Canadian Federation of Nurses Unions (CFNU) welcomes the opportunity to provide input into the Standing Committee on Public Safety and National Security (SECU) study of Bill-C71: *An Act to amend certain Acts and Regulations in relation to firearms*. The CFNU is Canada's largest nursing organization, and our members work in hospitals, long-term care, community health care, and home care. A core purpose of the CFNU is to be the national voice for nurses, advocating for effective public health interventions. The CFNU represents close to 200,000 nurses and student nurses and, as the Committee is likely aware, the majority of nurses (over 90%) are women.

Overview

Since 1991, the CFNU has been advocating for a public health approach to gun control, because ensuring public safety by reducing the risk of injury or death by firearms is an intervention measure aimed at protecting public health. Nurses are firsthand witnesses to the impacts of gun violence. We know that gun violence is very costly. Whether it is someone suffering after a suicide attempt, a woman injured by a firearm during a domestic violence incident, a child wounded accidentally, or a gang-related shooting, a nurse will be waiting in the emergency room to witness the outcome. Gun-related violence could also mean a hospital is overburdened with preventable injuries. A 2011 reference, adjusted for inflation, puts the cost of treating a single gunshot wound at nearly half a million (\$484,000), reminding us that firearm-related violence is a health care issue too.¹

From 2008 to 2015, 5,888 Canadians died from firearms injuries, including both accidental and intentional (suicides and homicides) deaths.² Every injury and death due to the presence of firearms is potentially preventable. Gun control legislation could be likened to any other injury prevention and safety policy. It is a question of producing precautionary safeguards that reduce the risks associated with access to firearms. This access increases the risk of major injuries during violent crime,³ provides significant capacity for homicide, raises the insecurity of women and families,⁴ and facilitates a tragically fatal form of suicide attempt.⁵

Canada typically prides itself on being a safe country. But when comparing gun-homicide rates to similar European countries, instead of just to the United States, we rank fourth in firearm mortality.⁶ Gun ownership in this country is a privilege and a responsibility which must be balanced against its potential risk to others. And Canadians agree. Both rural and urban Canadians recognize the issue of gun safety and support evidence-based action: 88% support strict screening and licensing, 78% want to track gun sales and control the illegal trade, and 62% want severe restrictions on access to handguns. Further, Canadians are concerned about the availability of military-style assault weapons: 83% want these guns properly classified and prohibited.⁷

The CFNU has been working closely with other stakeholders to ensure that any firearms legislation focuses on public safety, in both urban and rural settings, on our streets and in our homes and workplaces. We believe that, given the health impacts of firearms violence, gun control forms an important plank of public health policy, and we applaud efforts to improve public safety through common-sense evidence-based firearms legislation.

The Evidence for Gun Control as a Public Health and Safety Measure

Homicides

In 2016, for the third consecutive year, there was an increase in both the number and rate of firearm-related homicides in Canada.⁸ There were 223 firearm-related homicides reported, 44 more than the previous year, and firearms became the most common method of homicide as shootings grew while stabbings declined.⁹ 54% of firearm-related homicides were related to gang activity, with the greatest increases in gang crime experienced in Toronto and Vancouver.¹⁰ More than 60% of firearm homicides involved the use of handguns, but gun violence is not purely a handgun issue: a third of firearm homicides involved a rifle, shotgun, or sawed off rifle/shotgun.¹¹ According to a 2012 survey conducted by Statistics Canada, when violent crime resulted in an injury, the presence of a firearm increased the likelihood of a major physical injury or death to 33%, in comparison to 4% when no weapon was present.¹²

The effects of changes in legislation are evident: from 1995, when the firearms registry became law, to 2010, there was a 41% reduction in homicides by long guns.¹³ The decrease in homicides using long guns when compared to 1991 was even greater: minus 65%. In 2010, Statistics Canada reported that the total homicide rate had fallen to its lowest level since 1966 (1.62 per 100,000 population).¹⁴

Suicides and Accidents

Tackling gun violence requires us to look beyond homicide statistics to recognize the deadly intersection of firearms and mental health. On average, most firearm-related deaths are not part of a criminal offense. Only about 21% of firearm-related deaths result from a criminal offense, with the majority being the result of suicide, accidents or legal interventions (79%).¹⁵ In 2015, suicide among men of all ages in Canada ranked as the eighth leading cause of death.¹⁶ Men are much more likely to use guns in suicide attempts than women and by extension are tragically more successful in their attempts.¹⁷ There is a strong positive correlation, as demonstrated by a 2014 meta-analysis, between access to a firearm and the risk of suicide for family members.¹⁸ More than 4,480 Canadians shot and killed themselves between 2008 and 2015.¹⁹ In the Americas, Canada ranks fourth, out of 35 countries, in terms of the rate of suicides by guns, with a rate of firearm-related suicides 12 times that of Wales and England.²⁰ Most of these individuals died by suicide with shotguns and rifles.²¹ In order to reduce preventable suicides, access to more lethal methods for people at risk of suicide should be reduced.²²

Furthermore, accidental shootings, particularly among young children, are common daily occurrences. A 2017 Canadian study in *CMAJ* counted 1,800 firearm-related injuries among children and youth in Ontario over a five-year period, amounting to almost one injury per day; the vast majority of these injuries were unintentional.²³ Again, reducing access to guns decreases the risk of accidental death among Canada's children.

Domestic Violence

Firearms are part of the cycle of violence that many face at home, and governments have a role to play in reducing the availability of guns in situations of domestic violence. Women are particularly at risk in situations where firearms are present. When a gun is involved in domestic violence, the chance of a

woman's death increases 12 times, and other research has shown that access to a firearm is a risk factor for fatal intimate partner violence.^{24 25}

In 2016, there were 81 intimate partner homicides in Canada (63 victims were female). With the strengthening of gun control legislation in the 1990s, firearm-related homicides of women decreased significantly more than female homicides not involving firearms. For spousal murder-suicides, however, firearms are still the most common method with more than half (53%) of the victims dying as a result of a gunshot.²⁶ In particular, 72% of women who die from gunshot wounds in Canada are shot with long guns and rifles.²⁷

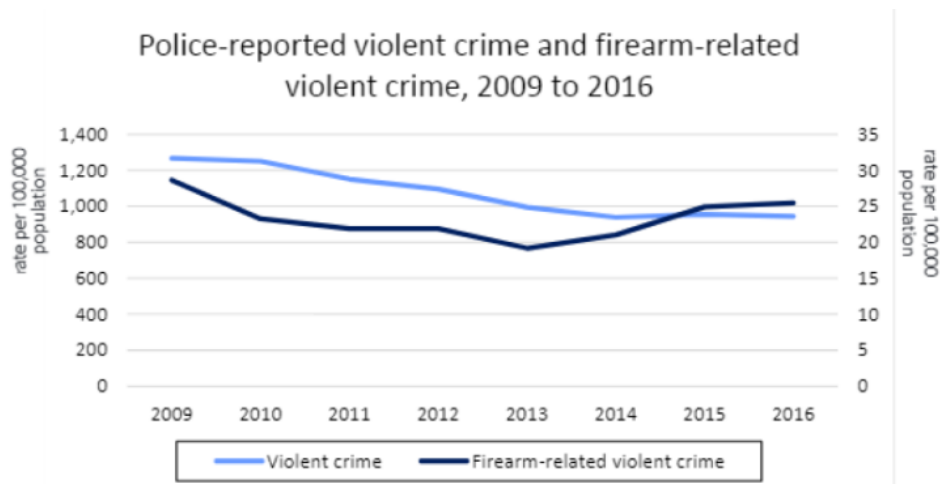
A recent tragedy in rural Nova Scotia in January 2017 brought to light this issue for nurses and veterans alike: Afghan veteran Lionel Desmond, who was suffering from PTSD, shot his wife Shanna, 31, a nurse, their 10-year-old daughter Aaliyah and his 52-year-old mother Brenda, before turning the gun on himself.²⁸

Firearms Policy History

Until recently, firearm-related deaths had decreased dramatically, and much of this decline took place under a period of strict gun control policies in Canada. From 1991 to 2012 firearm-related deaths halved (51%) from 1,400 Canadians dying of gunshot wounds in 1991 to only 730 in 2012.^{29 30} Since 1991 nearly 11,000 lives were saved from gun violence. This decrease in firearm-related deaths is even more significant because it has reduced at a more drastic rate than overall violent crime. Calculating from 1991 to 2012 the overall violent crime rate witnessed a 20.6% decrease, yet the firearm-related homicide rate decreased by 42%.³¹ A similar trend occurs in the homicide statistics. Over the same period the total of firearm-related homicides declined by 37%, but the non-firearms homicides only declined by 22%.³²

Why has there been a decline in firearm-related violence? While there is no simple answer, the peak of firearm-related deaths was in 1977 at 7.2 firearms deaths per 100,000 population; this death rate has since steadily declined, coinciding with the 1977 firearms legislation which restricted the conditions of gun ownership.³³

After years of decline, due to the implementation of gun control legislation, firearm-related criminal violence has been on the upswing since 2013. Over the three years following the dismantling of the long gun registry in 2012, the proportion of homicides involving firearms increased by 13%. In 2016 alone, there were 7,000 victims of gun-related crimes in Canada.³⁴ As evidenced in the table below, this period saw an alarming rise in firearm-related violent crime, while overall violent crime itself slightly decreased.³⁵



The time has come to move the conversation on gun violence beyond its focus on gang violence to address the daily tragedies involving ordinary citizens who become suicidal or violent, often due to the temporary influence of alcohol or drugs or during personal crises such as marital breakdown or job loss. Access to firearms increases the lethality of suicide methods as well as incidents of domestic violence and disputes. To-date, the evidence makes the case for legislators to restrict access to firearms as a preventative public safety measure that will also protect public health.

To this end, the CFNU urges the members of the Standing Committee on Public Health and National Security to embrace the following recommendations in consideration of Bill C-71.

Recommendations

1. Enhance background checks beyond the current five-year legislated period, which take into account criminal, mental health, addiction, domestic violence records and are inclusive of whether the individual is a threat to themselves or others.

The CFNU commends the changes being made to the *Firearms Act* which will enable the RCMP to engage in background checks beyond the arbitrary timeframe of five years. It is vitally important to account for risk factors, such as mental health and domestic violence indicators, when determining eligibility for a firearms' license. However, the CFNU recommends that when considering grounds for prohibiting access to weapons and public safety, the public health risk should be considered, which can be summarized in the question: is the person a threat to themselves or others?

Despite gun control legislation, firearms continue to be implicated in spousal homicides and murder-suicides. Therefore, it is important to ensure that domestic violence risk factors, such as a history of past violence towards the victim, are identified prior to procuring a firearm. Most spouses (65%) accused of homicide had a history of violence involving the victim. Identification needs to occur at the point of licensing, at the point of transfer, and be monitored on an ongoing basis. To enforce the law rigorously to protect the health and safety of women it is vital that references be checked.

2. The CFNU commends the legislation for entrusting the RCMP experts to classify firearms, free from political influence.

3. Require that health care professionals report cases where individuals are deemed to be a threat to themselves or others to RCMP or provincial chief firearms officers.

In order to improve the information that the RCMP is using to confirm the eligibility of licensing and of transfers, public health data must be utilized to identify mental health risk factors, as well as the potential for domestic violence.

4. Empower the Public Health Agency of Canada to collect detailed data analysis of firearms deaths, injuries and crimes to support research, education and policies, and to provide public transparency on the real impacts of firearms and the risks of firearms, alongside mandatory reporting of firearms injuries.

Greater access to data will help the Public Health Agency of Canada to engage in evidence-based research on guns as a public health issue in order to provide transparent information on the real impacts and risks of firearms, a core metric of which is gunshot wounds. Extending mandatory reporting of firearms' injuries by health care professionals, which exists in some provinces, to a national requirement would allow for better tracking and analysis of this data.

5. Restore controls on sales of rifles and shotguns that were in place in 1977 and required the licensed firearms dealer to record the Firearms Acquisition Certificate (now License) number, make, model, and serial number of firearms. These provisions enabled police to inspect records as needed to trace firearms without additional authorization (while requiring a warrant for more in-depth investigations).

6. Ensure the controls on handguns (restricted and prohibited weapons) are reinstated through restoring strict issuance of the Authorizations to Transport (ATT) so that restricted and prohibited weapons may only be transported between pre-defined locations.

7. Ensure that owners of multiple firearms are subject to higher levels of scrutiny (given the risks of diversion and theft).

Due to the increasing domestic sourcing of firearms, as remarked by the Minister of Public Safety in committee,³⁶ greater scrutiny of those with multiple firearms, and mechanisms to track the stockpiling of firearms, are needed to divert the flow of firearms between the legal and the illegal markets.

8. Provide for greater restrictions on military-style assault rifles, misuse of which poses a significant public health and safety risk, to prohibit their ownership by civilians and update their classification.

9. Fund evidence-based gang-prevention initiatives in communities at high risk for gang involvement (with a focus on youth).

Conclusion

The Canadian Federation of Nurses Unions believes the ultimate goal of Canada's gun control laws is to create safer and healthier Canadian communities. A strict, but fair, system of standards, licensing, registration, and education needs to be maintained in order to keep firearms away from people who are a risk to themselves and others. These reforms should be common-sense, focused on prevention and the application of public health evidence.

While it can be hard to measure success, greater gun control measures have already played a role in preventing certain people – deemed a potential risk to themselves or others – from acquiring a firearm. According to the RCMP, 12,247 people had their firearms' licence revoked between 2005 and 2010.³⁷ In 2010 alone, 384 firearms licences were revoked because of potential risk to others; 330 because of potential risk to oneself; and 76 because of domestic violence concerns. Firearm violence is not just a gang problem, it is a problem faced every day by Canadians who expect legislators to keep them safe.

It took fourteen women in Montreal to die for Bill C-68 to pass. It took two women in Ontario to die for Bill 168 to pass. Let's not wait for another tragedy to occur before choosing to do the right thing. Canada's nurses support the strengthening of gun control measure within Bill C-71 and believe more work and study can and should be done to improve gun safety in Canada.

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