



BLUE SKY FACULTY FOLIO

IMPACT

Balancing Act

Reducing firearm injury and death while respecting gun ownership rights

Marian “Emmy” Betz, MD, MPH, Professor of Emergency Medicine at the University of Colorado School of Medicine, is a clinician and researcher who advocates for suicide prevention through harm reduction work centered on firearms.

An issue of particular concern in Colorado, the number of suicides rose 20 percent in the state from 2013 to 2020, increasing each year except for a slight dip between 2019 and 2020. During the same period, suicides by firearms rose 32 percent. Half of those deaths were from 2020, the same year, Colorado has the seventh-highest suicide rate in the nation.

For Betz, the statistics point to an irrefutable conclusion: “Decreasing access to firearms is important to decreasing suicide risk,” she said.

While suicide prevention is a special interest, Betz is strongly committed to reducing all manner of firearm injuries and deaths.

She collaborates with academic colleagues, state agencies, firearm owners and retailers, and others who have the same goal, serving as founding member of the Colorado Firearm Safety Coalition. As the director of the Firearm Injury Prevention Initiative at the CU Anschutz Medical Campus, Betz facilitates partnerships, education, and research to prevent firearm-related injuries. She is also the primary investigator for the Patient-Centered Injury Prevention initiative, which investigates the most effective ways to communicate with individuals and reduce their risk of harm.





STAKEHOLDER SUPPORT

Betz recently led a National Institutes of Health-funded study that explored the views of stakeholders – firearm range owners and retailers, law enforcement agencies, and state and national organizations – about using voluntary out-of-home storage of firearms as a suicide-prevention strategy.

While the qualitative interviews of representatives from each of the three groups revealed significant concerns, such as liability, about how to store firearms outside the home, they were supportive of contributing to suicide-prevention efforts.

“Out-of-home firearm storage is a recommended option for individuals with suicide risk, but little has been known about its feasibility,” Betz says. “This grant has allowed our multi-disciplinary team to examine the views and experiences of these stakeholders related to out-of-home storage. The project, still ongoing, has led to high-level discussions with policy makers and regulators – including the Bureau of Alcohol, Tobacco, Firearms and Explosives – about strategies to facilitate voluntary, temporary out-of-home storage.”

For Betz, it’s just one of many strategies designed to buy time for individuals considering suicide. “The time between deciding to take one’s life and truly taking action may be minutes to hours,” she says. “But if they have access to guns, they are likely to die.”

She emphasizes the solution is not taking away people’s firearms but help them understand the risks and encourage them to make their own decisions about mitigation.

To that end, Betz led a 2019 study, published in the journal *Injury Prevention*, that tested a new online decision support tool called *Lock to Live*, which is free and available in English and Spanish, offers support and resources that include options for storing firearms. It also discusses medications and other factors that increase suicide risk.

CRITICAL CONVERSATIONS

Betz’s work in preventing suicide by firearms extends to helping fellow providers communicate with their patients about the sensitive subject. Getting that kind of conversation started can be difficult when tasked with delivering effective clinical care in a busy emergency room or clinic, Betz says.

In 2015, Betz began urging her physician colleagues to ask patients who appeared to be struggling with mental health or behavioral issues if they had suicidal thoughts and if so, did they have access to firearms.

“IF I’M GOING TO TALK TO A SUICIDAL PATIENT ABOUT LOCKING UP HIS GUNS, WHAT SHOULD I SAY TO MAKE THAT EFFECTIVE?” SHE ASKS.

Betz turned to Michael Victoroff, MD, a Denver-area physician and firearm instructor, for a better understanding. He ultimately became her co-founder of the Colorado Firearm Safety Coalition, where their work focuses on safe gun storage, suicide prevention and training. They also created a hands-on session on gun safety for CU Department of Emergency Medicine faculty.

“It’s important to recognize the role we can play as providers in reducing the risk of firearm injury and death,” Betz says.

With the Patient-Centered Injury Prevention Initiative, Betz works to find science-based approaches to help individuals find personally acceptable routes to reducing risk to themselves and others. A major component of the work is the technique of motivational interviewing, which prods people to identify their own reasons for making a behavioral change. To do that, it is vital that providers listen to patients and respond substantively, even during discussions they may find uncomfortable.

“Healthcare providers often have not been trained or had practice in how to address sensitive topics without judgment or to know what to say next,” Betz says.

The social stigma of suicide may also affect some healthcare providers, some of whom may also have strong personal or political views on firearm ownership. She says partisanship is okay outside of medical settings but has no role in the trauma bay or exam room. When a provider meets a struggling patient, the goal must always be to help the individual “find hope and get through a rough patch.”

“Regardless of their background, we want people to be healthy and prevent injury. I am grateful to help play that role.” ■

