



Risk-Based Firearm Policy Recommendations for Wisconsin

Prepared by:
The Educational Fund to Stop Gun Violence

Risk-Based Firearm Policy Recommendations for Wisconsin

**The Educational Fund to Stop Gun Violence
November 2014**

Additional Resources:

The Consortium for Risk-Based Firearm Policy State Report: *Guns, Public Health, and Mental Illness: An Evidence-Based Approach for State Firearm Policy*
<http://www.efsgv.org/wp-content/uploads/2014/10/Final-State-Report.pdf>

Wisconsin Anti-Violence Effort (WAVE): <http://www.waveedfund.org/>

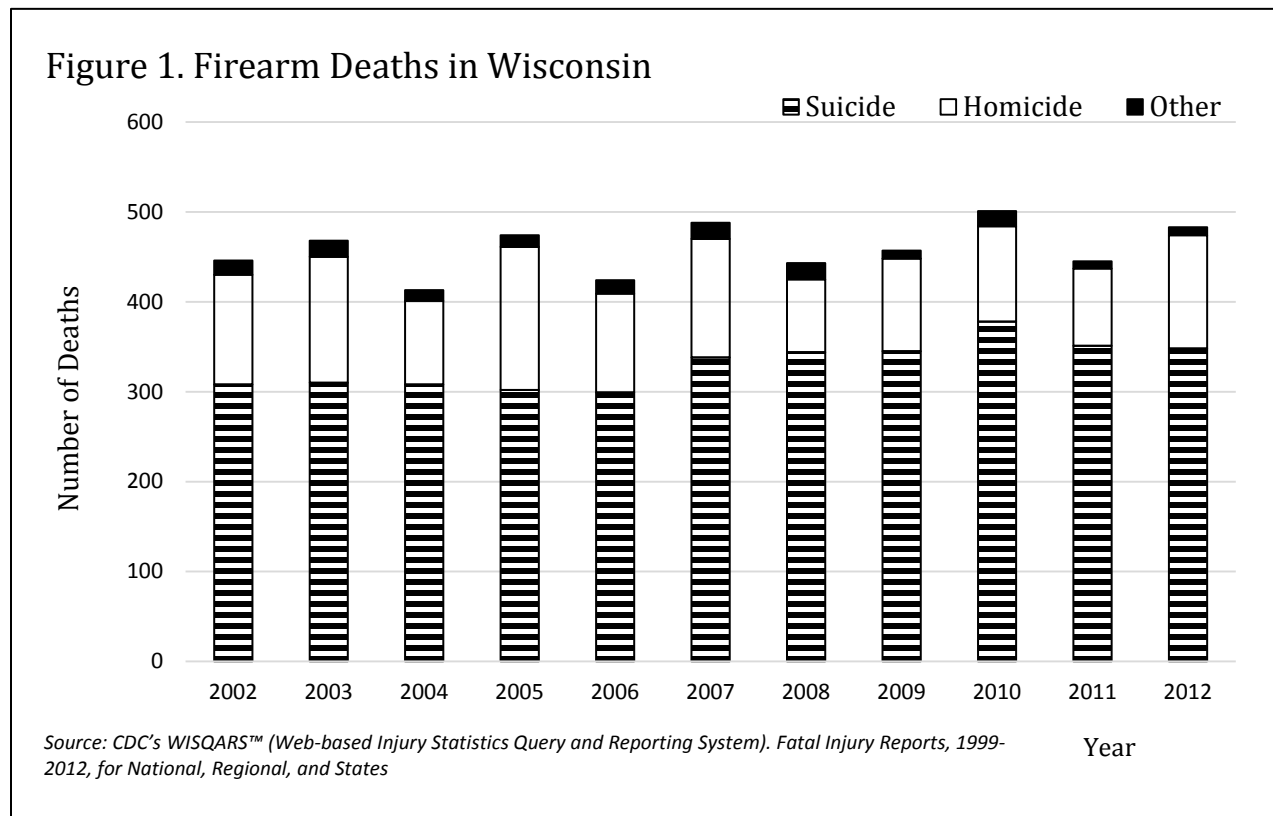
The Educational Fund to Stop Gun Violence: <http://www.efsgv.org/>

Introduction

Firearm violence takes a tragic toll on society. There are more than 74,000 firearm injuries¹ and 32,000 deaths²—nearly two-thirds of which are suicides³—each year in the United States. Effective solutions to reduce gun violence demand a comprehensive, evidence-based strategy. The Consortium for Risk-Based Firearm Policy (Consortium), a group of the nation’s leading experts in public health, mental health, and gun violence prevention, came together in March 2013 to address this complex issue. These esteemed researchers, practitioners, and advocates developed evidence-based gun violence prevention policy recommendations to reduce access to firearms by people who are at an increased risk of dangerousness to themselves or others. This analysis from the Educational Fund to Stop Gun Violence (Ed Fund) examines how Wisconsin policy compares to the Consortium’s recommendations, and outlines steps Wisconsin can take to prohibit individuals at increased risk of dangerousness from accessing firearms. The evidence supporting these recommendations is presented in the full Consortium Report: *Guns, Public Health, and Mental Illness: An Evidence-Based Approach for State Firearm Policy*.⁴

I. Firearm Deaths in Wisconsin

At least one person dies every day from firearm-related injuries in Wisconsin (483 total deaths in 2012).⁵ The majority of gun deaths in Wisconsin are suicides⁶ (see Figure 1). Suicide deaths by firearm accounted for 72% of all firearm deaths in 2012 (down from nearly 80% in 2011).⁷



II. Consortium Recommendation Summary

The discourse after horrific mass shootings often centers on the link between gun violence and mental illness. While research shows mental illness is strongly associated with suicide,^{8,9} the majority of mentally ill individuals will never be violent toward others.^{10,12} There are certain times when mentally ill persons are at increased risk of interpersonal violence, such as the time period surrounding an involuntary hospitalization,^{13, 14} but most people with common mental illnesses are not more violent than the general population without mental illness.¹⁵ Mental illness alone accounts for a very small proportion of societal violence (about 4%),¹⁶ therefore policies must address other risk factors for dangerousness in order to reduce overall violence in society.^{17, 18} Aside from mental illness on its own, stronger predictors for interpersonal violence—including homicide—are a history of violence (violent misdemeanor crime convictions¹⁹ and domestic violence²⁰⁻²²), drug abuse,²³ and alcohol abuse.^{24,25} The Consortium recommends states expand current federal firearm prohibitions to include these broader risk factors for dangerousness. Policies addressing these criteria provide a comprehensive approach to gun violence prevention that is true to the evidence and does not stigmatize mental illness alone as the root cause of violence.

1. Mental Health Risk Factors for Dangerousness

Evidence shows that while mental illness on its own is not a strong predictor for violent behavior toward others, there are certain times when the mentally ill are more prone to violence. The first episode of psychosis, and the time period just before and after an involuntary hospitalization, for example.^{26, 27} Mental illness *is* strongly associated with self-harm, and common mental illnesses such as depression can increase risk of suicide.^{28, 29} Risk of suicide and access to firearms is particularly dangerous; 90% of attempted suicides by firearm are fatal.³⁰ As the overwhelming proportion of all firearm deaths in Wisconsin are suicides (see Figure 1.), evidence informed policies restricting access to firearms during these periods of crisis may be effective. See below for the Consortium's recommendations regarding mental health risk factors for dangerousness.

Recommendation #1: Current state law should be strengthened to temporarily prohibit individuals from purchasing or possessing firearms after a short-term involuntary hospitalization. Concurrently, the process for restoring firearm rights should be clarified and improved.

- 1.1 States should enact new legislation temporarily prohibiting individuals from purchasing or possessing firearms after a short-term involuntary hospitalization. This prohibition should be predicated on a clinical finding of danger to self or danger to others.
- 1.2 Restoration of an individual's ability to purchase or possess a firearm following a firearm disqualification due to mental illness should be based on an evaluation

by a qualified clinician and a finding that the petitioner is unlikely to relapse and present a danger to self or others in the foreseeable future.

2. Other Risk Factors for Dangerousness

As the majority of violence is related to factors other than mental illness alone, the Consortium recommends a risk-based approach to reducing violence, looking at other risk factors for dangerousness. A history of violence,^{31, 32} including violent misdemeanor convictions³³ and perpetration of domestic violence,³⁴⁻³⁶ is the strongest predictor of violence toward others. Research also shows that firearm owners are more likely to abuse alcohol,³⁷⁻⁴⁰ and individuals who abuse alcohol are at increased risk of homicide and suicide.⁴¹ Studies also show that illegal use of controlled substances is related to an increased risk of violence.⁴²⁻⁴⁶ The cognitive impairment associated with drug use also makes it difficult to avoid violent conflict.⁴⁷⁻⁴⁹ See below for the Consortium's recommendations regarding these other risk factors for dangerousness.

Recommendation #2: States should enact new prohibitions on individuals' ability to purchase or possess a firearm that reflect evidence-based risk of dangerousness.

- 2.1 Individuals convicted of a violent misdemeanor should be prohibited from purchasing or possessing firearms for at least ten years.
- 2.2 Individuals who are subject to temporary domestic violence restraining orders should be prohibited from purchasing and possessing firearms for the duration of the temporary order.
- 2.3 Individuals convicted of two or more DWI or DUIs in a period of five years should be prohibited from purchasing and possessing firearms for at least five years.
- 2.4 Individuals convicted of two or more misdemeanor crimes involving controlled substances in a five-year period should be prohibited from purchasing or possessing firearms for at least five years.

3. Periods of Crisis

Law enforcement and concerned family members need tools in Wisconsin to temporarily restrict firearms access during periods of crisis. Connecticut⁵⁰ and Indiana⁵¹ have discretionary gun-removal tools for law enforcement, and California⁵² became the first state in the country to pass a law providing family members with a similar option. See below for the Consortium's recommendations regarding these periods of crisis.

Recommendation #3: Develop a mechanism to authorize law enforcement officers to remove firearms when they identify someone who poses an immediate threat of harm to self or others. States should also provide law enforcement with a mechanism to request a warrant authorizing gun removal when the risk of harm to self or others is credible, but not immediate. In addition, states should create a new civil restraining order process to allow family members and intimate partners to petition

the court to authorize removal of firearms and temporarily prohibit firearm purchase and possession based on a credible risk of physical harm to self or others, even when domestic violence is not an issue.

- 3.1 Authorize law enforcement to remove guns from any individual who poses an immediate threat of harm to self or others. Law enforcement officers are well versed in the “use of force” continuum, and may also use risk/lethality assessments to judge the risk of particular situations. In emergency situations, this authority can be exercised without a warrant.
- 3.2 Create a new civil restraining order process to allow private citizens to petition the court to request that guns be temporarily removed from a family member or intimate partner who poses a credible risk of harm to self or others. This process should mirror the restraining order process in most states and include a temporary *ex parte* order as well as a long-term order issued after a hearing in which the respondent had an opportunity to participate. Respondents to an order issued through this process (Gun Violence Restraining Order or GVRO) will be prohibited from purchasing and possessing guns for the duration of the order and required to relinquish all firearms in their possession for the duration of the order. Law enforcement officers should be able to request a warrant through this process to remove guns when there is a credible risk of harm that is not immediate.
- 3.3 Include due process protections for affected individuals. Specifically, provide respondents with an opportunity to participate in a hearing after having their guns removed by law enforcement (3.1) or through the GVRO process (3.2) and assure processes are in place for returning all removed guns at the conclusion of the temporary prohibition.

III. Opportunities for Wisconsin

Wisconsin code goes beyond federal law in a few ways,⁵³ including (but not limited to) removal requirements for individuals who have been civilly committed for mental illness.⁵⁴ There are opportunities for Wisconsin to expand current firearm prohibitions to address risk factors for dangerousness, and Wisconsin should implement the following Consortium recommendations:

Consortium Recommendation #1: Mental Health Risk Factors for Dangerousness

- Prohibit individuals following a short-term involuntary hospitalization from purchasing or possessing a firearm.
- Refine the restoration process to include evidence from a clinician that the petitioner is unlikely to be a danger to themselves or others in the foreseeable future.

Consortium Recommendation #2: Other Risk Factors for Dangerousness

- Prohibit individuals convicted of a violent misdemeanor from purchasing or possessing a firearm for at least ten years.
- Prohibit individuals subject to a temporary domestic violence restraining order from purchasing or possessing a firearm for the duration of the order.

- Prohibit individuals convicted of two or more DUI or DWIs within a five year period from purchasing or possessing firearms for at least five years.
- Prohibit individuals convicted of two or more misdemeanor drug crimes within a five year period from purchasing or possessing firearms for at least five years.

Consortium Recommendation #3: Periods of Crisis

- Create a Gun Violence Restraining Order (GVRO) mechanism to enable law enforcement, family members, and intimate partners to petition the court to temporarily prohibit an individual in crisis from purchasing or possessing firearms.

IV. Policy Analysis

An in depth analysis of current Wisconsin law and the corresponding Consortium recommendations is provided in the table below.

Consortium Recommendation #1: Mental Health Risk Factors for Dangerousness
1.1: Prohibit individuals following a short-term involuntary hospitalization from purchasing or possessing a firearm.
<p>WI Recommendation</p> <ul style="list-style-type: none"> • Wisconsin does not prohibit the purchase or possession of firearms for individuals following involuntary emergency hospitalization • Recommend implementing Consortium recommendation 1.1.
Related WI Statute (if applicable) n/a
1.2: Refine the restoration process to include evidence from a clinician that the petitioner is unlikely to be a danger to themselves or others in the foreseeable future.
<p>WI Recommendation</p> <ul style="list-style-type: none"> • Wisconsin considers the individual’s “record and reputation” but not necessarily the individual’s current symptoms and treatment history in granting restoration. • Recommend implementing Consortium recommendation 1.2.
<p>Related WI Statute (if applicable) Current restoration following civil commitment: Wis. Stat. Ann. § 51.20</p> <p>“1m. a. If a court orders an individual under subd. 1., or ordered an individual under s. 51.20(13)(cv)1., 2007 stats., not to possess a firearm, the individual may petition that court or the court in the county where the individual resides to cancel the order.</p> <p>b. The court considering the petition under subd. 1m. a. shall grant the petition if the court determines that the circumstances regarding the disposition under par. (a)3., 4., 4m., or 5. and the individual's record and reputation indicate that the individual is not likely to act in a manner dangerous to public safety and that the granting of the petition would not be contrary to public interest.”</p>
Consortium Recommendation #2: Other Risk Factors for Dangerousness
2.1: Prohibit individuals convicted of a violent misdemeanor from purchasing or possessing a firearm for at least ten years.
<p>WI Recommendation</p> <ul style="list-style-type: none"> • Wisconsin does not have a statute to prohibit individuals who commit violent misdemeanors from purchasing or possessing firearms. • Recommend implementing Consortium recommendation 2.1.

Related WI Statute (if applicable) n/a

2.2: Prohibit individuals subject to a temporary domestic violence restraining order from purchasing or possessing a firearm for the duration of the order.

WI Recommendation

- Only final domestic violence restraining orders (injunctions) are gun prohibitory in Wisconsin. This should be changed to include a firearm prohibition for temporary domestic violence restraining orders, for the duration of the order.
- Recommend implementing Consortium recommendation 2.2.

Related WI Statute (if applicable)

WI DV process:
Wis. Stat. Ann. § 813.12

“(2m) Two-part procedure. Procedure for an action under this section is in 2 parts. First, if the petitioner requests a temporary restraining order the court shall issue or refuse to issue that order. Second, the court shall hold a hearing under sub. (4) on whether to issue an injunction, which is the final relief.

(4m) Notice of restriction on firearm possession; surrender of firearms. (a) An injunction issued under sub. (4) shall do all of the following:

1. Inform the respondent named in the petition of the requirements and penalties under s. 941.29 and any similar applicable federal laws and penalties.
2. Except as provided in par. (ag), require in writing the respondent to surrender any firearms that he or she owns or has in his or her possession to the sheriff of the county in which the action under this section was commenced, to the sheriff of the county in which the respondent resides or to another person designated by the respondent and approved by the judge or circuit court commissioner, in accordance with s. 813.1285.”

2.3: Prohibit individuals convicted of two or more DUI or DWIs within a five year period from purchasing or possessing firearms for at least five years.

WI Recommendation

- Wisconsin has an alcohol related firearm prohibition following commitment to treatment for alcoholism, but two misdemeanor convictions would provide a clear standard to show a pattern of reckless behavior.
- Recommend implementing Consortium recommendation 2.3.

Related WI Statute (if applicable)

WI Alcohol-related firearm prohibition following commitment to treatment for alcoholism:
Wis. Stat. Ann. § 51.45 Prevention and control of alcoholism

“If a court orders commitment of a person under this subsection, the court shall determine if, under 18 USC 922(g)(4), the person is prohibited from possessing a firearm. If the person is prohibited, the court shall order the person not to possess a firearm, order the seizure of any firearm owned by the person, and inform the person of the requirements and penalties under s. 941.29.”

Subsection: **“A person may be committed to the custody of the county department by the circuit court upon the petition of 3 adults, at least one of whom has personal knowledge of the conduct and condition of the person sought to be committed. A refusal to undergo**

treatment shall not constitute evidence of lack of judgment as to the need for treatment. The petition for commitment shall:

1. Allege that the condition of the person is such that he or she habitually lacks self-control as to the use of alcohol beverages, and uses such beverages to the extent that health is substantially impaired or endangered and social or economic functioning is substantially disrupted;
2. Allege that such condition of the person is evidenced by a pattern of conduct which is dangerous to the person or to others;
3. State that the person is a child or state facts sufficient for a determination of indigency of the person;
4. Be supported by the affidavit of each petitioner who has personal knowledge which avers with particularity the factual basis for the allegations contained in the petition; and
5. Contain a statement of each petitioner who does not have personal knowledge which provides the basis for his or her belief.”

2.4: Prohibit individuals convicted of two or more misdemeanor drug crimes within a five year period from purchasing or possessing firearms for at least five years.

WI Recommendation

- Wisconsin does not go beyond the federal criteria for drug related prohibitions, and does not have a statute to prohibit individuals convicted of drug related misdemeanors from possessing firearms.
- Recommend implementing Consortium recommendation 2.4.

Related WI Statute (if applicable) n/a

Consortium Recommendation #3: Periods of Crisis

3.1-3.3: Create a Gun Violence Restraining Order (GVRO) mechanism to enable law enforcement, family members, and intimate partners to petition the court to temporarily prohibit an individual in crisis from purchasing or possessing firearms.

WI Recommendation

- There is no mechanism for law enforcement to apply for a warrant to remove firearms in Wisconsin.
- There is no civil mechanism for private citizens to petition the court to remove firearms. Nor is there a mechanism for private citizens to contact law enforcement to petition the removal of guns for the broader dangerous behaviors we identify in the state report.
- Recommend implementing Consortium recommendations 3.1, 3.2., and 3.3.

Related WI Statute (if applicable) n/a

¹ Hoyert, D. L., & Xu, J. (2012). Deaths: preliminary data for 2011. *Natl Vital Stat Rep*, 61(6), 1-65.

² Centers for Disease Control and Prevention, Web-based Injury Statistics Query and Reporting System. (2011). 2011, United States Firearm Deaths and Rates per 100,000. Retrieved August 27, 2014, from http://www.cdc.gov/injury/wisqars/fatal_injury_reports.html

³ National Center for Injury Prevention and Control, CDC. (2012). 2002 - 2012, United States Suicide Firearm Deaths and Rates per 100,000. *Fatal Injury Reports 1999-2012, for National, Regional, and States (RESTRICTED)*. Retrieved October 24, 2014, from http://www.cdc.gov/injury/wisqars/fatal_injury_reports.html

-
- ⁴ Consortium for Risk-Based Firearm Policy. (2013). *Guns, Public Health and Mental Illness: An Evidence-Based Approach for State Policy*. Retrieved from <http://www.efsgv.org/wp-content/uploads/2014/10/Final-State-Report.pdf>
- ⁵ National Center for Injury Prevention and Control, CDC. (2012). 2012, Wisconsin Firearm Deaths and Rates per 100,000. *Fatal Injury Reports 1999-2012, for National, Regional, and States (RESTRICTED)*. Retrieved October 24, 2014, from http://www.cdc.gov/injury/wisqars/fatal_injury_reports.html
- ⁶ National Center for Injury Prevention and Control, CDC. (2012). 2012, Wisconsin Suicide Firearm Deaths and Rates per 100,000. *Fatal Injury Reports 1999-2012, for National, Regional, and States (RESTRICTED)*. Retrieved October 24, 2014, from http://www.cdc.gov/injury/wisqars/fatal_injury_reports.html
- ⁷ National Center for Injury Prevention and Control, CDC. (2012). 2002-2012, Wisconsin Firearm Deaths and Rates per 100,000. *Fatal Injury Reports 1999-2012, for National, Regional, and States (RESTRICTED)*. Retrieved October 24, 2014, from http://www.cdc.gov/injury/wisqars/fatal_injury_reports.html
- ⁸ Brown, G. K., Beck, A. T., Steer, R. A., & Grisham, J. R. (2000). Risk factors for suicide in psychiatric outpatients: a 20-year prospective study. *Journal of consulting and clinical psychology, 68*(3), 371-377.
- ⁹ Malone, K. M., Haas, G. L., Sweeney, J. A., & Mann, J. J. (1995). Major depression and the risk of attempted suicide. *Journal of Affective Disorders, 34*(3), 173-185.
- ¹⁰ Teplin, L. A., McClelland, G. M., Abram, K. M., & Weiner, D. A. (2005). Crime victimization in adults with severe mental illness: comparison with the national crime victimization survey. *Archives of general psychiatry, 62*(8), 911-921.
- ¹¹ Elbogen, E. B., & Johnson, S. C. (2009). The Intricate Link Between Violence and Mental Disorder Results From the National Epidemiologic Survey on Alcohol and Related Conditions. *Archives of General Psychiatry, 66*(2), 152-161.
- ¹² Van Dorn, R., Volavka, J., & Johnson, N. (2012). Mental disorder and violence: is there a relationship beyond substance use?. *Social Psychiatry and Psychiatric Epidemiology, 47*(3), 487-503.
- ¹³ Choe, J., Teplin, L., & Abram, K. (2008). Perpetration of violence, violent victimization, and severe mental illness: balancing public health concerns. *Psychiatric Services, 59*(2), 153-164.
- ¹⁴ McNiel, D., Weaver, C., & Hall, S. (2007). Base rates of firearm possession by hospitalized psychiatric patients. *Psychiatric Services, 58*(4), 551-553.
- ¹⁵ Swanson, J. W., Holzer, C. E., Ganju, V. K., & Jono, R. T. (1990). Violence and Psychiatric Disorder in the Community: Evidence From the Epidemiologic Catchment Area Surveys. *Psychiatric Services, 41*(7), 761-770.
- ¹⁶ Swanson JW, McGinty EE, Fazel S, Mays VM (2014). Mental illness and reduction of gun violence and suicide: bringing epidemiologic research to policy. *Annals of Epidemiology, S1047-2797*(14)00147-1. doi: 10.1016/j.annepidem.2014.03.004. [Epub ahead of print].
- ¹⁷ Swanson, J.W., Robertson A.G., Frisman L.K., Norko M.A., Lin H.J., Swartz M.S., Cook P.J. (2013). Preventing Gun Violence Involving People with Serious Mental Illness. *Reducing Gun Violence in America: Informing Policy with Evidence and Analysis*, 33-51.
- ¹⁸ Appelbaum, P., & Swanson, J. (2010). Law & psychiatry: gun laws and mental illness: how sensible are the current restrictions?. *Psychiatric Services, 61*(7), 652-654.
- ¹⁹ Wintemute, G. J., Wright, M. A., Drake, C. M., & Beaumont, J. J. (2001). Subsequent criminal activity among violent misdemeanants who seek to purchase handguns. *JAMA: The Journal of the American Medical Association, 285*(8), 1019-1026.
- ²⁰ Campbell, J. C., Webster, D., Koziol-McLain, J., Block, C., Campbell, D., Curry, M. A., ... & Laughon, K. (2003). Risk factors for femicide in abusive relationships: Results from a multisite case control study. *American journal of public health, 93*(7), 1089-1097.
- ²¹ Zeoli, A. M., & Webster, D. W. (2010). Effects of domestic violence policies, alcohol taxes and police staffing levels on intimate partner homicide in large US cities. *Injury prevention, 16*(2), 90-95.
- ²² Campbell, J. C., Glass, N., Sharps, P. W., Laughon, K., & Bloom, T. (2007). Intimate partner homicide review and implications of research and policy. *Trauma, Violence, & Abuse, 8*(3), 246-269.
- ²³ Boles, S. M., & Miotto, K. (2003). Substance abuse and violence: A review of the literature. *Aggression and Violent Behavior, 8*(2), 155-174.
- ²⁴ Elbogen, E. B., & Johnson, S. C. (2009). The Intricate Link Between Violence and Mental Disorder Results From the National Epidemiologic Survey on Alcohol and Related Conditions. *Archives of General Psychiatry, 66*(2), 152-161.
-

-
- ²⁵ Webster, D. W., & Vernick, J. S. (2009). Keeping firearms from drug and alcohol abusers. *Injury Prevention, 15*(6), 425-427.
- ²⁶ Choe, J., Teplin, L., & Abram, K. (2008). Perpetration of violence, violent victimization, and severe mental illness: balancing public health concerns. *Psychiatric Services, 59*(2), 153-164.
- ²⁷ McNiel, D., Weaver, C., & Hall, S. (2007). Base rates of firearm possession by hospitalized psychiatric patients. *Psychiatric Services, 58*(4), 551-553.
- ²⁸ Brown, G. K., Beck, A. T., Steer, R. A., & Grisham, J. R. (2000). Risk factors for suicide in psychiatric outpatients: a 20-year prospective study. *Journal of consulting and clinical psychology, 68*(3), 371-377.
- ²⁹ Malone, K. M., Haas, G. L., Sweeney, J. A., & Mann, J. J. (1995). Major depression and the risk of attempted suicide. *Journal of Affective Disorders, 34*(3), 173-185.
- ³⁰ Miller, M., Azrael, D., & Hemenway, D. (2004). The epidemiology of case fatality rates for suicide in the northeast. *Annals of emergency medicine, 43*(6), 723-730.
- ³¹ Cook, P. J., Ludwig, J., & Braga, A. A. (2005). Criminal records of homicide offenders. *JAMA: The Journal of the American Medical Association, 294*(5), 598-601.
- ³² Wintemute, G. J., Wright, M. A., Drake, C. M., & Beaumont, J. J. (2001). Subsequent criminal activity among violent misdemeanants who seek to purchase handguns. *JAMA: The Journal of the American Medical Association, 285*(8), 1019-1026.
- ³³ Wintemute, G. J., Wright, M. A., Drake, C. M., & Beaumont, J. J. (2001). Subsequent criminal activity among violent misdemeanants who seek to purchase handguns. *JAMA: The Journal of the American Medical Association, 285*(8), 1019-1026.
- ³⁴ Campbell, J. C., Webster, D., Koziol-McLain, J., Block, C., Campbell, D., Curry, M. A., ... & Laughon, K. (2003). Risk factors for femicide in abusive relationships: Results from a multisite case control study. *American journal of public health, 93*(7), 1089-1097.
- ³⁵ Zeoli, A. M., & Webster, D. W. (2010). Effects of domestic violence policies, alcohol taxes and police staffing levels on intimate partner homicide in large US cities. *Injury prevention, 16*(2), 90-95.
- ³⁶ Campbell, J. C., Glass, N., Sharps, P. W., Laughon, K., & Bloom, T. (2007). Intimate partner homicide review and implications of research and policy. *Trauma, Violence, & Abuse, 8*(3), 246-269.
- ³⁷ Wintemute, G. J. (2011). Association between firearm ownership, firearm-related risk and risk reduction behaviours and alcohol-related risk behaviours. *Injury prevention, 17*(6), 422-427.
- ³⁸ Miller, M., Hemenway, D., & Wechsler, H. (2002). Guns and gun threats at college. *Journal of American College Health, 51*(2), 57-65.
- ³⁹ Miller, M., Hemenway, D., & Wechsler, H. (1999). Guns at college. *Journal of American College Health, 48*(1), 7-12.
- ⁴⁰ Miller, M., Hemenway, D., & Wechsler, H. (2002). Guns and gun threats at college. *Journal of American College Health, 51*(2), 57-65.
- ⁴¹ Rivara, F. P., Mueller, B. A., Somes, G., Mendoza, C. T., Rushforth, N. B., & Kellermann, A. L. (1997). Alcohol and illicit drug abuse and the risk of violent death in the home. *JAMA: The Journal of the American Medical Association, 278*(7), 569-575.
- ⁴² Afifi, T. O., Henriksen, C. A., Asmundson, G. J., & Sareen, J. (2012). Victimization and perpetration of intimate partner violence and substance use disorders in a nationally representative sample. *The Journal of nervous and mental disease, 200*(8), 684-691
- ⁴³ Friedman, A. S. (1999). Substance use/abuse as a predictor to illegal and violent behavior: A review of the relevant literature. *Aggression and Violent Behavior, 3*(4), 339-355.
- ⁴⁴ Auerhahn, K., & Parker, R. N. (1999). Drugs, alcohol, and homicide. *Studying and preventing homicide: Issues and challenges, 97-114*.
- ⁴⁵ Borges, G., Walters, E. E., & Kessler, R. C. (2000). Associations of substance use, abuse, and dependence with subsequent suicidal behavior. *American Journal of Epidemiology, 151*(8), 781-789.
- ⁴⁶ Boles, S. M., & Miotto, K. (2003). Substance abuse and violence: A review of the literature. *Aggression and Violent Behavior, 8*(2), 155-174.
- ⁴⁷ Miller, M. M., & Potter-Efron, R. T. (1990). Aggression and violence associated with substance abuse. *Journal of Chemical Dependency Treatment, 3*(1), 1-35.
- ⁴⁸ Davis, W. M. (1996). Psychopharmacologic violence associated with cocaine abuse: Kindling of a limbic dyscontrol syndrome?. *Progress in Neuro-Psychopharmacology and Biological Psychiatry, 20*(8), 1273-1300.
-

⁴⁹ Friedman, A. S. (1999). Substance use/abuse as a predictor to illegal and violent behavior: A review of the relevant literature. *Aggression and Violent Behavior*, 3(4), 339-355.

⁵⁰ CONN. GEN. STAT. § 29-38C

⁵¹ IND. CODE ANN. § 35-47-14

⁵² *Assembly Bill No. 1014*. (2014). Retrieved from California Legislative Information AB-1014 Gun violence restraining orders: https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201320140AB1014

⁵³ Law Center to Prevent Gun Violence. (2013, December 9). *Wisconsin State Law Summary*. Retrieved October 31, 2014, from <http://smartgunlaws.org/wisconsin-state-law-summary/>

⁵⁴ Wis. Stat. Ann. § 51.20