

Comprehensive Report on Gunshot Victims Presenting at Hospitals in New Mexico

NEW MEXICO DEPARTMENT OF HEALTH

September 29, 2023

Correction appended.

This report has been amended to reflect the following correction. A previous version of this report dated September 28, 2023, incorrectly stated that: Between 2018 and 2020, there was an 85% increase in alcohol dependence and a 475% in non-alcoholic substance dependence for homicides involving a firearm (Figure 10).

This September 29, 2023, report has been updated to accurately reflect that the data on the increase of alcohol dependence for firearm related homicides pertains to the 2019-2020 period. All other referenced data related to this topic spans from 2018-2020. This modification does not alter our overall findings.

Executive Summary: Firearm injury in New Mexico (1999-2023)

In recent years, New Mexico has experienced a troubling surge in firearm injury, raising significant concerns for the state's public health and safety. In response to the Governor's Executive Order 23-130, this report provides a detailed analysis of firearm-related violent deaths and injuries in New Mexico. It encompasses data from various sources, including New Mexico's surveillance systems, state behavioral risk factor surveys, and CDC data. The key findings and conclusions are as follows:

- **Increase in Firearm-Related Deaths**
 - Over the past two decades, New Mexico's firearm death rates rose from seventh highest nationwide in 1999 to third highest in 2021 with the age-adjusted firearm death rate increasing by 87% between 2010 and 2021 (Figure 5).
 - While suicide remains the predominant cause of firearm-related deaths (Appendix 2), a notable surge of 70% in the homicide rate is driving the overall increase in firearm fatalities (Figure 8).
- **Demographic and Geographic Disparities**
 - Men of all age groups were found to be at highest risk for firearm-related injuries and deaths.
 - Racial/ethnic inequities: Non-Hispanic American Indian, Non-Hispanic Blacks, and Hispanics, experienced substantial increases in firearm injury death rates between 2017 and 2021 (Fig 2, Appendix 3 & 4).
 - The Northeast and Metro Health Regions experienced a substantial increase in firearm injury emergency department (ED) visits over the past two years (Northeast: +30%; Metro: +22%) (Figure 11).
- **Increased Severity of Health Outcomes of Firearm Injury**
 - Between 2019 and 2022, there was a 16% increase of patients being admitted to intensive care and a 61% increase in patients being transferred from ED to the operating room (Figure 4)
- **Significant Increase in Alcohol and Substance Use Contributing to Increased Firearms Deaths**
 - Between 2019 and 2020, there was an 89% increase in alcohol dependence for homicides involving firearms. Additionally, from 2018 to 2020, there was a 475% increase non-alcoholic substance dependence for homicides involving a firearm (Figure 10).
 - Between 2018 and 2020, there was an 85% increase in alcohol dependence and a 120% increase in non-alcoholic substance abuse for suicides involving a firearm. (Figure 9).
- **Lack of Safe Storage as Risk Factor for Firearm Injury and Death**
 - In 2022, 37% of New Mexican households have a firearm, 15% of New Mexican households have a loaded firearm, and 8% have a loaded and unlocked firearm (Appendix 9).
 - In 2022, households with a firearm and a child less than 18 years old, 38% have a loaded firearm and 15% have a loaded and unlocked firearm (Appendix 11).
- **Rising Economic Impact of Firearm Injury to New Mexico Healthcare System**
 - The annual estimated overall cost of firearms injuries and deaths in New Mexico is \$6 billion or \$2818 per capita (Appendix 14).
 - Medicaid claims for firearm injuries in New Mexico increased by 85% from \$6.5 million in 2018 to \$12 million in 2022 (Figure 12).
 - Between January 2023 and September 2023, Medicaid expenditures totaling \$5.6 million have been spent on firearm injuries in New Mexico.

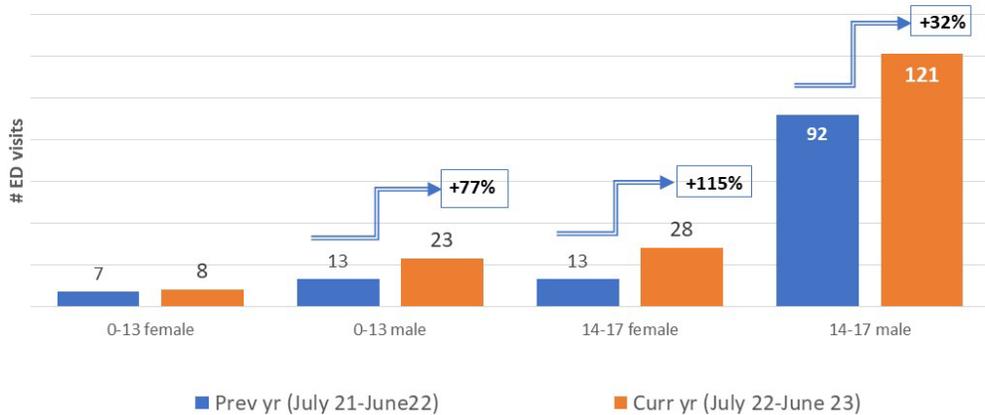
- Medicaid was the primary payer for 76% of gun injury hospital discharges in 2022 (Appendix 15).

In 2021, the Department of Health with support of the CDC, developed a Statewide Strategic Plan for the Prevention of Firearm Injury ([FASTER Report FINAL \(unm.edu\)](https://www.unm.edu/~faster)) which is an important supplement to this document.

Demographic Data on Firearm Injury

- Age:
 - New Mexican residents ages 18-29 and 30-49 have disproportionate risk for firearm injury ED visits (Appendix 6). This trend emphasizes the increased vulnerability of New Mexico's younger residents. Furthermore, there has been a noticeable surge in firearm-related ED visits among children aged 0-17, with particular concern for those aged 14-17 (Figure 1, Appendix 8).

Figure 1: Firearm Injury ED Visits by Age Group and Sex for Current Year (July 2022-June 2023) vs. Previous Year (July 2021-June 2022)



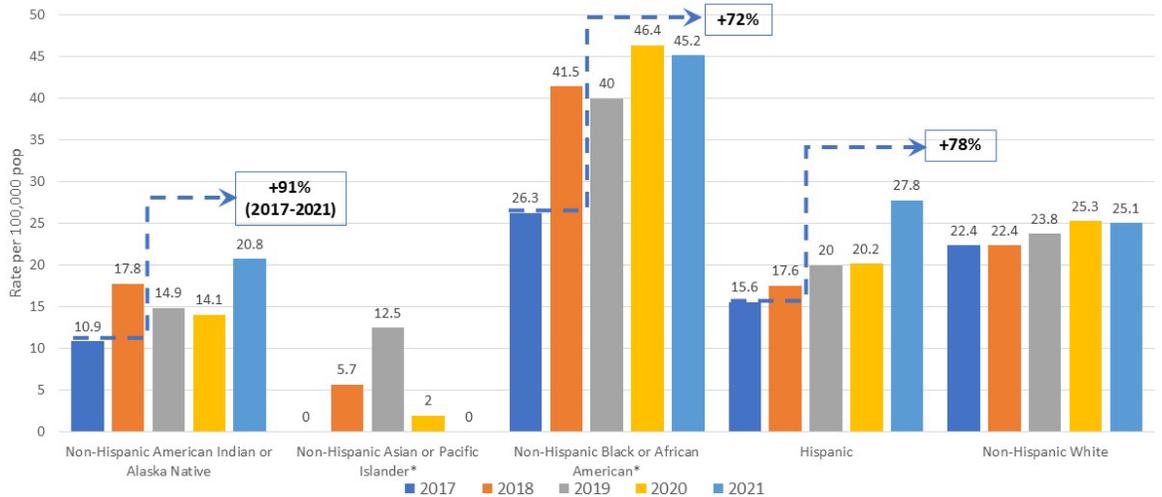
Source: ESSENCE. Data current as of August 22, 2023

- Gender:
 - The data reveals an unsettling gender imbalance with firearm incidents. Men account for a staggering 84% of all firearm injury ED visits. This overwhelming majority underscores the importance of gender-specific interventions, especially targeting young males, to address and prevent firearm-related incidents.

- Race & Ethnicity:

- Three groups have age adjusted firearm death rates that are increasing at a higher rate than the state (+91% for Non-Hispanic American Indian or Alaska Native, +72% for Non-Hispanic Blacks, and +78% for Hispanics vs. +47 for all NM residents) between 2017 and 2021 (Figure 2 and Appendix 3 & 4). In addition, Non-Hispanic Blacks and Hispanics have higher age adjusted firearm death rates (45.2 and 27.8 respectively) compared to all New Mexico residents (27) in 2021.
- During the COVID-19 pandemic, race and ethnicity were key predictors of poor health outcomes, with American Indian, Hispanic/Latino and Black-New Mexicans experiencing disproportionately high rates of infection, hospitalizations, and death from COVID-19. Historical discrimination (including racism) and lack of investments in communities of color including Sovereign Nations, Tribes and Pueblos have contributed to inequity in social factors that impact firearm related incidents such as education, housing, economic development, and opportunity. Additionally, research shows that stress and trauma due to racism, including historical trauma, have been shown to lead to poorer health outcomes and decreased life expectancy. This underscores the importance of addressing health equity and upstream risk factors as part of the framework for addressing and preventing firearm-related incidents (Appendix 19 & 20).

Figure 2: Age Adjusted Firearm Death Rate by NMDOH Race/Ethnicity and Year in New Mexico, 2017-2021



Source: NM IBIS last accessed Jul 11, 2023. Death rates age adjusted to the US 2000 standard population.

*The death rates for Asian or Pacific Islanders in 2017, 2019 & 2021 is statistically unstable and may fluctuate widely over time due to random variation (chance). The death rates for Asian or Pacific Islander in 2018 & 2020 has a relative standard error greater than 50% and does not meet standards for reliability & should not be used to inform decisions

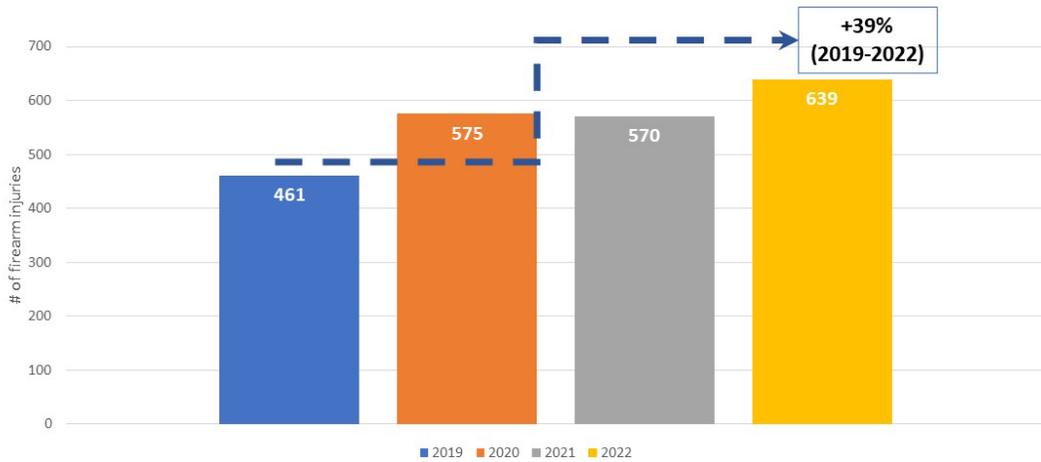
Healthcare Outcomes for Gunshot Victims

Gunshot injuries have wide-ranging and severe implications on individual well-being, often necessitating immediate and extensive medical care. Delving into the healthcare outcomes for gunshot victims reveals a concerning picture:

Severity of Injuries:

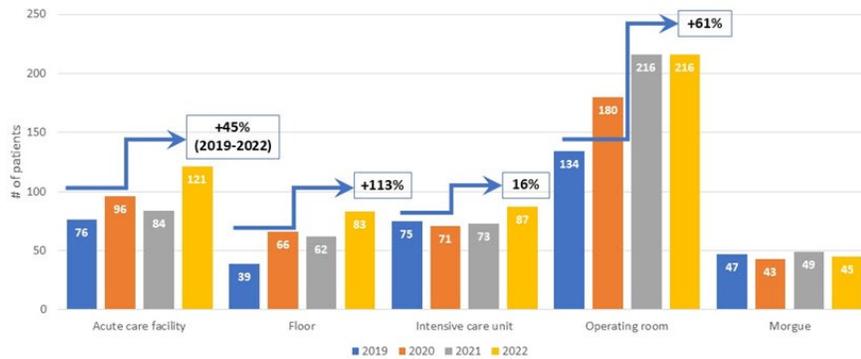
- The number of patients in New Mexico’s trauma centers with firearm injuries has increased by 39% between 2019 and 2022 (Figure 3).
- The number of trauma center patients with firearm injuries being discharged from the ED to the intensive care unit has increased by 16% (Figure 4).

Figure 3: Firearm Injuries in New Mexico’s Trauma Centers (NMTR) by Year, 2019-2022



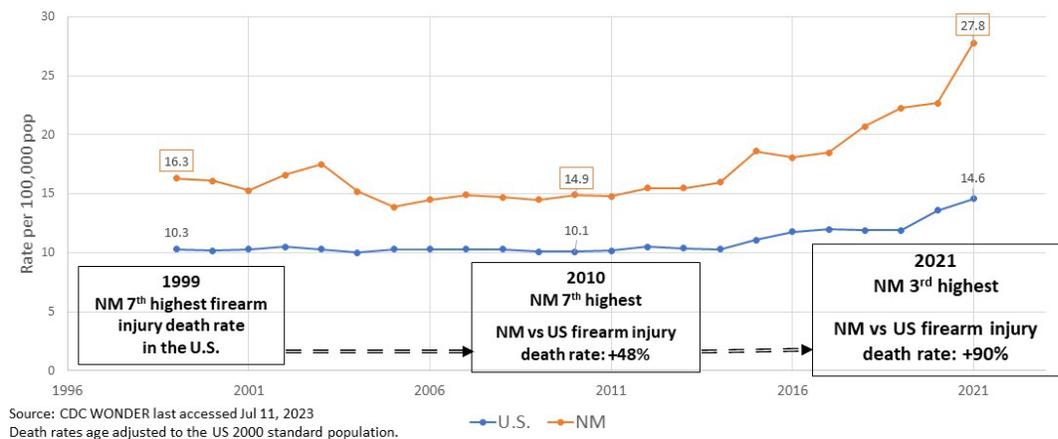
- There has been a concerning 61% increase in gunshot injuries that required surgical interventions (Figure 4).

Figure 4: Most Common ED Discharge Dispositions for Trauma Center Patients with Firearm Injuries, 2019-2022



- New Mexico ranked seventh highest in the U.S. in 1999 and 2011. The rank increased to third highest in the U.S. in 2021 (Figure 5).
- New Mexico has consistently had a larger age adjusted¹ firearm death rate than the rest of the country. Moreover, the age adjusted firearm injury death rate for New Mexico has also increased at a higher rate compared to the U.S. For example, New Mexico's firearm injury death rate was 48% higher than the U.S. in 2010, compared to being 90% higher in 2021.

Figure 5: Age Adjusted Firearm Injury Death Rate in New Mexico and the United States by Year, 1999-2021



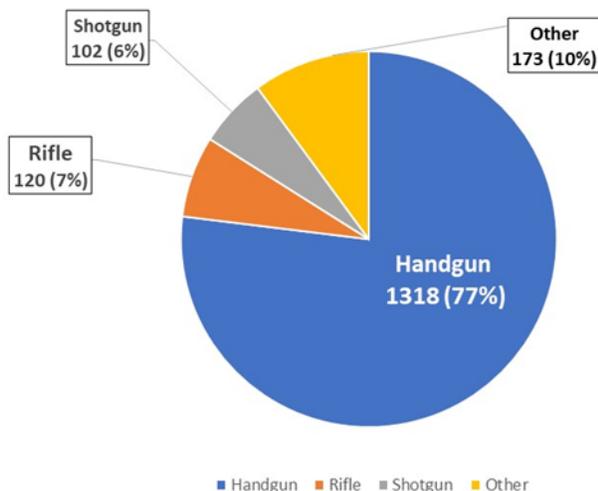
Type of Firearm and Ammunition Involved in Firearm Deaths

The next section will examine the type of firearm and ammunition used in firearm fatalities in New Mexico. The following data was pulled from pooled data in the New Mexico National Violent Death Reporting System (NM VDRS) from 2018 to 2020.

- **Type of Firearm in Deaths:**
 - Handguns were implicated in 77% of violent firearm-related deaths (Figure 6).
 - Rifles and shotguns were involved in 7% and 6% of such incidents, respectively.

¹ Age adjusting firearm injury death rates is a way to make more accurate comparisons between groups with different age distributions (i.e., New Mexico vs. the U.S.). For example, a county in New Mexico having a higher percentage of elderly people may have a higher rate of death or hospitalization than a county with a younger population, merely because the elderly are more likely to die or be hospitalized. (The same distortion can happen when comparing races, genders, or time periods.) In short, age adjustment can account for differences in the age distribution of the U.S. versus NM to allow us to compare rates of firearm injury death across time.

Figure 6: Type of Firearm used in Violent Deaths involving a Firearm, NM VDRS, Pooled* 2018-2020



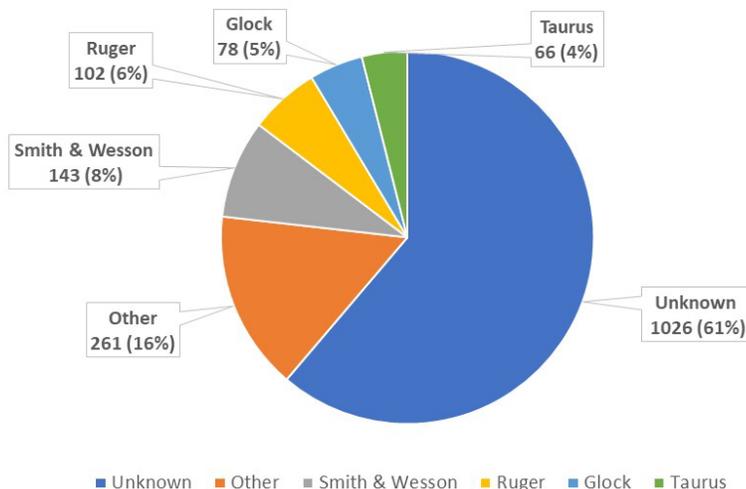
Source: NM VDRS

*The NM VDRS data are “pooled” by combining the violent deaths between 2018 and 2020.

Common Firearm Manufacturers in Deaths:

- An unknown manufacturer was noted in 61% of cases of the New Mexico VDRS pooled data from 2018 to 2020 (Figure 7).
- Smith & Wesson firearms were linked to 8% of violent deaths, followed by Ruger (6%), Glocks (5%), and Taurus (4%).

Figure 7: Most Common Firearm Manufacturers for Firearms used in Violent Deaths involving a Firearm, NM VDRS, Pooled 2018-2020



Source: NM VDRS

Ammunition Calibers in Violent Deaths:

- The 9-millimeter (mm) caliber was the most prevalent, associated with 25% of violent firearm deaths.

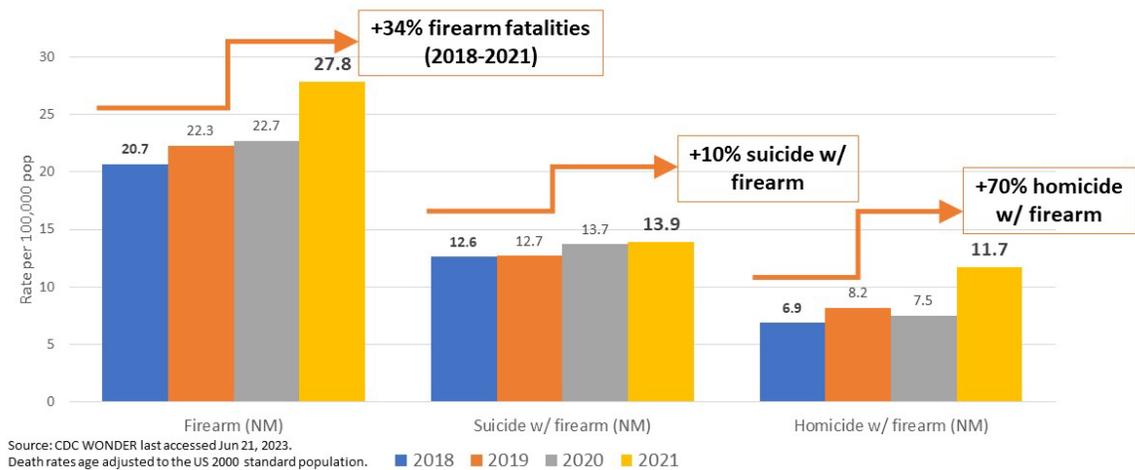
- Other notable calibers included .38 (10%), .22 (9%), .45 (8%), and .40 (7%) (Appendix 20).
- **Contextual Insight: The Oakland Study**
 - A comprehensive study from Oakland, California², conducted on 4593 firearms recovered between 2017 and 2021, provides crucial insights:
 - There was a marked increase in untraceable, privately manufactured firearms during and after the COVID-19 pandemic.
 - Firearms recently purchased from licensed dealers also saw a notable surge.
 - Notably, these privately manufactured firearms displayed a higher correlation with violent crimes.

The findings of this study highlight the urgent need for regulatory measures on privately produced firearms. It also emphasizes the importance of monitoring the sale and diversion of weapons from legitimate trade channels. Firearm details, such as brand and caliber, offer a more granular perspective on firearm injury. Moreover, studies from regions like Oakland, California underscore broader trends and challenges.

Circumstances Leading to Death

The most common type of death involving a firearm in New Mexico between 2018-2021 was suicide (Figure 8).

Figure 8: Age Adjusted Death Rate for Firearm Fatalities, Suicide with a Firearm, & Homicide with a Firearm in New Mexico, 2018-2021



² Braga AA, Barao LM, Wintemute GJ, Valle S, Valente J. Privately manufactured firearms, newly purchased firearms, and the rise of urban firearm injury. *Prev Med.* 2022;165(Pt A):107231. doi: 10.1016/j.ypmed.2022.107231

The circumstances precipitating firearm-related injuries in New Mexico are intrinsically tied to diverse societal challenges:

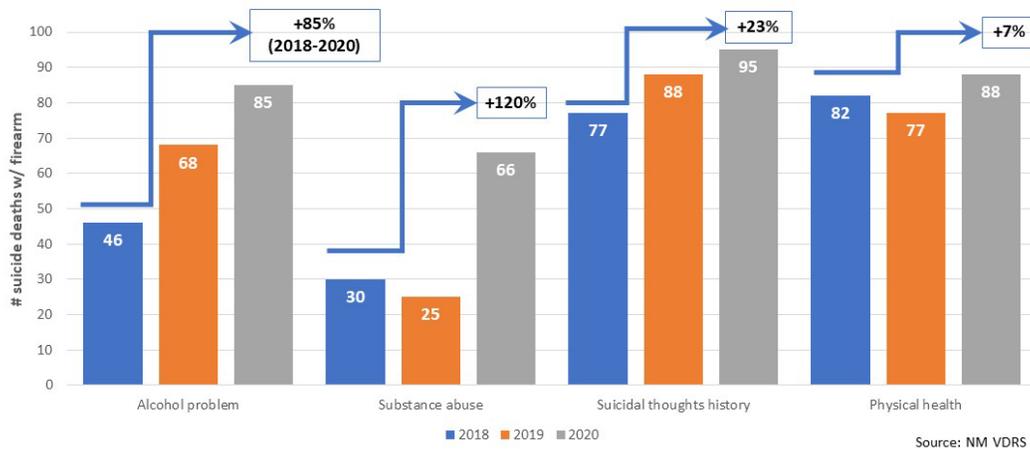
- **Contributing Factors:**

Between 2018 and 2020, distinct societal issues emerged as key catalysts for firearm incidents:

- **For Firearm-Related Suicides**

- Alcohol dependence or issues rose by 85% (Figure 9).

Figure 9: Suicide Deaths involving a Firearm by Circumstance and Year in NM VDRS, 2018-2020

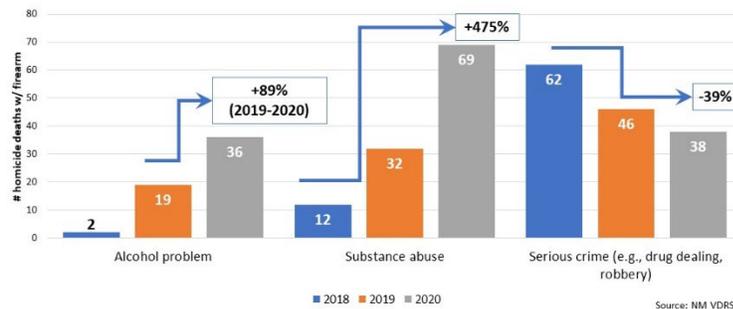


- Substance abuse problems increased by 120%.

- **For Firearm-Related Homicides:**

- Alcohol dependence or problems surged by 89% (Figure 10).
- Substance abuse issues skyrocketed, with a 475% increase.

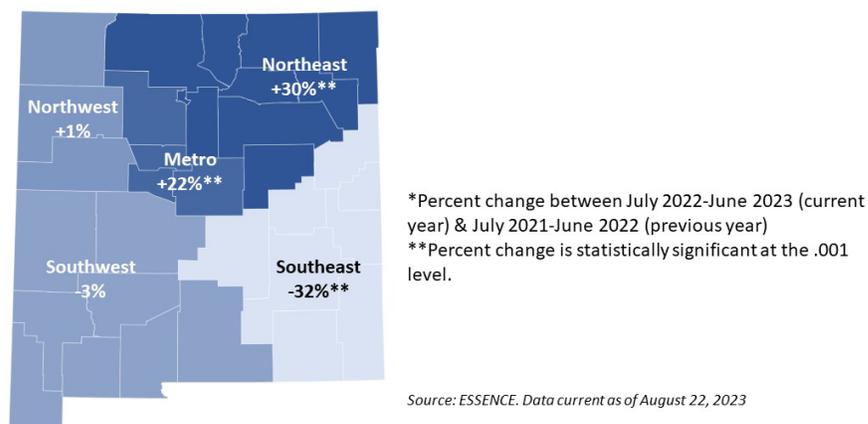
Figure 10: Homicide Deaths involving a Firearm by Circumstance and Year in NM VDRS, 2018-2020



- **Trends in Firearm Injury ED Visits by Location:**

- Northeast Health Region saw a 30% increase (Figure 11).
- Metro Health Region experienced a 22% rise.
- Southeast Health Region reported a 32% decline.
- Southwest Health Region was relatively unchanged with a slight 3% decrease.
- Northwest Health Region remained consistent, showing a minor 1% increase.

Figure 11: Percent Change* in the Number of Firearm Injury ED Visits by NM Health Region, July 2021 - June 2023



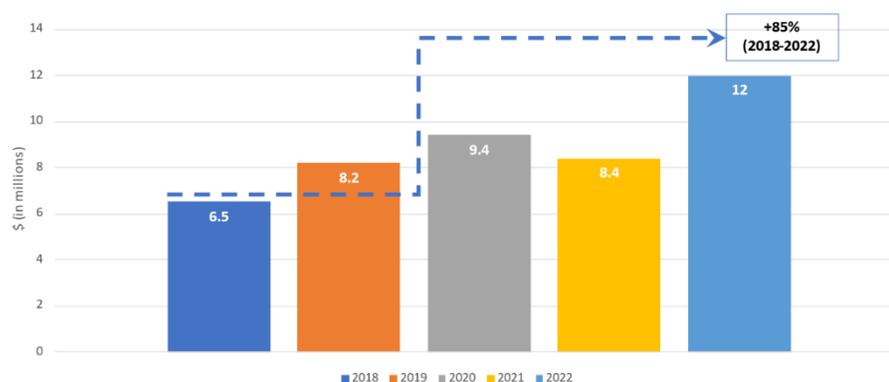
Impact on New Mexico’s Healthcare System

The repercussions of increasing firearm-related incidents extend far beyond the immediate victims, permeating and placing undue stress on New Mexico’s healthcare system:

- **Economic Implications:**

- Medicaid has shouldered 76% of the cost of firearm injuries for 76% of gun injury hospital discharges in 2022.
- The Medicaid fiscal expenditures of firearm injuries have seen an alarming escalation from \$6.5 million in 2018 to \$12 million in 2022, which represents an increase in 85% (Figure 12).
- The total expenditure, encompassing medical expenses and value of statistical life, for firearm fatalities in New Mexico amounted to \$6 billion (Appendix 14).

Figure 12: Medicaid Expenditures for Firearm Injuries by Year, 2018-2022



Source: Medicaid Management Information System (MMIS). Data current as of August 22, 2023

The Prevalence of Unsafe Storage of Firearms in New Mexico

BRFSS survey data provides additional information on unsafe storage of firearms, which is a key risk factor for firearm injury in households with children (age 18 or under). More specifically, several key findings from the BRFSS include:

- 37% of New Mexican households have a firearm, 15% of New Mexican households have a loaded firearm, and 8% have a loaded and unlocked firearm (Appendix 9).
- In households with a firearm, 41% have a loaded firearm, 21% have a loaded and unlocked firearm, and 23% with a loaded and unlocked firearm also have a child less than 18 in the household (Appendix 10).
- In households with a firearm and a child less than 18 years old, 38% have a loaded firearm and 15% have a loaded and unlocked firearm (Appendix 11).

The 2023 New Mexico-YRRS was used to examine youth gun carrying and having a firearm in the household, which are key risk factors for firearm injury among youth (Appendix 12). Key findings include:

- 6% of high school students carried a gun in the past year (not for hunting or sport)
- 44% of high school students lived in a home that had a gun.

Appendix 1: Overview of Data Sources and Collection Approach

- **This report draws from a range of data sources:**
 - NMVDRS: New Mexico’s Violent Death Reporting System.
 - NMTR: New Mexico Trauma Registry.
 - CDC WISQARS: Web Based Injury Statistics Query and Reporting System.
 - CDC WONDER: Center for Disease Control Wide-Ranging Online Data for Epidemiological Research.
 - NM-IBIS: New Mexico Indicator Based Information System.
 - ESSENCE: Electronic Surveillance System for the Early Notification of Community Based Epidemics.
 - BRFSS: Behavioral Risk Factor Surveillance System.
 - NM-YRRS: New Mexico Risk and Resilience Survey.
 - NM-HIDD: New Mexico Hospital Inpatient Discharge Data.
- **Data Sources for Firearm Deaths and Injuries:**
 - NMVDRS is New Mexico’s surveillance system for violent deaths that:
 - combines data from multiple sources (including the police, medical examiner, and toxicology) on circumstances of violent deaths.
 - provides insights to prevent violent deaths by documenting the “who, when, where, & how” of violent deaths to gain insights into “why” they occur.
 - The NM VDRS collects about 600 variables on the context of violent deaths including mental health problems & treatment, toxicology results, life stressors (e.g., recent problems with a job, finances, or physical health), characteristics of incidents (e.g., type of weapon used, characteristics of suspects, location of violent death).
 - New Mexico’s Trauma Registry (NMTR) assesses the most severe incidents of firearm injury in the state from 2019 to 2022.
 - NMTR collects information about demographic characteristics, treatments, and clinical outcomes to monitor and evaluate the many aspects of the trauma system. These data can be used to help improve patient care in the future.
 - CDC WONDER and NM-IBIS: Useful for observing age-adjusted death rates trends for firearm fatalities.
 - ESSENCE: New Mexico’s syndromic surveillance system, provides a near real-time overview of Emergency Department (ED) visits, encompassing 97% of NM ED visits. It’s instrumental in tracking trends in firearm ED visits between 2018-2022 and more recent data spanning July 2022-June 2023. Although pivotal for early detection of health emergencies, the data has certain limitations. Notably, it doesn’t cover all care facilities, potentially underestimating the number of firearm-related injuries. The data is also preliminary and might vary due to factors like seasonal population changes and hospital reporting practices over time.
 - New Mexico-YRRS: is a tool to assess the health risk behaviors and resiliency (protective) factors of New Mexico high school and middle school students. The NM-YRRS is part of the national CDC Youth Risk Behavior Surveillance System (YRBSS). The survey includes data on youth gun carrying and firearm in the household of high school students.
 - Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing collaboration between states and the CDC. This annual phone-based survey collects data on

health-related risk factors, outcomes, and healthcare access. It samples noninstitutionalized adults in New Mexico, producing population estimates of health-related issues in the state. The BRFSS also captures data on safe firearm storage habits of New Mexico adults aged 18 and above.

Summary of Key Findings by Data Source

| Data Source | Time Frame | Overall Trend in Firearm Injury |
|--|---|--|
| NMVDRS (circumstances of violent deaths) | 2018-2020 | (+) over time |
| New Mexico Trauma Registry (NMTR) | 2018-2022 | (+) over time |
| CDC WONDER (firearm deaths) | 1999-2021 | (+) over time |
| NM-IBIS (firearm deaths) | 2017-2021 | (+) over time |
| ESSENCE (firearm injury ED visits) | 2018-2022 current year (Jul22-Jun23) current year (Jul22-Jun23) vs previous year (Jul21-Jun22) | (+) over time (all ages) (+) over time (child age 0-17) |
| BRFSS (survey of NM adults 18+) | 2020-2022 | (+) over time* |
| NM-YRRS (survey of NM high school youth in grade 9-12) | 2017, 2019, & 2021 | (-) over time** |

*One exception is that the % of firearm in the household decreased by 5% between 2020 & 2021 (Figure 11).

**Youth gun carrying and gun in the household decreased between 2017 & 2021 (Figure 17).

- ### Limitations

- Readers are encouraged to approach this report with an open mind, understanding the complexities of the issue, and recognizing the collaborative efforts aimed at fostering a safer New Mexico.
 - While ESSENCE and HIDD data offer valuable insights, these data sources also have several limitations including:
 - a systematic undercount of firearm injury since not all individuals who are injured with a firearm go to a hospital.
 - ESSENCE does not include data from Veteran’s Administration (VA) hospitals, which is problematic since veterans are more likely to own a firearm and represent an at-risk group for firearm injury and suicide involving a firearm.
 - ESSENCE does not include data from Indian Health Services, which will result in a systematic undercount of incidents of firearm injury for American Indians.
 - growing evidence that hospitals included in ESSENCE and HIDD are underestimating firearm injury among American Indians, which may be due to several factors including:
 - patients who are reluctant to disclose their race due to a mistrust of non-IHS hospitals.
 - inconsistent or inaccurate measurement of race/ethnicity in hospitals. More specifically, it is unclear who determines patient

race/ethnicity (i.e., at check in, nurse, doctor, self-report by patient) or how hospitals determine the race/ethnicity of patients, which may be based on a cursory assessment of superficial characteristics.

Appendix 2: Most Common Types of Violent Deaths involving a firearm in New Mexico, 2020 (n=444)

Appendix 3: Age Adjusted Suicide Firearm Death Rate by NMDOH Race/Ethnicity and Year in New Mexico, 2017-2021

Appendix 4: Age Adjusted Homicide Firearm Death Rate by NMDOH Race/Ethnicity and Year in New Mexico, 2017-2021

Appendix 5: Discharge Disposition Firearm Injuries New Mexico Trauma Centers, 2021-2022

Appendix 6: Percent Firearm Injury ED Visits by Age Group, Current Year (July 2022-June 2023)

Appendix 7: Firearm Injury ED Visits (all ages) in New Mexico by Year, 2018-2022

Appendix 8: Child (0-17) Firearm Injury ED Visits by Age Group, 2018-2022

Appendix 9: Safe Storage of Firearm in all New Mexico Households in the BRFSS, 2022

Appendix 10: Safe Storage of Firearms in Households with a Firearm in the BRFSS in New Mexico, 2022

Appendix 11: Safe Storage of Firearms in Households with a Firearm and a Child (less than 18 years old) in the BRFSS, 2022

Appendix 12: Gun Carrying and Firearm in the Household of New Mexican High School Students in the 2023 New Mexico-YRRS

Appendix 13: Alcohol and Drug Use for Violent Deaths in the New Mexico VDRS, 2002

Appendix 14: The Economic Cost of Firearm Fatalities in New Mexico, 2021

Appendix 15: Primary Payer Category Total and Gun Shot Injury Hospital Discharges, New Mexico Residents CY 2022

Appendix 16: Child (age 0-17) Firearm Injury ED Visits by Age Group and Year, 2018-2022

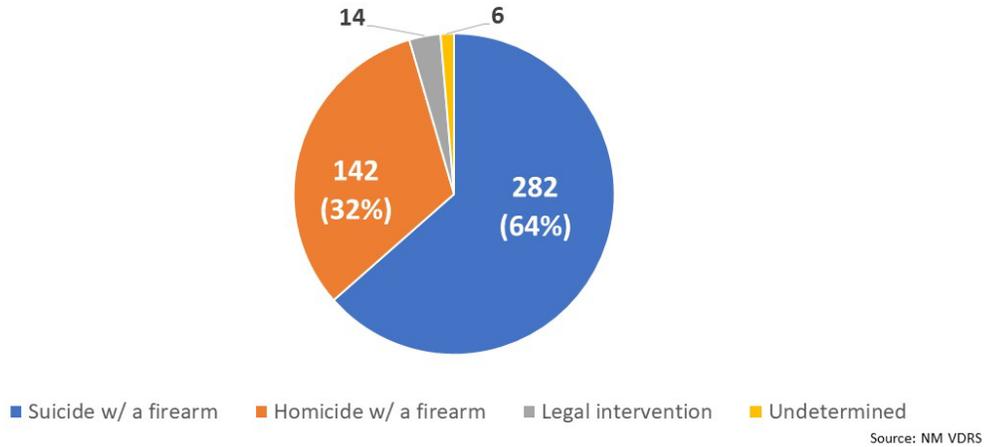
Appendix 17: Rate of Firearm Injury ED Visits (all ages) by County, Current Year (July 2022-June 2023)

Appendix 18: Health Impact Pyramid

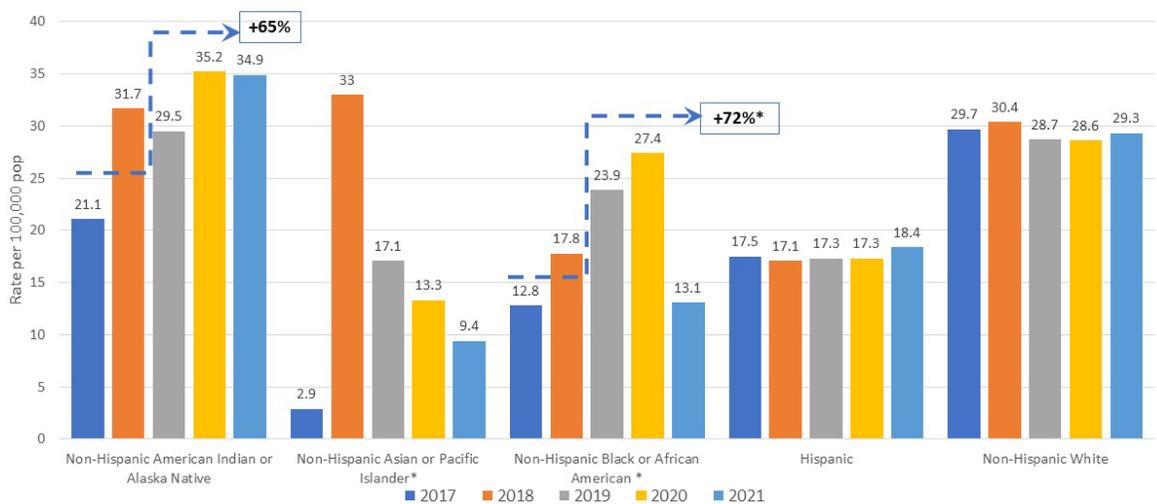
Appendix 19: The Spectrum of Prevention

Appendix 20: Most Common Calibers of Ammunition used in Violent Deaths involving a Firearm, New Mexico VDRS, Pooled 2018-2020

Appendix 2: Most Common Types of Violent Deaths involving a Firearm in New Mexico, 2020 (n=444)



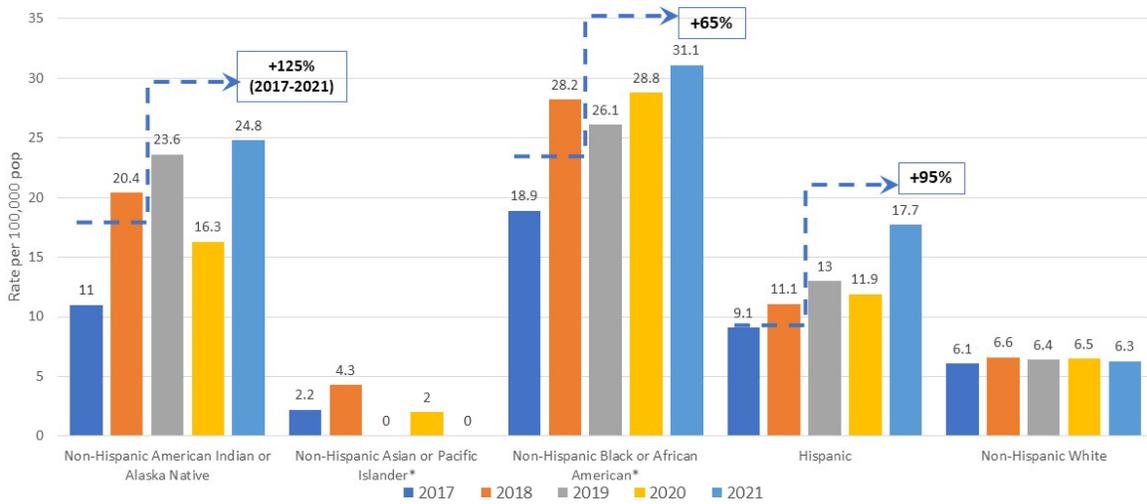
Appendix 3: Age Adjusted Suicide Firearm Death Rate by NMDOH Race/Ethnicity and Year in New Mexico, 2017-2021



Source: NM IBIS last accessed Sept 25, 2023. Death rates age adjusted to the US 2000 standard population.

*The death rates for Asian or Pacific Islanders in 2019 & 2020 & Non-Hispanic Blacks in 2017, 2018, 2019, & 2021 are statistically unstable, may fluctuate widely over time due to random variation (chance), and should be interpreted with caution. The death rates for Asian or Pacific Islander in 2017 & 2021 has a relative standard error greater than 50% and does not meet standards for reliability & should not be used to inform decisions

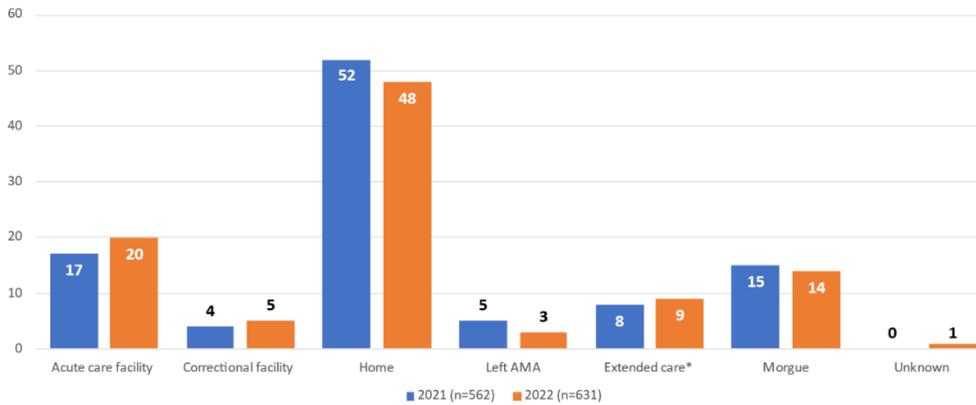
Appendix 4: Age Adjusted Homicide Firearm Death Rate by NMDOH Race/Ethnicity and Year in New Mexico, 2017-2021



Source: NM IBIS last accessed Jul 11, 2023. Death rates age adjusted to the US 2000 standard population.

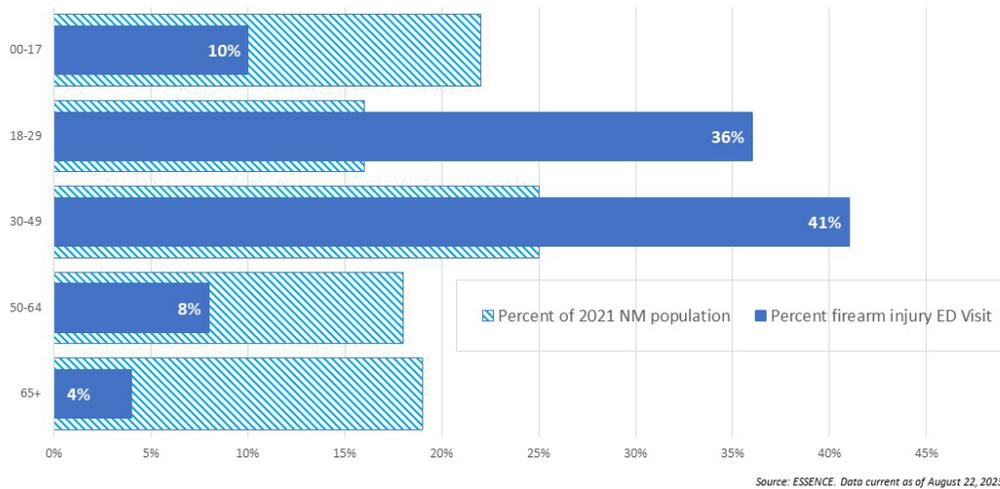
*The death rates for Asian or Pacific Islanders in 2019 & 2021 and for Blacks in 2017 are statistically unstable, may fluctuate widely over time due to random variation (chance), and should be interpreted with caution. The death rates for Asian or Pacific Islander in 2017, 2018, & 2020 have a relative standard error greater than 50% and does not meet standards for reliability & should not be used to inform decisions

Appendix 5: Discharge Disposition Firearm Injuries in NM Trauma Centers, 2021-2022



Source: NM Trauma Registry

Appendix 6: Percent Firearm Injury ED Visits by Age Group, Current Year (July 2022- June 2023)

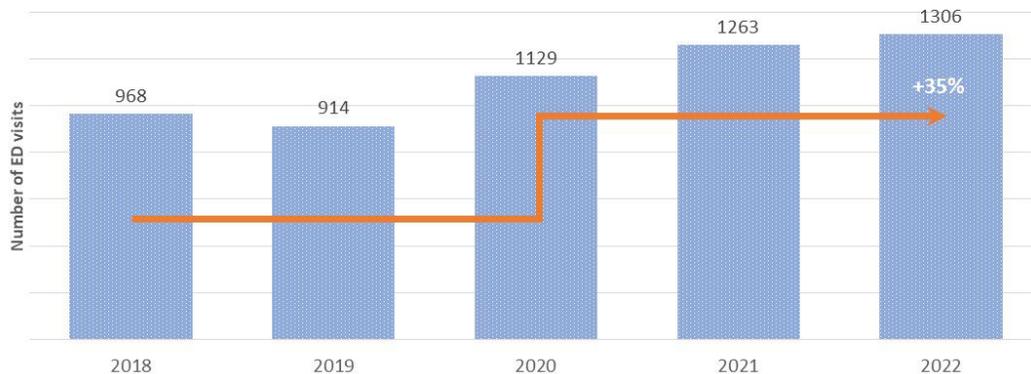


Appendix 6 compares the percent firearm injury ED visits in the current year (July 2022 – June 2023) (from ESSENCE) with the percent in the 2021 New Mexico population (from New Mexico-IBIS) to identify age groups that are at increased risk for firearm injury ED visits. The “inner” solid blue bars are the percent firearm injury ED visits, and the “outer” striped, blue bars are the percent in the New Mexico population.

The figure shows that New Mexican residents age 18-29 are at increased risk for firearm injury because they account for 36% of firearm injury ED visits (solid blue “inner” bar) but they make up only 16% of the population (“outer” bar). Similarly, the figure shows that New Mexican residents age 30-49 are also at increased risk since they are 25% of the population (“outer” bar), but account for 41% of firearm injury ED visits (inner bar).

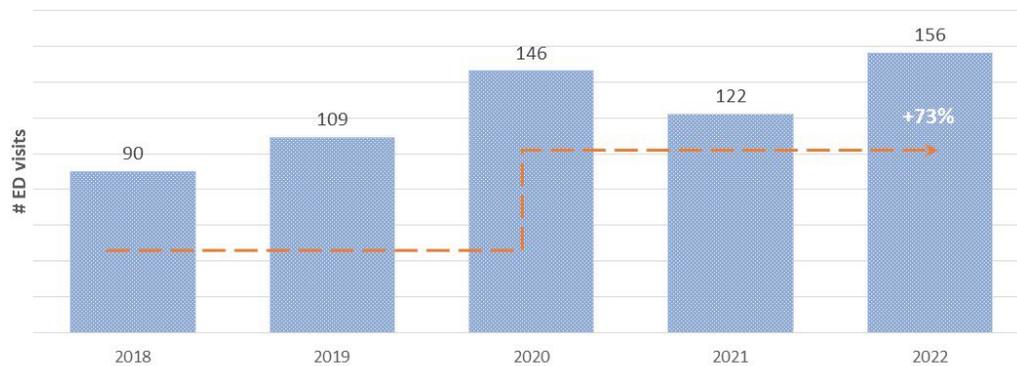
In contrast, youth age 0-17 have lower proportional risk for firearm injury (relative to their proportion in the population) since they are 19% of the population (“outer” bar), but only account for 10% of firearm injury ED visits. Similarly, residents age 50-64 and 65+ have lower proportional risk since they are 18% and 19% of the population but were only 8% and 4% of firearm injury ED visits respectively.

Appendix 7: Firearm Injury ED Visits (all ages) in NM by Year, 2018-2022



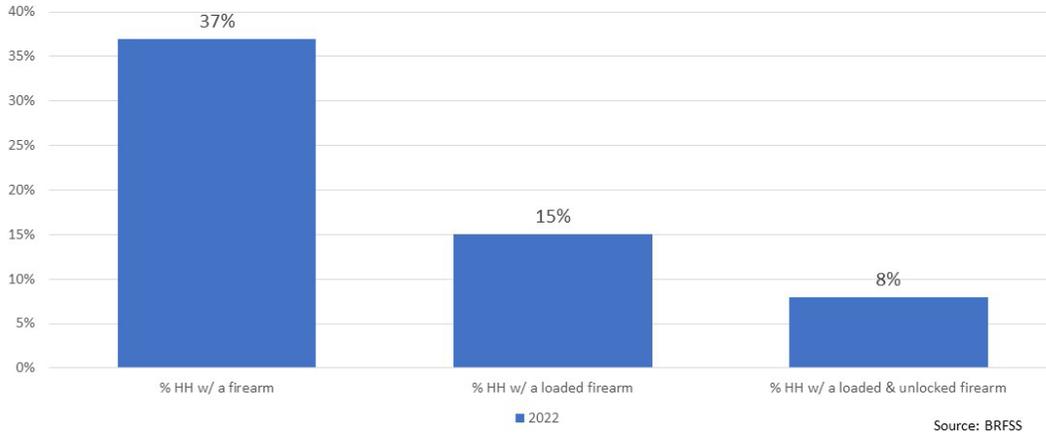
Source: ESSENCE. Data current as of August 22, 2023

Appendix 8: Child (age 0-17) Firearm Injury ED Visits by Year, 2018-2022

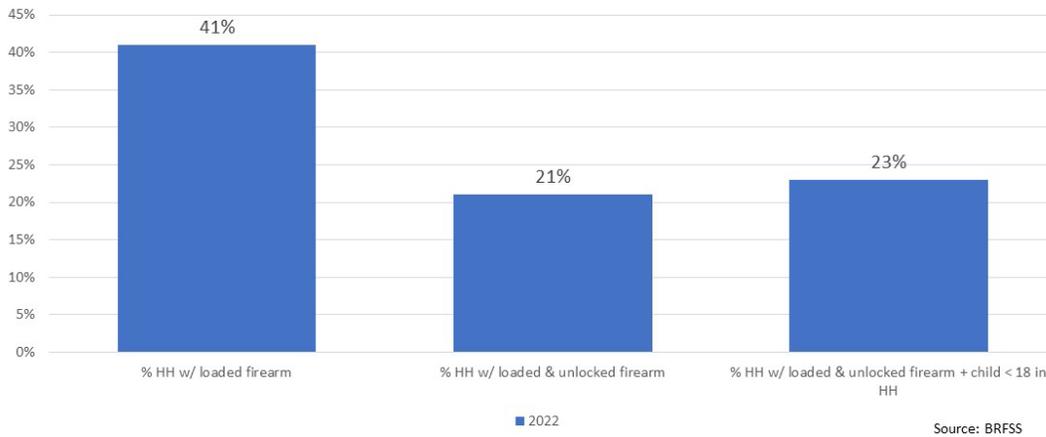


Source: ESSENCE. Data current as of August 22, 2023

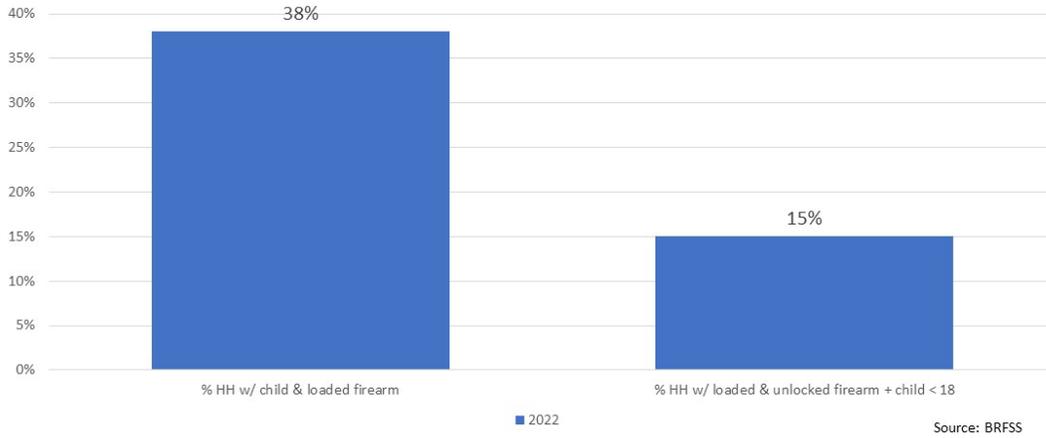
Appendix 9: Safe Storage of Firearms in all NM Households in the BRFSS in NM, 2022



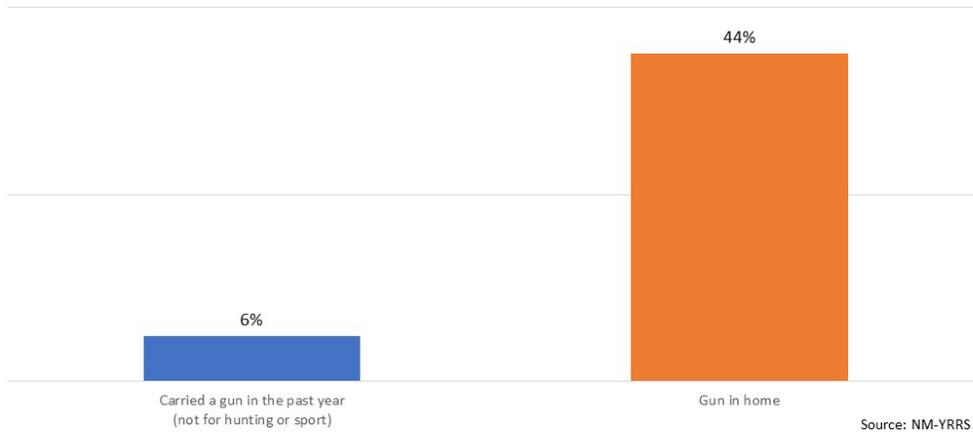
Appendix 10: Safe Storage of Firearms in Households with a Firearm in the BRFSS in NM, 2022



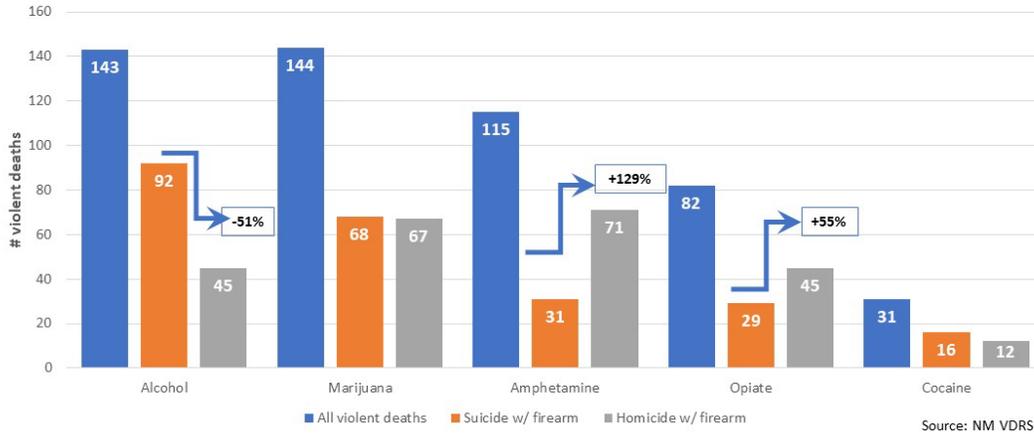
Appendix 11: Safe Storage of Firearms in Households with a Firearm and a Child (less than 18 years old) in the BRFSS in NM, 2022



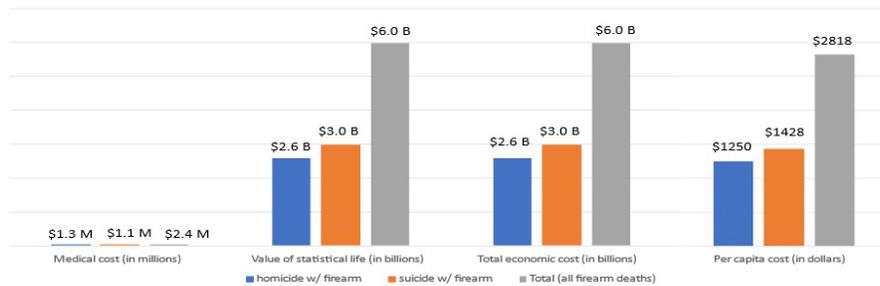
Appendix 12: Gun Carrying and Firearm In the Household for New Mexican High School Students in the 2023 NM-YRRS



Appendix 13: Alcohol and Drug Use for Victims of Violent Deaths in the NM VDRS, 2020

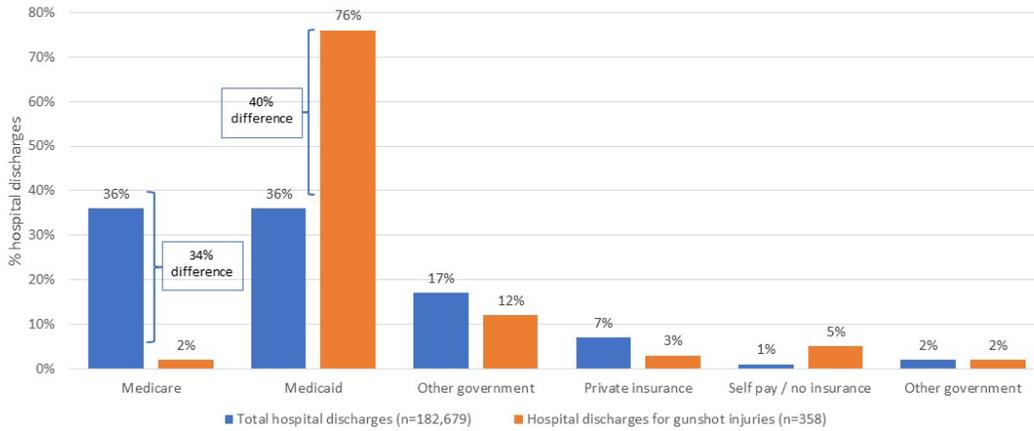


Appendix 14: The Economic Cost of Firearm Fatalities in New Mexico, 2021



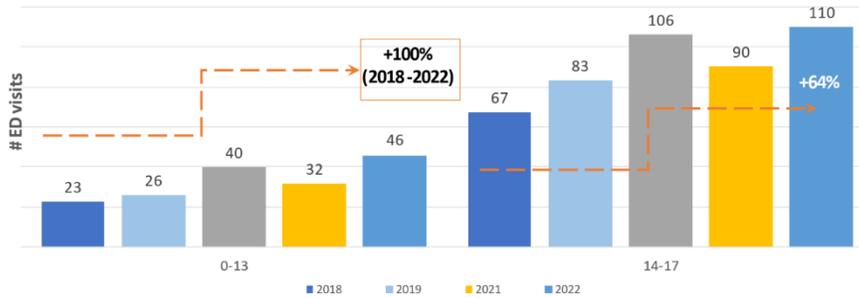
Source: CDC WISQARS. Data current as of August 22, 2023

Appendix 15: Primary Payer Category Total and Gunshot Injury Hospital Discharges for NM Residents, 2022



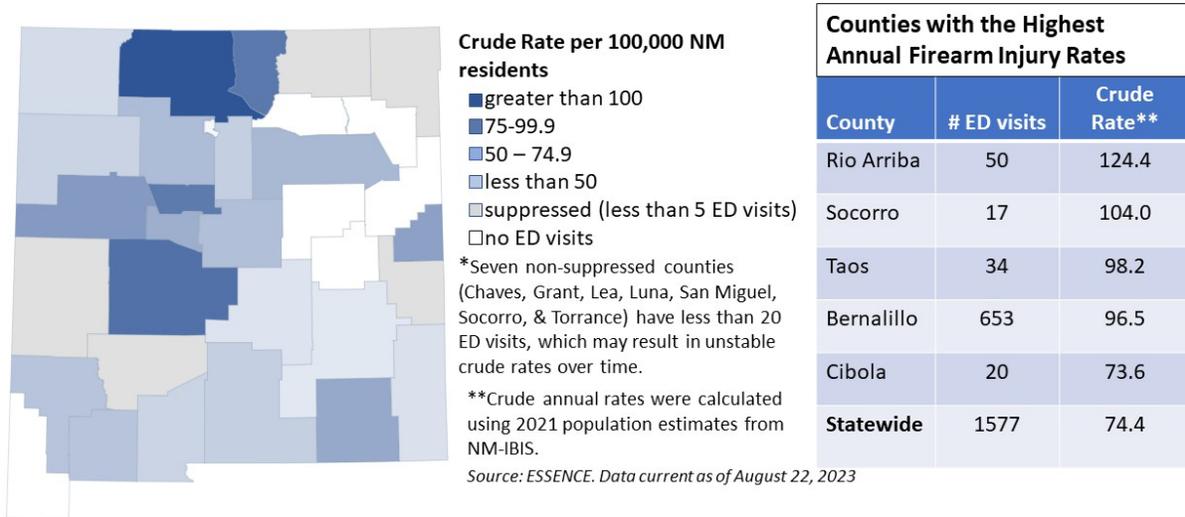
Source: Hospital Inpatient Discharge Data (HIDD). Data current as of August 22, 2023

Appendix 16: Child (age 0-17) Firearm Injury ED Visits by Age Group and Year, 2018-2022

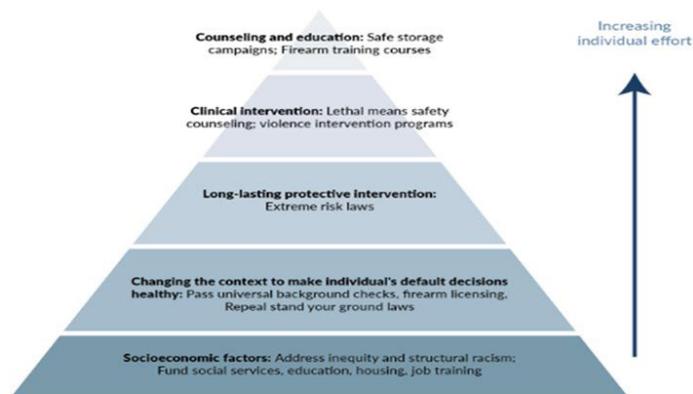


Source: ESSENCE. Data current as of August 22, 2023

Appendix 17: Rate of Firearm Injury ED Visits (all ages) by County,* Current Year (July 2022– June 2023)



Appendix 18: Health Impact Pyramid



Appendix 19: The Prevention Institute's Spectrum of Prevention Framework



Appendix 20: Most Common Calibers of Ammunition used in Violent Deaths involving a Firearm, NM VDRS, Pooled 2018-2020

