The consequences of courage: the US Surgeon General, the National Rifle Association (NRA) and the Trump regime

Frank Houghton

“Courage is not a man with a gun in his hands”—Atticus Finch in To Kill a Mockingbird.

Amidst the tumult of US President Trump’s first one hundred days in office, many people may have overlooked his appointment of a new Acting Surgeon General. The new appointment could be seen as progressive from at least three perspectives. Firstly, the new Surgeon General is a woman, and just the fourth woman to hold this position. Secondly, she is African American. This prestigious position has formerly been held by just two other African American women, and one African American man. Third, she is the first non-physician to be appointed to the position (she does hold a PhD). One former incumbent in the position was both a nurse and a physician.

It must be acknowledged that the appointment of Rear Admiral Sylvia Trent-Adams as Acting Surgeon General does not fit the usual portrayal of the US President as a ‘racist-misogynist’. However, his ‘progressive’ appointment may in fact be a smoke-screen for another more sinister agenda.

It should be noted that the appointment of the prior incumbent, Dr Vivek Murthy, was held up for over a year by opposition led by the powerful US lobby group the National Rifle Association (NRA). The NRA was an influential and vocal supporter of Donald Trump’s campaign for the Presidency, with over five million members. The reason for the NRA’s opposition to Murthy’s appointment was simply because he openly discussed gun violence as a public health issue. The NRA is well known for its rabid opposition to almost any proposal that they see as infringing on the second amendment to the constitution right to bear firearms.

Many suspect that Murthy’s recent removal from the post of Surgeon General was purely in response to his questioning of the issue of access to firearms. Politics, healthcare and firearms have long been highly contentious in the US. Funding for gun control research at the Centers for Disease Control & Prevention (CDC) ceased in 1997 when an amendment was added to an operations bill in Congress, which barred the CDC from conducting research that would ‘advocate or promote gun control’. Known as the Dickie Amendment, after its instigator Republican Jay Dickie, its influence continues today.

Although the National Institutes of Health (NIH) continued to fund gun control research, it was noted that funding to the CDC was cut by exactly the amount that it had spent on gun control research in the year before the 1997 ban. It appears as though this action effectively stopped all CDC research on firearms as it feared a loss of further funding. In 2013, 17 years later, (then) President Obama ordered the CDC to resume gun control research via Executive Order. Interestingly, even this action failed to encourage substantive research on this crucial issue.

At a recent NRA convention, Trump addressed the audience stating “You have a true friend and champion in the White House”. He continued to state that...
the “eight-year assault on your second amendment freedoms has come to a crashing end”.\textsuperscript{13} In evaluating this statement, it is prudent to explore something of the history of firearms and public health in the US over the last eight years to understand why attempts to curtail firearm ownership might have been mooted.

Table 1 details a composite listing of mass shootings that have occurred in the US, gathered from media reviews of the issue since 2009.\textsuperscript{14–15} While every life lost to preventable firearm deaths is a tragedy, this list includes particularly emotive incidents, such as the 14 December 2012 Sandy Hook Elementary School shooting in Newtown Connecticut, in which 20 young children (ages six and seven) were killed alongside a number of adults.

\begin{table}
\centering
\begin{tabular}{|c|c|c|}
\hline
\textbf{Date} & \textbf{Location} & \textbf{Casualties} \\
\hline
10 March 2009 & Kinston and Samson, Alabama & 10 killed, followed by suicide \\
\hline
3 April 2009 & Binghamton, New York & 13 killed, 4 injured followed by suicide \\
\hline
5 November 2009 & Fort Hood, Texas & 13 killed, 32 injured \\
\hline
19 January 2010 & Appomattox, Virginia & 8 killed \\
\hline
12 February 2010 & Huntsville, Alabama & 3 killed, 3 injured \\
\hline
3 August 2010 & Manchester, Connecticut & 8 killed, 2 injured followed by suicide \\
\hline
8 January 2011 & Tucson, Arizona & 6 killed, 11 injured \\
\hline
12 October 2011 & Seal Beach, California & 8 killed, 1 injured \\
\hline
2 April 2012 & Oakland, California & 7 killed, 3 injured \\
\hline
20 July 2012 & Aurora, Colorado & 12 killed, 58 injured \\
\hline
5 August 2012 & Oak Creek, Wisconsin & 6 killed, 3 injured \\
\hline
28 September 2012 & Minneapolis, Minnesota & 5 killed, 2 injured followed by suicide \\
\hline
21 October 2012 & Brookfield, Wisconsin & 3 dead, 4 injured followed by suicide \\
\hline
14 December 2012 & Newtown, Connecticut & 27 dead, 1 injured followed by suicide \\
\hline
7 June 2013 & Santa Monica, California & 5 killed, attacker then shot and killed by police \\
\hline
16 September 2013 & Washington, DC & 12 killed, 3 injured, attacker then shot and killed by authorities \\
\hline
2 April 2014 & Fort Hood, Texas & 3 killed, 16 injured, plus attacker found dead at scene \\
\hline
23 May 2014 & Isla Vista, California & 6 killed, 7 injured, followed by suicide \\
\hline
18 June 2015 & Charleston, South Carolina & 9 killed, 3 injured \\
\hline
16 July 2015 & Chattanooga, Tennessee & 4 killed, 3 wounded, attacker killed by authorities \\
\hline
1 October 2015 & Roseburg, Oregon & 9 killed, 9 injured followed by suicide \\
\hline
29 November 2015 & Colorado Springs, Colorado & 3 dead, 9 injured \\
\hline
2 December 2015 & San Bernardino, California & 14 killed, 22 injured, 2 attackers then shot and killed by authorities \\
\hline
12 June 2016 & Orlando, Florida & 49 killed, 53 injured, attacker then shot and killed by authorities \\
\hline
\end{tabular}
\caption{Notable mass shootings in the US, 2009–2017.}
\end{table}
The contents of Table 1 alone would justify concerns over gun ownership in the US. However, it must be noted that these events are just a small fraction of the number of mass shootings in the US. There were 372 mass shootings in the US in 2015 alone, killing 475 people and wounding 1,870 (a mass shooting is defined as a single shooting incident, which kills or injures four or more people, including the assailant). There were also 64 school shootings in the US in 2015.

In 2015, 13,286 people were killed by firearms in the US, while another 26,819 were injured. This is almost 37 shot and killed per day. These figures exclude suicide. The figures for suicide are even more dramatic. According to the Centers for Disease Control and Prevention in 2014, almost exactly one in two suicides in the US result from firearms. The figure for suicides involving firearms in 2014 was 21,334 out of a total of 42,773.

The US is well known internationally for its gun culture. However, the actual extent of this obsession is staggering. It is estimated that the US population owns approximately 300,000,000 guns. That is an average of almost one for every man, woman and child in the country. Arguments in support of firearms in the US based on a ‘shooting, hunting and fishing’ culture cannot defend mass ownership of weapons such as semi-automatic assault rifles, as used to deadly effect in the attack on an Orlando nightclub in June 2016, which left 49 victims dead.

Other countries have responded to their firearm tragedies decisively. Australia dramatically restricted access to firearms following the mass shooting at Port Arthur in Tasmania. The UK did the same following such incidents in Cumbria and Hungerford. The US has yet to do so.

Even by raising the issue of firearms as a public health issue, Vivek Murthy seriously endangered his career within the US Public Health Service. This kind of stand takes courage. Daring to even raise the issue of gun control in the public sector in the US can result in dramatic censure. However, public health must continue to focus on this issue despite any inherent danger in doing so.

It may be wise to remember Voltaire’s sage advice: “To learn who rules over you, simply find out who you are not allowed to criticize”. However, for public health it is essential to challenge the status quo and maintain both the courage and the independence necessary to speak out on important issues. Public health must resist censorship of its activities and avoid self-surveillance.


