

Safety Planning for a Dementia Diagnosis: Understanding the Attitudes of Aging Firearm Owners and Identifying the Physician's Role in Developing Firearm Retirement Plans

Martha Hunter¹, Linda Schutzman²

¹Indiana University School of Medicine; ²Indiana University School of Medicine, Department of Surgery

Background/Objective: In the US, 56 million individuals are aged 65 and older with 1 in 10 at risk of developing dementia. Among this population, 1 in 3 report firearm ownership. Dementia poses significant safety risks when coupled with firearm ownership. However, no standardized protocol exists to guide physicians in assisting aging firearm owners with planning for cognitive decline. This study aims to identify the demographic and behavioral factors associated with willingness to engage in firearm retirement planning.

Methods: A prospective survey was administered to 106 firearm owners aged 60 or older, including trauma inpatients (n = 58) and vascular clinic outpatients (n = 48). Multivariable logistic regression was used to identify predictors of openness to physician involvement in firearm retirement planning.

Results: Among respondents, 51.9% were open to or considering discussing a firearm safety plan with their physician (38.7% open, 13.2% undecided). Black respondents were significantly more likely than white respondents to endorse physician involvement (OR = 3.14, 95% CI 1.06–9.33), as were single respondents compared to married ones (OR = 2.91, 95% CI 1.23–6.89). In contrast, those with above-basic firearm expertise (OR = 2.57, 95% CI 1.12–5.89), prior formal firearm training (OR = 2.21, 95% CI 1.00–4.89), or who stored firearms loaded (OR = 2.90, 95% CI 1.22–6.86) were more likely to oppose physician involvement. Post-survey, single respondents were also more likely to initiate firearm planning discussions with family (OR = 2.66, 95% CI 1.03–6.89).

Conclusion: Prior to completing the survey, most respondents had not discussed firearm planning; however, two-thirds intended to do so afterward. Findings suggest that Black individuals, those who are single, and those with less firearm experience may be especially receptive to physician-led firearm retirement conversations. Additional research should be done to understand the perspectives of the less receptive subgroups.