

Scoping Review Protocol

1.0 TITLE

Firearm violence among LGBTQ+ communities: A scoping review and future directions

2.0 PROTOCOL INFORMATION

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Dates: Anticipated start date of search: April 2021

Anticipated completion date: May 2021

3.0 BACKGROUND

Description of public health problem: In the general population, firearms are one of the most common means of suicide. The lethality of firearms creates a higher risk of mortality in a suicide attempt with a firearm compared to other means (e.g., hanging/strangulation/suffocation and poisoning). Notably, firearm suicides account for the majority of deaths due to firearm violence.

Why is it important do this review: LGBTQ+ people have higher rates of suicide ideation and attempts compared their non-LGBTQ+ counterparts. The purpose of this review is to synthesize the literature on firearms among LGBTQ+ populations in the US to guide suicide prevention efforts.

4.0 OBJECTIVES

There are notable disparities in suicide ideation and attempts among LGBTQ+ communities. Firearms are the leading cause of death in the United States. In the general population, firearms are a risk factor for assault and violent injuries requiring medical attention. People who carry firearms, as well as peers surrounding them, are at increased risk for serious injury and death. As a result, understanding the prevalence and consequence of firearms for LGBTQ+ populations is of critical importance for suicide and violence prevention efforts. The questions guiding this review are:

- i. What outcomes, if any, are associated with firearm ownership or access among LGBTQ+ populations?
- ii. Within LGBTQ+ populations, are there differences by gender, race/ethnicity, SES, geographic location in ownership or access to firearms?

Specific parameters that will be mapped from studies that relate to this research question:

- i. LGBT+
- ii. Firearms

5.0 METHODS

Types of studies: Studies will **include** empirical papers that report on firearms among sexual and gender minority (LGBTQ+) communities in the United States. Empirical studies can include qualitative and quantitative studies. We will **exclude** include reviews, policy briefs, or conceptual papers, studies published outside of peer-reviewed journals (e.g., dissertations, conference papers), and studies published in languages other than English.

Types of participants: Studies will **include** sexual and/or gender minority people (i.e., LGBTQ+ people) living in the United States. Studies that include a non-LGBTQ+ peoples will be **excluded** unless they provide disaggregated data related to LGBTQ+ people and firearms.

Types outcomes measures: Included studies do not need to report a health outcomes; for example, they may report only prevalence of firearm ownership and/or access.

6.0 SEARCH METHODS FOR IDENTIFICATION

Electronic searches:

Comprehensive searches will be developed by an informationist (K.M.S.) in PubMed, Embase (Elsevier), CINAHL (EBSCO), PsycInfo (EBSCO), LGBT Life (EBSCO), and Scopus (Elsevier). In order to minimize the possibility of missed studies, references for all included studies and cited references will be reviewed. Citations from each database will be moved to the citation manager Endnote X9 (Clarivate Analytics) for multi-pass duplicate detection and removal. All searches will be built around two primary concepts: firearms (including the broader concept of suicide) and LGBTQ populations. Each search will include of a combination of controlled vocabulary terms appropriate for the selected databases and keywords limited to relevant fields. An English language limit will be applied across all databases and source type limits will be applied in a few of the included databases.

7.0 DATA COLLECTION AND ANALYSIS

Selection of studies:

1. KMS will import records retrieved from PubMed, LGBT Life, Embase, Scopus, PsycInfo into single file on EndNoteX9 to delete duplicates. A single deduped file will be imported into Rayyan for screening.
2. WK & KG will each complete title/abstract screening
3. WK will export all records retained by one or both reviewers to a shared EndNote library in Dropbox
4. WK will retrieve full text for all records in EndNote
5. WK & KG will each screen full text in EndNote and meet to discuss and resolve discrepancies
6. WK & KG will extract data (see below) from all included articles into a shared Excel file in Dropbox, each doing so for half of the articles

Qualitative assessment of included studies:

- [JBI Critical Appraisal Tools](#): most likely the ones for analytical cross sectional studies, prevalence studies, and qualitative research but full selection will depend on types of included studies
1. WK & KG will assess each included study and record assessment in shared Excel file
 2. WK & KG will meet to discuss and resolve any discrepancies in quality assessment

Data extraction and charting: For each included study, the following data will be extracted:

- i. Citation details
- ii. Aims or purpose the study
- iii. Methods
 - a. Study Design
 - i. Primary data collection
 - ii. Secondary analysis
 - iii. Analysis of surveillance data
 - b. Sampling
 - i. Probability
 - ii. Non-Probability with specific type: snowball, convenience, etc.
 - c. Methods of Data Collection
 - i. In-person
 - ii. Online
 - iii. Telephone administered
 - iv. Death records
- iv. Participants
 - a. Sample Size
 - b. Geographical Location
 - i. State(s)
 - ii. Urban vs. Rural
 - c. Demographics
 - i. Age
 - ii. Race/Ethnicity
 - iii. Sexual Orientation (and how it was assessed – identity, attraction, behavior)
 - iv. Gender Identity (and how it was assessed)
 - v. SES (education, income, employment)
- v. Firearms
 - a. Construct and Measurement
 - i. Ownership
 - ii. Access
 - iii. Injury
 - iv. License
 - v. Peer/community firearm exposure
 - b. Outcome, if present
 - i. Injury

- ii. Suicide
- iii. Homicide
- iv. Other
- vi. Study limitations

Target Journals:

1. Journal of Behavioral Medicine
2. Public Health Reports
3. Preventative Medicine Reports