Prevention of Firearm-Related Injuries & Death: Resource Guide 2013

- Best Practice Registries
- State Legislation
- Storage
- Technology
- Active Shooter and Emergency Preparedness
- Firearm Safety Education
- Early Intervention and Mentoring
- Parenting and Youth Development
- Collaborative Community Interventions
- Environmental Design
- Health Care Providers
- Data and Information about Firearms
- Organizations

In 2010 in the United States, 31,672 people died by guns through homicides, suicides, legal interventions, unintentional shootings and undetermined motivations.[1] These deaths are preventable through comprehensive prevention strategies. The Children's Safety Network (CSN) has compiled this resource guide on firearm safety and firearm injury prevention to provide state Maternal and Child Health and Injury and Violence Prevention programs with a summary of what is available in the area of firearm safety and prevention. This guide contains information on a broad range of evidence-informed interventions, firearms data, state legislation about firearms, and organizations to contact for additional information.

Best and promising practices for the improved safety of firearms and reduction of firearm-related injuries include a variety of strategies from legislation and policies to technological innovations, criminal justice interventions, and education. The past several years have seen concerted effort to compile and make available best and promising practices for the prevention and reduction of firearm mortality and morbidity.

This CSN resource guide draws heavily from the following publications and other resources available online:

- American Academy of Pediatrics. Firearm-Related Injuries Affecting the Pediatric Population. Pediatrics. Vol. 130, No. 5, November 2012

- Bellis, M.A., Jones, L., Hughes, & K., Hughes, S. (2010). Preventing and Reducing Armed Violence: What Works. Oslo Conference of Armed Violence: Achieving the Millennium Development Goals

- Webster, D.W. & Vernick, J.S. (2013). Reducing Gun Violence in America: Informing Policy with Evidence and Analysis. Summit on Reducing Gun Violence in America: Informing Policy with Evidence and Analysis.

[1] http://www.childrenssafetynetwork.org/publications/cost-firearm-violence

The Centre for Public Health at Liverpool John Moores University, The World Health Organization, and the United Nations Development Programme created the publication "Preventing & Reducing Armed Violence: What Works?"[2] to analyze past and ongoing efforts to decrease armed violence, determine the effectiveness of these violence prevention interventions, and identify gaps in the evidence. Based on their findings, they produced the following table classifying the different approaches to violence prevention and the evidence that exists to support the effectiveness of these approaches.

Table 1: Overview of armed violence prevention approaches

Intervention		Type of violence — Armed violence	Type of violence — Violence	Section
Direct approaches				
Measures to reduce access to firearms				
Legislation and regulation		● ◎		4.2.1
Disarmament programmes [a][b]		◎ ✗		4.2.2
Gun-free zones		人		4.2.3
Law enforcement and criminal justice interventions				
Policing strategies	Community policing	● ◎		4.2.4
Policing strategies	Directed policing [c]	● ◎		4.2.4
Policing strategies	Problem orientated policing [c][d]	● ◎		4.2.4
Sentence enhancement laws		人		4.2.5
Juvenile gun courts		人		4.2.5
Criminal justice system reforms		◎		4.2.6
Firearm injury prevention programmes				
School-based safety education [e]		人		4.2.7
Community-based gun safety programmes		人		4.2.8
Hospital-based violence prevention programmes [f]		✗	✗	4.2.9
Public education and awareness campaigns		人		4.2.10
Comprehensive community based programmes				
Public safety and community security programmes [d]		● ◎		4.2.11
Addressing gang violence through community orientated, multi-strategy interventions		●		4.2.12
Indirect approaches				
Parenting programmes		人	●	4.3.1
Life skills and social development		人	● ◎	4.3.2
Academic enrichment programmes		人	◎	4.3.3
Mentoring programmes [g]		人	✗	4.3.4
Reducing access to and harmful use of alcohol [h]		◎	✗	4.3.5
Environmental and urban design		人	◎	4.3.6
Disrupting illegal drug markets		人		4.3.7
Programmes to reduce inequalities		人		4.3.8

Key to symbols
- ● Supported by evidence from high-income countries
- ◎ Emerging evidence from middle- and low-income countries
- ✗ Emerging evidence from high-income countries
- 人 Impact unclear or yet to be evaluated

a. Without measures to control access to new weapons, amnesties and buy-back schemes may have little effect.
b. In post conflict situations, disarmament can be an integral part of peaceful disarmament processes, reducing the risks of re-emerging violence.
c. Long term effects of these strategies are unknown.
d. Programmes also broadly addressed risk factors for violence, for example, through improving basic services and infrastructure.
e. Can improve firearm safety knowledge and skills.
f. Can improve attitudes towards guns and violence.
g. Poorly implemented programmes may have an adverse effect on at-risk youth.
h. Restricted hours of alcohol sales associated with reduced homicides.

[2] Armed violence is the intentional use of physical force, threatened or actual, with arms, against oneself, another person, group, community, or State that results in loss, injury, death and/or psychosocial harm to an individual or individuals that can undermine a community's, country's or region's security or development achievements. (Geneva Declaration on Armed Violence)

Best Practices Registries

Three main best practices registries which contain detailed information about programs with proven capacity to reduce firearm injuries are available on-line.

- Blueprints for Violence Prevention, a national violence prevention initiative, identifies effective violence prevention programs. It has found 11 "Model" prevention programs and 20 "Promising" programs that have been evaluated and demonstrated to be effective. "Model" programs have been evaluated more than once while "Promising" Blueprints programs have only received one evaluation.

- The Violence Prevention Evidence Base was developed by The Centre for Public Health at Liverpool John Moores University and provides access to published study abstracts which measure the effectiveness of violence prevention interventions. Studies included in the Violence Prevention Evidence Base measure the direct impact of interventions on violence.

- The Office of Juvenile Justice and Delinquency Prevention Model Programs Database lists over 200 scientifically-proven programs that address a range of issues, including substance abuse, mental health, and education programs. Programs are rated as exemplary, effective and promising. For programs to prevent firearms violence, select "Availability of firearms" under community risk factors.

State Legislation

Firearm legislation in the U.S. is mostly determined by state government and varies greatly from one state to the next. To find out what firearms laws exist in your state, visit Findlaw's State Gun Control Laws page. The American Academy of Pediatrics also provides this overview of Firearms Safety Laws by state.

Legislation connected to decreased incidents of firearm deaths includes: Licensing and registration for owners and suppliers; minimum age for purchasing; bans on certain types of firearms; background checks and psychological testing of firearms purchasers; limits on the number of firearms that can be purchased or owned and safe storage requirements (Preventing and Reducing Armed Violence: What Works 2010). Many states can strengthen their gun laws as a means of reducing firearm-related injuries and deaths. For more information about current state laws and ways to strengthen them, see the American Academy of Pediatrics "Strengthening State Gun Laws- Strategies to Protect Children from Firearms" webinar.

The following examples of promising practices in state legislation are excerpted from: Violence Prevention, The Evidence: Guns, Knives and Pesticides: Reducing access to lethal means.

Bans on certain types of firearms:

Maryland's ban on small, low-quality, inexpensive handguns, called "Saturday night specials" was associated with an increase in gun purchases prior to implementation and an increase in firearms homicides immediately after the ban, followed by a decrease in homicides suggesting a delayed effect from the ban.

- Webster, D.W., Vernick, J.S., Hepburn, L.M. (2002). Effects of Maryland's law banning "Saturday night special" handguns on homicides. American Journal of Epidemiology. 155:406-412.

One-gun-a-month:

Laws that limit the purchase of firearms to one per individual per month aim to reduce access to weapons among potential traffickers. The use of such legislation in Virginia was found to reduce interstate trafficking of firearms purchased in the state.

- Weil, D.S., Knox, R.C. (1996). Effects of limiting handgun purchases on interstate transfer of firearms. The Journal of the American Medical Association. 275:1759–1761.

Keeping guns out of reach of children:

Child-access prevention (CAP) legislation requires owners to store firearms safely away from children (e.g., under lock and key) and makes the failure to do so a criminal offence. Studies have associated CAP laws with modest reductions in firearms and in suicides among adolescents. In states in which the violation of CAP laws is a felony, reductions in unintentional firearms fatalities among children have also been found.

- Cummings, P., Grossman, D.C., Rivara, F.P., & Koepsell, T.D. (1997). State gun safe storage laws and child mortality due to firearms. The Journal of the American Medical Association. 278:1084–1086.

- Hardy, M.S. (2006). Keeping children safe around guns: Pitfalls and promises. Aggression and Violent Behaviour. 11:352–366.

- Hepburn, L., Azrael, D., Miller, M., & Hemenway. D. (2006). The effect of child access prevention laws on unintentional child firearm fatalities, 1979–2000. Journal of Trauma. 61:423–428.

- Webster, D.W. &, Starnes, M. (2000). Reexamining the association between child access prevention gun laws and unintentional shooting deaths of children. Pediatrics. 106:1466–1469.

- Webster, D.W.,Vernick, J. S., Zeoli, A. M., & Manganello, J. A. (2004). Association between youth-focused firearm laws and youth suicides. The Journal of the American Medical Association. 292:594–601.

Gun show regulation:

In California, where gun shows are regulated, promoters must be licensed, and private firearms sales are restricted. These restrictions are associated with a lower incidence of anonymous, undocumented firearms sales and illegal straw purchases than in states with weaker regulation of private sales and gun shows. (A straw purchase is one undertaken by a proxy on behalf of somebody who is not permitted by law to purchase or own the item.)

- Wintemute, G.J. (2007). Gun shows across a multistate American gun market: Observational evidence of the effects of regulatory policies. Injury Prevention. 13:150–155.

Keeping guns away from violent offenders:

Federal law prohibits possession of firearms by offenders who are subject to a restraining order protecting an intimate partner or their children, but not all offenders subject to these restraining orders are covered by this law. To close this gap, several states have enacted additional legislation. This allows for background checks of buyers to prevent those who have used violence against an intimate partner from possessing or purchasing firearms. These laws may also allow police to confiscate firearms at the scene of acts of violence against intimate partners. Research on the impact of such

legislation has found that restraining order laws have reduced intimate partner homicide in states where authorities have a strong ability to conduct back-ground checks and prevent offenders from purchasing firearms.

- Vigdor, E.R. & Mercy, J.A. (2006). Do laws restricting access to firearms by domestic violence offenders prevent intimate partner homicide? Evaluation Review. 30:343–346.

Additional Resources:

- Fleegler, E. W. (2013). Firearm Legislation and Firearm-Related Fatalities in the United States: US Firearm Laws and Firearm-Related Fatalities. JAMA Internal Medicine, 1. doi:10.1001/jamainternmed.2013.1286

- Jacobi, J. (2013) Gun Violence and Public Health Law Webinar Public Health Seminar Series: University of Medicine & Dentistry of New Jersey, School of Public Health.

- Rosengart, M. (2005). An evaluation of state firearm regulations and homicide and suicide death rates. Injury Prevention. 11:77-83.

- Sherman, L.W. & Rogan, D.P. (1995). Effects of gun seizures on gun violence: Hot spots patrol in Kansas City. Justice Quarterly. 12:673-693.

Storage

Storage is a central component of being a responsible gun owner. Best practices include locking up an unloaded gun separately from ammunition and out of the reach of children. Safe storage practices prevent theft as well as firearm injuries. Several strategies and programs have been found effective in encouraging the use of safe storage practices, such as the "Love Our Kids, Lock Your Guns" community-based firearm safety and gun lock distribution program. Trigger locks are generally less accepted by gun owners, and trigger lock programs have had no effect on gun ownership levels.

- Coyne-Beasley, T., Schoenbach, V.J., & Johnson, R.M. (2001). "Love Our Kids, Lock Your Guns": A community-based firearm safety counseling and gun lock distribution program. Archives of Pediatric and Adolescent Medicine. 155:659-664.

- Gomez, T. (2009). Lok-it-up: Partnering for safety. Northwest Public Health. Fall/Winter:22.

- Horn, A, Grossman, D.C., Jones, W., & Berger, L.R. (2003). Community based program to improve firearm storage practices in rural Alaska. Injury Prevention. 9:231-234.

- Johnson, R., Miller, M., Vriniotis, M., Azrael, D., Hemenway, D. (2006) Are Household Firearms Stored Less Safely in Homes With Adolescents? Analysis of a National Random Sample of Parents. Arch Pediatr Adolesc Med. 2006;160(8):788-792. doi:10.1001/archpedi.160.8.788.

- Sidman, E.A., Grossman, D.C., Koepsell, T.D., D'Ambrosio, L., Britt, J., Simpson, E.S., Rivara, F.P., & Bergman, A.B. (2005). Evaluation of a community-based handgun safe-storage campaign. Pediatrics. 115:e654-e661.

Technology

Experience from the public health sector has taught us that changing product design can be much more effective than trying to change human behavior. For example, while motor vehicle injuries re-

main a pronounced problem, were it not for the invention of, and subsequent legislation around seat-belts, airbags, collapsible steering columns, and so on, the fatality rate from these injuries would be much higher than it is. Current technologies for safer firearms include guns that recognize the owner's palm print, guns that cannot be fired when aimed at an individual wearing a specific device, biometric lock boxes, guns that cannot discharge when the clip is removed, grip and drop safety devices, and trigger locks.   These technologies are currently both underdeveloped and underexplored in terms of research on effectiveness. They also face many barriers to success, such as limited demand, and the wide availability of guns which lack such safety features. (Violence Prevention — The Evidence: Guns, knives and pesticides, reducing access to lethal means)

- Teret, S.P. & Culross, P.L. (2002). The future of children: Children, youth, and gun violence The Future of Children.12(2):118-131 Published by: Princeton University.

- Hemenway, D., Miller, M. (2013) Public Health Approach to the Prevention of Gun Violence. The New England Journal of Medicine, DOI: 10.1056/NEJMsb1302631.

Active Shooter and Emergency Preparedness

Planning and training are core components of preparing to deal with an active shooter situation. Law enforcement personnel, school staff, students, and business owners and staff should all have emergency plans and be trained to implement those plans.

- FEMA: The Federal Emergency Management Agency (FEMA) Emergency Management Institute (EMI) has developed the 45-minute training, *Active Shooter: What You Can Do*, for individuals, including managers and employees, so that they can be prepared to act when confronted with an active shooter. The course includes information about recognizing violence indicators and managing the consequences. EMI awards 0.1 CEU for completion of this course.

Firearm Safety Education

Educating youth, and even adults, about firearm safety can be difficult. Baxley & Miller in 2006, as well as prior studies, found that parents' predictions about their children's interactions with guns were often incorrect based on child self-reporting. A parent with guns who had locked the guns away and spoken to his/her children about firearm safety was equally likely to have been contradicted by the children's self-reports. Some school-based curricula result in improved short-term knowledge about guns, but if designed or implemented incorrectly, these curricula can inadvertently "enhanc[e] the allure of guns" or cause adolescents to over-estimate how frequently their peers carry guns, thus normalizing this behavior. (OCAV Bellis et al.) The National Rifle Association's "Eddie Eagle" program has been shown to improve children's ability to correctly state safety behaviors. However, in a con-trolled experiment, most children who participated in the program did not demonstrate correct safety behavior when faced with real life situations involving firearms. Behavioral Skills Training (BST) has been found to be more effective in eliciting the appropriate safety behavior from children when they are faced with a firearm.

Gun Safety for Kids and Youth (a webpage of the University of Michigan Health System)

- American Academy of Pediatrics, Council on Injury, Violence, and Poison Prevention Executive Committee. (2012). Policy Statement: Firearm-

Related Injuries Affecting the Pediatric Population. Pediatrics, 130 (5), e1416 -e1423

- Baxley F, Miller M. (2006). Parental misperceptions about children and firearms. Archives of Pediatric & Adolescent Medicine.160(5):542-547. doi:10.1001/archpedi.160.5.542.

- Connor, S.M., Wesolowsji BS. (2003). "They're too smart for that": Predicting what children would do in the presence of guns. Pediatrics. 111(2): 109-114.

- Gatheridge, B.J., Miltenberger, R.G., Huneke, D.F., Satterlund, M.J., Mattern, A.R., Johnson, B.M., & Flessner, C.A. (2004). Comparison of two programs to teach firearm injury prevention skills to 6- and 7-year-old children. Pediatrics. 114:e294-e299.

- Himle, M.B., Miltenberger, R.G., Gatheridge, B.J., & Flessner, C.A. (2004). An evaluation of two procedures for training skills to prevent gun play in children. Pediatrics. 113:70-77.

- Howard, P.K. (2005). Evaluation of age-appropriate firearm safety interventions. Pediatric Emergency Care. 21:473-479.

- Jackman GA, Farah MM, Kellermann AL, Simon HK. Seeing is believing: what do boys do when they find a real gun? Pediatrics. 2001;107(6):1247–1250

- Liller, K.D., Perrin, K., Nearns, J., Pesce, K., Crane, N.B., & Gonzalez, R.R. (2003). Evaluation of the "Respect Not Risk" Firearm Safety Lesson for 3rd-Graders. Journal of School Nursing. 19:338-343.

- Roberto, A.J., Johnson, A.J., Meyer, G., Robbins, S.L., & Smith, P.K. (1998). The Firearm Injury Reduction program: Formative evaluation insights and implications. Social Marketing Qual¬ity. 4:25-35.

Early Intervention and Mentoring

Early education and mentoring are important protective factors against perpetration of and victimization by armed violence. Evaluations of several initiatives have shown positive impacts on rates of violence, including initiatives by Early Head Start, the Chicago Child-Parent Center, and the Big Brother/Big Sister Association.

Early Head Start:

- Love, J.M., Kisker, E.E., Ross, C., Constantine, J., Boller, K., Chazan-Cohen, R., Brady-Smith, C., Fuligni, A.S., Raikes, H., Brooks-Gunn, J., Tarullo, L.B., Schochet, P.Z., Paulsell, D., & Vogel, C. (2005). The effectiveness of early head start for 3-year-old children and their parents: Lessons for policy and programs. Developmental Psychology. 41:885-901.

Chicago Child-Parent Center:

- Reynolds, A.J., Temple, J.A., Robertson, D.L., & Mann, E.A. (2001). Long-term effects of an early childhood intervention on educational achievement and juvenile arrest: A 15-year follow-up of low-income children in public schools. The Journal of the American Medical Association.285:2339-2346.

[Big Brother Big Sister Association:](#)

- Grossman, J.B., & Tierney, J.P . (1998). [Does mentoring work? An impact study of the Big Brothers Big Sisters program](#). Evaluation Review. 22:403-426.

- Tierney, J.P., Grossman, J.B., & Resch, N.L. (1995). [Making a difference: An impact study of Big Brothers/Big Sisters](#). Philadelphia, Public/Private Ventures.

Nurse home visitations have also been shown to positively impact rates of criminal and antisocial behavior among youth.

- Olds, D.L. Henderson, C.R., Cole, R., Eckenrode, J., Kitzman, H., Luckey, D., Pettitt, L., Sidora, K., Morris, P., & Powers, J.(1998). [Long-term effects of nurse home visitation on children's criminal and antisocial behavior: 15-year follow-up of a randomized controlled trial](#). The Journal of the American Medical Association. 280:1238-1244.

Parenting and Youth Development

Strong family connections and life skills development through programs such as the [Triple P-Positive Parenting Program](#) have also been linked to reductions in armed and youth violence.

- Sanders, M.R., Bor, W., & Morawska, A. (2007). [Maintenance of treatment gains: A comparison of enhanced, standard, and self-directed Triple P-Positive Parenting Program](#). Journal of Abnormal Child Psychology. 35:983-998.

- World Health Organization. (2009). [Preventing violence through the development of safe, stable and nurturing relationships between children and their parents and caregivers](#).

- World Health Organization. (2009). P[reventing violence by developing life skills in children and adolescents](#).

Exposure to violence is an identified risk factor for perpetration of violence. The following articles provide an in-depth discussion of this issue.

- Buka S.L., Stochick, T.L., Birdthistle, I., & Earls, F.J. (2001). [Youth exposure to violence: Prevalence, risks and consequences](#). American Journal of Orthopsychiatry. 71:298-310.

- Barroso, C.S., Peters, R., Kelder, S., Conroy, J., Murrary, N., & Orpinas, P. (2008). [Youth exposure to community violence: Association with aggression, victimization, and risk behaviors](#). Journal of Aggression, Maltreatment and Trauma. 17:141-155.
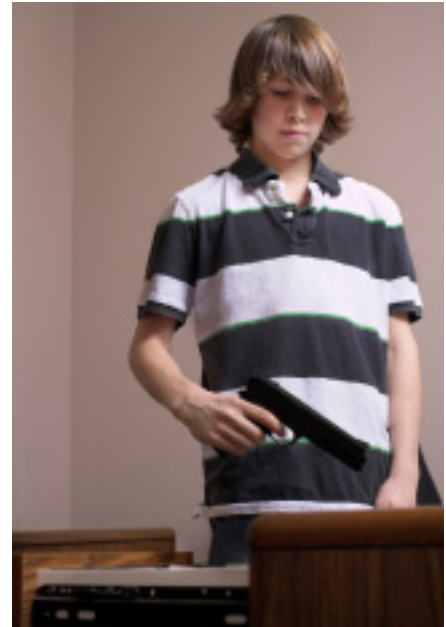
Collaborative Community Interventions

Collaborations between community residents, law-enforcement officials, and other actors, such as public health officials and local business owners, have proven effective in reducing armed violence and crime. These programs include the following:

[Project Safe Neighborhood](#): This program is the result of a collaboration between federal, state, and local agencies, which focuses on deterring and punishing crimes committed with guns. The Boston Ceasefire program, a problem-oriented policing strategy, was the precursor of Project Safe Neighborhoods and led to the [National Network for Safe Communities](#). This program has been

implemented and adapted in several other cities and states under different names, such as: The Longevity Program in Connecticut; High Point Drug Market Intervention in High Point, North Carolina; Project Exile in Richmond, Virginia; and CIRV in Cincinnati, Ohio.

- Braga, A.A., Kennedy, D.M., Piehl, A.M., & Waring, E.J. (2001). Reducing gun violence: The Boston Gun Project's Operation Ceasefire. National Institute of Justice.

- McGarrell, E.F., Kroovand Hipple, N., Corsaro, N., Bynum, T.S., Perez, H., Zimmermann, C.A., & Garmo, M. (2009). Project Safe Neighborhoods - A national program to reduce gun crime: final project report. East Lansing MI, School of Criminal Justice, Michigan State University.

- Meares, T., Papachristos, A.V. & Fagan, J. (2009). Homicide and gun violence in Chicago: Evaluation and summary of the Project Safe Neighborhoods Program. Chicago IL, Project Safe Neighborhoods.

- Papachristos, A.V., Meares, T., & Fagan, J. (2007). Attention felons: Evaluating Project Safe Neighborhoods in Chicago. Journal of Empirical Legal Studies. 4:223-272.

- Project Safe Neighborhoods - A national program to reduce gun crime: final project report. East Lansing MI, School of Criminal Justice, Michigan State University.

Cure Violence: Begun as Ceasefire Chicago, Cure Violence is a public health approach to violence that does not involve police as a central element. Instead, the model prevents violence through a three-pronged approach: 1. detect and interrupt transmission using trained mediators; 2. Identify and change the thinking of the highest potential transmitters using outreach workers; 3. Change community norms. Together, local stakeholders define the parameters of the violence problem, focusing on the actors and tools, and then design the interventions. This model has been implemented in other cities under various names, such as and Safe Streets Program in Baltimore, Maryland.

- Picard-Fritsche, S., & Cerniglia L. (2010) Testing a Public Health Approach to Gun Violence. Center for Court Innovation.

- Skogan, W.G., Hartness, S.M., Bump, N., & Dubois, J. (2008). Evaluation of CeaseFire - Chicago. Chicago IL, Northwestern University.

- Webster, D. W., Whitehill, J. M., Vernick, J. S., & Parker, E. M. (2012). Evaluation of Baltimore's Safe Streets Program: Effects on Attitudes, Participants' Experiences, and Gun Violence. Baltimore, MD: Johns Hopkins Center for the Prevention of Youth Violence.

Cradle to the Grave: This two-hour hospital-based intervention provides at-risk youth with a graphic account of the life and death of Lamont Adams, a criminal-involved youth who died from firearm injuries at the age of 16.

- Goldberg, A.J. Toto, J.M., Kulp, H.R., Lloyd, M.E., Gaughan, J.P., Seamon, M.J., & Charles, S.P. (2010). An analysis of inner-city students' attitudes towards violence before and after participation in the "Cradle to Grave" program. Injury. 41:110-115.

Environmental Design

The Broken Windows criminological theory states that well-ordered urban environments contribute to residents' feelings of security and may stop the escalation of vandalism and crime. This theory has

influenced violence prevention programs and urban design, especially in relation to parks, open spaces, and crowded urban centers. The way a park, street, or city is designed can improve feelings of security while making it easier for police to patrol and harder for criminals to gather and act.

These design considerations can also be useful to establishments or events where alcohol is served. Alcohol use and violence are closely linked; providing training to employees and managers of alcohol-serving establishments can increase their skills in deescalating and handling violent incidents. Similarly, designing the spaces where individuals imbibe in a way that improves flow can reduce the risk of a conflict. For more information, see the Cardiff Model for violence prevention.

Health Care Providers

Health care providers have an important role to play in firearm safety. These professionals can encourage patients to use safe store practices and raise awareness about the potential dangers of firearm ownership. The American Academy of Pediatrics provides steps pediatricians can take in their practice to make changes related to firearms.

- Albright, T.L. & Burge, S.K. (2003). Improving firearm storage habits: Impact of brief office counseling by family physicians. Journal of the American Board of Family Practice. 16:40-46.

- Grossman, D.C., Cummings, P., Koepsell, T.D., Marshall, J., D'Ambrodio, L., Thompson, R.S., & Mack, C. (2000). Firearm safety counseling in primary care pediatrics: A randomized, controlled trial. Pediatrics. 106:22-26.

Additional publications related to health care providers and firearms include:

- Carrillo, E.H., Gonzalez, J.K., Carrillo, L.E., Chacon, P.M., Namias, N., Kirton, O.C., & Byers, P.M. (1998). Spinal cord injuries in adolescents after gunshot wounds: An increasing phenomenon in urban North America. Injury. 29:503-507.

- Oatis, P.J., Fenn Buderer, N.M., Cummings, P., & Fleitz, R. (1999). Pediatric practice based evaluation of the Steps to Prevent Firearm Injury program. Injury Prevention. 5:48-52.

Means Reduction

Emergency Department (ED) Means Restriction Education is geared towards caregivers of youth (ages 6-19) who bring a youth to the Emergency Department as a result of a suicide attempt. While a mental health assessment is standard practice, this approach requires service providers to talk to the caregiver about the increased risk of having a firearm in the house when a youth or family member is suicidal.

"Means reduction" is part of a comprehensive approach to suicide prevention which involves reducing a suicidal person's access to lethal means. Firearms are the most lethal of the commonly used suicide means in the U. S.; reducing access to firearms by storing them safety or removing them from the home can help prevent suicide. To learn more, visit the Harvard School of Public Health's Means Matter webpages.

- Kruesi, M. J., Grossman, J., Pennington, J. M., Woodward, P. J., Duda, D., & Hirsch, J. G. (1999).

Suicide and violence prevention: Parent education in the emergency department. Journal of the American Academy of Child Adolescent Psychiatry. 38(3):250-255.

- McManus, B. L., Kruesi, M. J., Dontes, A. E., Defazio, C. R., Piotrowski, J. T., & Woodward, P. J. (1997). Child and adolescent suicide attempts: An opportunity for emergency departments to provide injury prevention education. American Journal of Emergency Medicine. 15(3):357-360.

- Wislar, J. S., Grossman, J., Kruesi, M. J., Fendrich, M., Franke, C., & Ignatowicz, N. (1998). Youth suicide-related visits in an emergency department serving rural counties: Implications for means restriction. Archives of Suicide Research. 4:75-87.

Data and Information about Firearms

Databases that collect information on mortality and morbidity often include information on instruments. There is no centralized gun registry in the U.S., and often firearms numbers are estimates. Thirdway, an advocacy organization, provides a *Guns by the Numbers* one-pager, which pulls together statistics from the National Rifle Association, Mayors Against Illegal Guns, the Federal Bureau of Investigation (FBI), and several other organizations. Gallup, an international polling agency, conducts regular surveys related to firearm ownership and perceptions about firearm legislation in the U.S. dating back as far as the 1950's. The following sources also include facts about firearms and related injuries:

- National Electronic Injury Surveillance System-All Injury Program (NEISS-AIP) NEISS-AIP provides nationally representative data about all types and causes of nonfatal injuries treated in U.S. hospital emergency departments. The Centers for Disease Control and Prevention (CDC) uses NEISS-AIP data to generate national estimates of nonfatal injuries, including those related to youth violence.

How Do You Safely and Legally Dispose of a Firearm?

If you decide you do not want a gun that is in your possession, you should call your local police. While there is currently no federal policy regarding this matter, the police should be able to advise you on next steps, including surrendering the firearm at a police station. Occasionally, a location near you may host a "gun buy-back" campaign, where a nominal financial reward is given in return for a firearm. The collected firearms are normally destroyed in public or turned into art. Goods For Guns is one such campaign, which is located in Worcester, Massachusetts.

- National Violent Death Reporting System The CDC established the National Violent Death Reporting System (NVDRS) and has funded 18 states to gather, share, and link state-level data on violent deaths. NVDRS provides the CDC and the states with a more accurate understanding of violent deaths. This enables policy makers and community leaders to make informed decisions about violence prevention programs, including those that address youth violence. Select NVDRS data are available for online analysis at: http://www.cdc.gov/injury/wisqars/nvdrs.html

- WISQARS (Web-based Injury Statistics Query and Reporting System, pronounced "whiskers") is an interactive database that provides national injury-related morbidity and mortality data used for research and for making informed public health decisions.

- Child Trend DataBank: Teen Homicide, Suicide and Firearm Deaths.

The following resources provide further information on firearms and violence, particularly from a public health perspective.

- Children's Defense Fund Protecting Children, Not Guns 2012.

- Firearm Injury in the U.S., Firearm & Injury Center at Penn (FICAP) (2011) is a Resource Book which helps readers understand the nature and problem of firearms injuries, review current data, understand how to access and use available data, understand the magnitude of firearm injury in the U.S., understand the benefit of and how to address firearm injury from a public health approach.

- Guns, Grief and Grace in America is a three-part film series that aims to refocus the debate about firearms from "gun rights versus gun control" to a broader, logical, non-polarized focus on public health and prevention. The website also provides tools for using the films and other resources.

- Global burden of armed violence. (2008 & 2011) from the Geneva Declaration Secretariat provides facts and figures about the impact of firearm-related violence globally, as well as prevention strategies and information about specific populations.

- Miller, M., Hemenway, D. & Azrael, D. (2007). State-level homicide victimization rates in the US in relation to survey measures of household firearm ownership, 2001-2003. Social Science and Medicine. 64:656-664.

- Miller, M., Azrael, D., Hemenway, D. (2002) Firearm Availability and Unintentional Firearm Deaths, Suicide and Homicide among 5-14 Year Olds. The Journal of Trauma, Injury, Infection, and Critical Care. 52:267–275.

Organizations

Research Centers

- Action on Armed Violence (AOAV): Based in London, England, AOAV works locally, nationally, regionally, and globally to reduce and prevent armed violence by removing the threat of weapons, reducing risks that provoke violence and conflict, and supporting the recovery of victims of violence.

- Harvard Injury Control Research Center: The center aims "to reduce the societal burden of injury and violence - through surveillance, research, intervention, evaluation, outreach, dissemination, and training."

- Johns Hopkins Center for Gun Policy and Research: Based at Johns Hopkins University Bloomberg School of Public Health, the Center examines the public health effects of guns in society and serves as an objective resource for policy makers, the media, advocacy groups, and the general public.

- The Centers for Disease Control and Prevention (CDC): The Violence Prevention Division of the CDC's National Center for Injury Prevention and Control is committed to stopping violence before it begins. Its work involves monitoring violence-related injuries, researching risk and protective factors for violence, creating and evaluating violence prevention programs, helping state and local

organizations implement and evaluate prevention programs, and researching the adoption and dissemination of prevention strategies.

- The Prevention Institute: The Institute focuses on primary prevention of violence and injury, in addition to mental health and other health concerns, and it promotes policies, organizational practices, and collaborative efforts that improve health and quality of life.

- The Small Arms Survey: Located at the Graduate Institute of International and Development Studies in Geneva, Switzerland, this organization provides resources and research for governments, policy-makers, and researchers on all aspects of small arms and armed violence.

- The Society for Advancement of Violence and Injury Research (SAVIR) acts as a resource for researchers, practitioners, and policy makers to promote research, evaluation, and collaboration related to the study and prevention of injuries and violence. SAVIR: The Role of Research in Addressing the Public Health Problem of Gun Violence.

- The World Health Organization: The WHO's Violence and Injury Prevention Division provides global monitoring of violence and injuries and research into best and promising practices for violence prevention and risk and protective factors for violence.

The findings and conclusions in this resource guide are those of the authors and do not necessarily represent the position of the Children's Safety Network. Photographs included in this guide to not depict safe usage and are not endorsed by the Children's Safety Network.

CSN
Children's Safety Network

Children's Safety Network
Education Development Center, Inc.
43 Foundry Avenue
Waltham, MA 02453-8313

Connect with the Children's Safety Network

CSN on Facebook: www.facebook.com/childrenssafetynetwork
CSN on Twitter: www.twitter.com/childrenssafety
Register for the CSN e-Newsletter: go.edc.org/csn-newsletter
Need TA? Have Questions? E-mail: csninfo@edc.org

www.ChildrensSafetyNetwork.org

April 2013