

# Journal of Applied Research on Children: Informing Policy for Children at Risk

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## Guest Editor's Introduction

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## Guest Editor: Katelyn Jetelina, MPH PhD

We have a neglected epidemic of firearm injury and violence in the United States. Children, in particular, intersect with firearms in the United States more often than one may think. Forty eight percent of children live in a household with a firearm, which has stayed relatively stable for the past 15 years. More than 4 million kids live in a household with an unlocked, loaded weapon. Why is this a problem? Firearms in the home increases the risk of unintentional and intentional injury and death. In 2020, firearms were the leading cause of death for children in the United States.

Many Americans think of firearm violence as school shootings since these incidents are covered in-depth by the media. Although incidents of mass murder are devastating and bring long-term individual- and community-level trauma, mass shootings account for a relatively small proportion (<1%) of annual, intentional firearm deaths. Suicide accounts for the majority of firearm deaths (54%) followed by homicide. Among children less than 1 years old, 20% of homicides were from a firearm. This increases incrementally with age. Among kids 15-19 years old, 93% homicides are from a firearm. We see the same with suicide. Among children aged 10-14 years that died of suicide, 35% were with a firearm. More than 80% of victims used a firearm belonging to a family member, usually a parent. This percentage also increases with age.

Firearms don't make up a large proportion of unintentional injuries among children, but it does still happen. Firearm reaches the top ten causes of unintentional death for those aged 1-4 years old, and 10+ years old. These deaths are typically an unfortunate result of unsafe firearm storage. Unintentional firearm deaths are usually a result of curiosity (e.g. kid looking down a firearm barrel) or play (e.g. playing with friends). Children also *witness* to firearm violence. This can seem like a smaller problem, but exposure to violence at a young age has detrimental effects later in life, due to distributions in the developing brain.

Firearm violence has been difficult to study due to lack of [funding](#). In 1993, New England Journal of Medicine published a seminal [study](#) that found having a firearm in the home increased the risk of homicide in the home. This set off a political domino effect and, three years later, the Dickey Amendment was inserted into the CDC spending bill by Congress. The provision stated “none of the funds made available for injury prevention and control at the Centers for Disease Control and Prevention (CDC) may be used to advocate or promote firearm control.” The problem with this, though, is that the language was unclear. The violence epidemiologist of the 1993 study famously said, “Precisely what was or was not permitted under the clause was unclear. But no federal employee was willing to risk his or her career or the agency's funding to find out. Extramural support for firearm injury prevention research quickly dried up.” This set firearm violence research back decades. If we couldn't conduct large, population-based studies we couldn't find patterns of firearm violence. If we weren't able to find patterns, then we couldn't find evidence-based solutions. Fortunately, in 2020 -for the first time in 25 years- our federal budget included \$25 million for the CDC and NIH to research reducing firearm-related deaths and injuries.

In this special issue of the Journal of Applied Research on Children, we provide a sneak peek into the firearm research program among children that has started to gain traction across the country. Firearm violence is complex, but we need to start somewhere to reduce unintentional

and intentional deaths among children. Our hope is that the efforts described within this issue will be used by fellow researchers and program staff working with children and families so that they may be able to anticipate potential challenges and be better prepared to find solutions for firearm morbidity and mortality in the U.S.