

# FIREARM VIOLENCE IS A PEDIATRIC PUBLIC HEALTH CRISIS

*And Deserves a State Public Health Response*

- In 2017 (the most recent year for which fatal injury numbers are available), 4,984 children and youth birth to age 21 died of firearm injuries, an increase over 2016.
- Most of those deaths were among youth ages 15 to 21. Firearm-related homicide and suicide collectively are second only to motor vehicle crashes as a leading cause of death among this age group.
- Nonfatal firearm injuries in 2017 among children and youth birth to age 21 numbered 29,474, a rate of 32.48 per 100,000.<sup>1</sup>

## TEXAS DATA:

- In 2015, 609 Texas children were injured or died because of a firearm. This includes 233 deaths from 19 suicide, assault or homicide, or accidental firearm discharge or with an undetermined intent.
- More than half of these child deaths were homicides, and most deaths were in children aged 15 to 19 years.

Access to guns in the home puts children at risk of serious unintentional and intentional injury or death. While the rate of firearm-related deaths has declined over the past 2 decades, it is still one of the top 3 causes of death in American youth, far exceeding the rates in other high-income countries. It is estimated that 43% of Americans live in a household with a gun<sup>2</sup>, and in gun-owning households with children under age 18, many of those guns are stored loaded and/or unlocked. Firearm injuries are often fatal; the presence of guns in the home increases the risk of death from suicide or homicide.

According to a national survey published in the *Journal of Urban Health*<sup>3</sup>:

- Among gun owning households with children, approximately two in ten gun owners store at least one gun in the least safe manner, i.e., loaded and unlocked;
- Three in ten store all guns in the safest manner, i.e., unloaded and locked; and
- The remaining half (0.50 [0.45–0.55]) store firearms in another way.

If there are guns in the home, evidence shows that the risk of injury or death is greatly reduced when they are stored unloaded and locked, with the ammunition locked in a separate place.

Firearms are a highly lethal method of suicide with a mortality rate around 90 percent. Adolescents often experience very strong emotions and have difficulty seeing past a current, temporary setback. Their brains have not yet matured fully, which makes them impulsive and relatively more likely to attempt suicide. When those attempts are made with a gun, there is little opportunity for them to change their minds.

## 10 Leading Causes of Injury Deaths

by Age Group, Highlighting Violence-Related Injury Deaths – United States, 2017

Rank	<1	1-4	5-9	10-14	15-24
1	Unintentional Suffocation 1,106	Unintentional Drowning 424	Unintentional MV Traffic 327	Unintentional MV Traffic 428	Unintentional MV Traffic 6,897
2	Homicide Unspecified 139	Unintentional MV Traffic 362	Unintentional Drowning 125	Suicide Suffocation 280	Unintentional Poisoning 5,030
3	Unintentional MV Traffic 90	Homicide Unspecified 129	Unintentional Fire/Burn 94	Suicide Firearm 185	Homicide Firearm 4,391
4	Homicide Other Spec., Classifiable 76	Unintentional Suffocation 110	Homicide Firearm 78	Homicide Firearm 126	Suicide Firearm 2,959
5	Undetermined Suffocation 56	Unintentional Fire/Burn 95	Unintentional Suffocation 36	Unintentional Drowning 110	Suicide Suffocation 2,321
6	Unintentional Drowning 43	Unintentional Pedestrian, Other 88	Unintentional Other Land Transport 25	Unintentional Other Land Transport 66	Unintentional Drowning 469
7	Undetermined Unspecified 37	Homicide Other Spec., Classifiable 49	Homicide Suffocation 15	Unintentional Fire/Burn 56	Suicide Poisoning 463
8	Homicide Suffocation 26	Homicide Firearm 44	Homicide Cut/pierce 14	Suicide Poisoning 39	Undetermined Poisoning 280
9	Unintentional Natural/Environment 18	Unintentional Natural/Environment 34	Unintentional Firearm 14	Unintentional Poisoning 39	Homicide Cut/pierce 266
10	Three Tied 16	Unintentional Firearm 31	Two Tied 13	Unintentional Suffocation 35	Unintentional Fall 212

Data Source: National Center for Health Statistics (NCHS), National Vital Statistics System. Produced by: National Center for Injury Prevention and Control, CDC using WISQARS™.



Centers for Disease Control and Prevention  
National Center for Injury Prevention and Control

## Texas Child Firearm-Related Deaths, Age 1 to 19 years, 2015

Firearm related deaths	1-4 YEARS	5-9 YEARS	10-14 YEARS	15-19 YEARS	TOTAL
Self-harm/Suicide	N/A	N/A	12	80	92
Assault/Homicide	2	9	8	107	126
Discharge of firearm, undetermined intent	1	0	0	3	4
Accidental discharge	4	1	1	5	11

Source: DSHS



Texas Pediatric Society

The Texas Chapter of the American Academy of Pediatrics  
INCORPORATED IN TEXAS

401 W 15<sup>th</sup> Suite 682  
Austin, TX 78701  
512.370.1516 | www.txpeds.org

# A PUBLIC HEALTH SOLUTION TO TEXAS' PEDIATRIC FIREARM VIOLENCE

Twenty-seven states, including Texas, have some type of child firearm access prevention law. In the Texas law<sup>4</sup>, if a child under 17 years of age gains access to a readily dischargeable firearm, a person is criminally liable if they failed to secure the firearm or left the firearm in a place to which the person should have known the child would gain access. The details of the law need improvement to better protect children and youth as Governor Abbott recommended in his Governor's School and Firearm Safety Action Plan.<sup>5</sup>

## Recommendation:

- The perpetrator of the Santa Fe High School shooting was 17 and thus his parents were not obligated to securely store their firearm under current state law. Texas should join the 15 other states currently using age 18 in the child access prevention law.
- The Texas law requires the firearm to be "readily dischargeable" which muddles the determination if a violation took place. As the Governor's report recommends, "readily dischargeable" should be removed from statute to require secure storage of a loaded or unloaded firearm around children.

Seventeen states and the District of Columbia have implemented Extreme Risk Protective Order (ERPO) laws, sometimes referred to as "red flag" laws. ERPO laws empower families and law enforcement officers with a formal legal civil process to temporarily restrict an individual's access to firearms if they pose a danger to themselves or others. Only a judge can issue the order. A growing body of research shows that ERPO laws can be effective at preventing suicides and homicides including mass shootings. For example, studies<sup>6</sup> from some of the earliest adopters in Connecticut and Indiana indicate a 13.7% and 7.5% respectively reduction in firearm-related suicides over a 10-year period.

## Recommendation:

- Develop an effective civil extreme protective order process to assure individuals determined to be at high risk of violence to others or themselves do not have access to their firearms temporarily.

Comprehensive, accurate and timely Texas and sub-state data on gun injuries and deaths is difficult to find and sometimes not available at all. Texas and sub-state data analysis to inform smart policy making is sorely lacking. Texas does not always participate in national data and analysis opportunities to the full extent. For example, Texas was one of the last few states to join the National Violence Death Reporting System (NVDRS), in approximately late 2018. The Texas Department of State Health Services (DSHS) houses the state's injury prevention function. Between DSHS and the Texas Health and Human Services Commission (HHSC) there is an enormous amount of data related to firearm-related injuries and deaths and the community and individual impact of violence—Bureau of Vital Statistics data and Medicaid data are just two of many relevant data sets.

## Recommendation:

- Equip and empower the DSHS, in conjunction with HHSC, to fully participate in national surveillance, and to appropriately collect, analyze and publish Texas and sub-state data on firearm injuries, deaths and community impact.



## Sources:

1. <https://www.cdc.gov/injury/wisqars/index.html>
2. <https://news.gallup.com/poll/264932/percent-age-americans-own-guns.aspx>
3. <https://link.springer.com/article/10.1007%2Fs11524-018-0261-7>
4. Tex. Penal Code § 46.13.
5. [https://gov.texas.gov/uploads/files/press/School\\_Safety\\_Action\\_Plan\\_05302018.pdf](https://gov.texas.gov/uploads/files/press/School_Safety_Action_Plan_05302018.pdf)
6. <https://3p2eii11tkyo44umh7qu2zpd-wpengine.netdna-ssl.com/wp-content/uploads/2019/10/Extreme-Risk-Law-Research-Overview-Oct-2019.pdf>



**Texas  
Pediatric  
Society**

The Texas Chapter of the  
American Academy of Pediatrics  
INCORPORATED IN TEXAS

401 W 15<sup>th</sup> Suite 682  
Austin, TX 78701  
512.370.1516 | [www.txped.org](http://www.txped.org)