

Implications of the Youth PROMISE Act (YPA) for Youth Firearm Violence Costs Kirsten Hutzell MA, Cochrane Collaboration College for Policy

The purpose of this briefing is to demonstrate that the United States is struggling from a problem different from other developed nations: gun violence as a public health crisis. Specifically, this discussion will highlight the financial and public health costs associated with firearm-related injuries and deaths as well as the need for cost-effective prevention and intervention approaches to ameliorate incidents of firearm-related injuries and deaths.

Firearm-related injuries and deaths merit public health attention, as they continue to exact a financial and physical toll in the United States. Every day approximately 175 individuals are injured and another 90 are killed with guns in accidents, homicides, and suicides (Barber et al., 2000). The widespread availability of firearms and the resulting high incidence of gun-related injuries and deaths can adversely impact children and adolescents emotionally, psychologically, physically, and otherwise. Although firearm death rates among children and adolescents are decreasing nationally, these figures remain considerably high compared with historical rates in the United States as well as rates in other industrialized nations (Cheng et al., 2001; Fingerhut & Christoffel, 2002). Furthermore, research suggests that firearm-related injuries are likely to be more severe and require greater use of emergency center resources than are other types of injuries for which youth visit accident and emergency care facilities, such as falls related to stairs (Burd et al., 2007; Fingerhut & Christoffel, 2002; Kaptein et al., 2011).

The cost of treating injuries resulting from gun violence imposes a substantial financial burden to the medical care system and the larger society. As mentioned above, firearm-related injuries oftentimes require significant emergency center resources (Burd et al., 2007). Research has estimated that taxpayers in the United States bear nearly half of the cost of treating gunshot injuries. For example, an exploration of medical costs associated with firearm-related injuries in the United States found that gunshot injuries produced approximately \$2.3 billion dollars in lifetime medical costs for youths and adults. United States taxpayers were responsible for \$1.1 billion dollars of that total cost (Cook et al., 1999).

Given these findings, a concerted effort is needed to reduce firearm-related accidents, homicides, and suicides. The implementation of prevention and intervention approaches that span the criminal justice system, educational setting, and public health sphere is essential to ameliorate incidents of gun violence (Fingerhut & Christoffel, 2002). Examples of these mechanisms are child access prevention or safe storage practices and policies (Cherry et al., 2001; Ruddell & Mays, 2004), legislation associated with governing access to firearms (Cherry et al., 2001), laws that require background checks on firearms facilities (Ruddell & Mays, 2004), and technological advances in designing safer firearms (Baker et al., 1980; Cherry et al., 2001). Other meaningful prevention and intervention approaches can include ongoing professional and public education about firearm injury prevention (Christoffel, 2007).

The Youth Promise Act, with its emphasis on metric-driven prevention and intervention strategies to reduce gang involvement and ultimately violence, offers a unique opportunity to address economic, social, and lifetime costs of youth injuries and deaths related to firearms and firearm violence.

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