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**Testimony of Jamey Bell, Acting Child Advocate,
before the Gun Violence Working Group
of the
Bipartisan Task Force on Gun Violence Prevention and Children's Safety
January 28, 2013**

The mandate of the Office of the Child Advocate (OCA) includes evaluating the delivery of state funded services to children and advocating for policies and practices that promote their well being and protect their special rights.

Our testimony and recommendations are incorporated into the attached report of the Office of the Child Advocate, "**12 years of Child Gun Deaths and Injuries in Connecticut**", dated January 2013.

Thank you for the opportunity to provide testimony.

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Office of the Child Advocate
January 2013

12 years of Child Gun Deaths and Injuries in Connecticut

Introduction

The tragic deaths of twenty very young children to gun violence in December 2012 has launched a concerted public policy focus on how to prevent such violence in the future. In Connecticut, between January 1, 2001 and December 31, 2012 (a 12-year period), **94 children** died from gunshot wounds. During that period 924 children were injured by guns. Looking at some aspects of who all of these children were and where they were injured or died will help inform efforts to stop gun violence against children.

Who are these children that have died by guns?

Age & Gender

34 were between 2-14 years old (36%).

20 of these 34 child deaths were from the mass murders in Newtown.

60 were between the ages 15-17 (64%).

22 were girls (23%).

72 were boys (77%).

Race

43 were White (46%).

40 were Black (43%).

10 were Hispanic (10%).

1 was Asian (1%).

Manner of Death

75 were homicides (79%).

16 were suicides (17%).

2 were accidental (2%).

1 case remains undetermined (1%).

Demographics	Gender	Deaths	Percent
Gender	Boys	72	77%
	Girls	22	23%
Age	2-14	34	36%
	15-17	60	64%
Race	White	43	46%
	Black	40	43%
	Hispanic	10	10%
	Asian	1	1%

Location

44 (47%) of the children died in one of three cities (Hartford, New Haven and Bridgeport) and lived in those cities, or very nearby.

Who are the children injured by guns?

During this same 12-year period, there were 924 gun-related injuries among children ages 0-17 years treated at Connecticut hospitals, which comprised 11.6% of all gun-related injuries. The demographics of these injured children are similar to the children who died:

- 88.3% occurred among boys.
- 94% occurred between the ages of 12-17 years.
- Black children accounted for 61.6% of gun-related injuries.
- Hispanic children accounted for 14%.
- Whites accounted for 10%.

Demographics	Gender	Injuries	Percent
Gender	Boys	816	88.3%
	Girls	108	11.7%
Age	0-5	17	1.0%
	6-11	43	4.7%
	12-17	864	93.5%
Race	White	94	10.2%
	Black	569	61.6%
	Asian	3	0.3%
	Hispanic	133	14.4%
	Other/Unknown	125	13.5%

Location

63% of gun-related injuries occurred in Hartford, New Haven and Bridgeport.

What is known and what needs to be known?

From what is known now, the 20 very young children who died in the mass shooting in Newtown lost their lives due to an individual having access to highly lethal guns. The circumstances of the other 74 child deaths and the vast majority of injuries from guns in this state are very different—single incidents rather than a mass casualty, and with roots in factors underlying community violence that are not well understood. These other 74 child deaths mirror the nation’s profile-- injuries to children and child deaths from guns are overwhelmingly among male adolescents 15 years old and older, and compared to their proportion of the population, they are disproportionately Black and Hispanic children.

Knowing more is critical. The success of any primary prevention effort is linked to greater understanding of the underlying issues. Federal partners at the Centers for Disease Control and Prevention (CDC) and key state stakeholders such as the Connecticut Child Fatality Review Panel, Department of Public Health (DPH), and others must be allowed to research gun violence just as they do other serious public health epidemics, without any restrictions. Connecticut has been unable to participate in the CDC’s National Violence Prevention Network and the National Violent Death Reporting System due to a lack of financial support; participation in these efforts would allow the state to share data and collaborate with the CDC and other states to reduce injuries and deaths by guns and other violent means. Research needs to focus on both the devastating but relatively more rare mass shootings and the much more frequent gun incidents that occur in towns, and overwhelmingly in large cities, across Connecticut.

The traumatic effects of gun and other violence, and how widespread and long lasting that trauma can be for parents, siblings, family, friends, neighbors, public safety personnel and entire communities, are well known. Fortunately there is much research on how best to help people and communities survive and heal. Again, this trauma-informed lens and response must be infused into all the communities impacted by gun violence.

Recommendations

1. Connecticut policymakers and residents should support state and national research to understand the root causes of gun violence and how to prevent it.
2. Policymakers should strengthen Connecticut's assault weapons ban, and otherwise control access to guns by increasing requirements for background checks, registration, storage and safety, permits/licenses to carry; by regulating gun shows; and by prohibiting sales of guns and ammunition to Connecticut residents via the internet;
3. Policymakers should work deeply and collaboratively within local communities in multidisciplinary efforts involving law enforcement, mental health, social services, child welfare, education, judicial, and public health and other key partners, to both support these communities as they heal from such tragedies, and understand and implement ways to prevent future episodes of gun violence.
4. Policymakers should establish a long term working group charged with evaluating the state's community based capacity to a) respond to traumatic events and b) assist local communities/municipalities in the development of trauma prevention and response strategies.

References

1. http://www.ct.gov/oca/lib/oca/Ten_Report_III_in_Publisher_Format_III.pdf
2. Data re child fatalities by gun from the Connecticut Office of the Chief Medical Examiner, Jan. 2013.
3. Connecticut Hospital Association: Gun-related injuries among children 0-17 years treated in Connecticut Hospitals. January 2013.
4. <http://www.childrendefense.org/child-research-data-publications/data/protect-children-not-guns-2012.pdf>
5. <http://www.preventviolence.net/statebystate/connecticut.html>