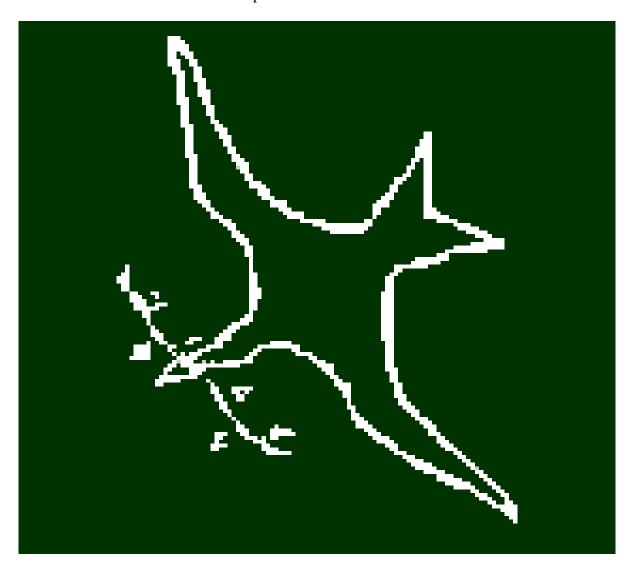
# Preventing Youth Handgun Violence:

A National Study with Trends and Patterns for the State of Colorado

Sabrina Arredondo, Tonya Aultman-Bettridge, Tenah P. Johnson, Kirk R. Williams Center for the Study and Prevention of Violence

Louise Ninneman and Ken Torp Center for Public-Private Sector Corporation



Center for the Study and Prevention of Violence

# **Preventing Youth Handgun Violence:**

# A National Study with Trends and Patterns for the State of Colorado

Sabrina Arredondo
Tonya Aultman-Bettridge
Tenah P. Johnson
Kirk R. Williams
Center for the Study and Prevention of Violence
University of Colorado at Boulder

with

Louise Ninneman Ken Torp Center for Public-Private Sector Corporation University of Colorado at Denver

#### Note:

Development of this publication was made possible with support from The Colorado Trust. Printing and dissemination was made possible with support from the Carnegie Corporation of New York.

## **CSPV-014**

Copyright © 1999 by the Institute of Behavioral Science, Regents of the University of Colorado

> Center for the Study and Prevention of Violence Institute of Behavioral Science University of Colorado, Boulder 1877 Broadway, Suite 601 Boulder, CO 80802

Phone: (303) 492-1032 Fax: (303) 443-3297 E-mail: cspv@colorado.edu www.colorado.edu/cspv

# **TABLE OF CONTENTS**

List of Figuresvi		
List of Tables	vii	
Executive Summary	1	
A Study of Youth Handgun Violence		
Youth Gun Violence: Trends and Patterns	7	
Non-Lethal Gun Violence	7	
General Trends in Arrest for Violent Crime		
Gun Carrying		
Guns in Schools		
Summary	10	
Lethal Youth Gun Violence		
Youth Homicide	10	
Youth Suicide	13	
Summary	19	
Voices in Colorado: Focus Group Findings	20	
What is the Prevalence of Youth Access to Handguns?		
For Whom is Access, Carrying, and Use of Handguns Problematic?		
Where Do Adolescents Get Handguns?		
In What Circumstances Do Adolescents Carry Handguns?		
In What Circumstances Do Adolescents Use Handguns?		
What Can Be Done to Prevent or Reduce Access, Carrying, and Use?		
What are the Obstacles to Solving this Problem?	28	
Gun Violence Prevention Programs	29	
Program Search		
Program Assessment		
Societal/Community-Based Gun Prevention/Intervention Programs		
Community Crisis Intervention and Counseling Programs		
Hospital-Based Injury Prevention Programs		
Community-Based Youth Outreach		
Public Awareness Campaigns	35	

Legal/Justice System Intervention Programs	35
Law Enforcement Strategies	
Pre-trial Release Programs	
Gun Buyback Programs	
Additional Justice System Gun Violence Prevention/Intervention Efforts	38
Neighborhood Prevention and Intervention Programs	40
Family-Based Gun Injury Prevention	41
Home Firearm Safety Courses	41
Family Gun Injury Education	41
School-Based Prevention and Intervention Efforts	42
School-Based Curricula	42
Academic Services and Counseling of Suspended Youth	45
School Gun Violence Awareness Programs	46
School Enforcement Strategies	47
Peer Group Prevention and Intervention Efforts	48
Peer Education	49
Peer Outreach and Hospital Visitation Programs	49
Suicide Prevention Programs	51
Suicide Prevention Strategies	
Public Service Campaigns	
Suicide Intervention Strategies	
Suicide Prevention with Gun or Handgun Components	52
School-Based Programs	
Community-Based Programs: General	54
Community-Based Programs: Hospitals	55
Summary and Recommendations	58
References	62
Appendix A: Gun Programs	67
Crisis Intervention and Counseling Programs	
Hospital-Based Prevention Programs	
Community-Based Youth Outreach	
Law Enforcement Strategies	
Neighborhood Programs	
Family Gun Violence Prevention Programs	
School-Based Curricula	69
Counseling and Academic Services for Suspended Youth	
School-Based Gun Violence Awareness Programs	
School Enforcement Strategies	
Peer Group Intervention and Prevention Efforts	
Gun Violence Research Organizations and Centers	71

National Coalitions and Public Awareness Campaigns	72
State Coalitions and Public Awareness Campaigns	
Appendix B: Suicide Prevention Programs	78
School-Based Suicide Prevention Programs	
Community-Based Suicide Prevention Programs	
Suicide Research Organizations	
Appendix C: Types of Suicide Prevention Programs	80
Appendix D: Questions, and Consent Forms	81
Youth and Guns Focus Group Discussion: Adult Consent Form	82
Youth and Guns Focus Group Discussion: Parental Consent Form	83
Youth and Guns Focus Group Discussion: Youth Consent Form	84
Appendix E: A Study of Youth Handgun Violence	85
Appendix F: Focus Group Protocol	86
Project Description	
Research	
Funding	86
Instructions	
Guidelines	87
Consent Forms	87
Youth Focus Group Questions	88

# **LIST OF FIGURES**

Figure 1:	Strategies to Address Youth Handgun Violence	6
Figure 2:	Reported Gun Theft and Gun Use by Arrestee Characteristics	9
Figure 3:	National Handgun-Related Homicides Youth Ages 15-18, by Gender of Offender	11
Figure 4:	National Firearm Homicide Rates, by Age Group	11
Figure 5:	National Homicides Committed by Males, 15-18 By Type of Weapon Used	12
Figure 6:	Colorado Homicides: Males, 15-18 By Type of Weapon Used	12
Figure 7:	National Suicide Rates: Adolescents, 15-19 1950-1994	13
Figure 8:	National Firearm Suicide Rates, by Age Group	14
Figure 9:	National Firearm Suicide Rates: Males, by Age Group	15
Figure 10:	National Firearm Suicide Rates: Females, by Age Group	15
Figure 11:	National Suicide Rates: Males, 15-19 1981-1995	16
Figure 12:	Colorado Firearm Suicide Rates, by Age Group	17
Figure 13:	Colorado Firearm Suicide Rates: Males, by Age Group	17
Figure 14:	Colorado Firearm Suicide Rates: Females, by Age Group	18
Figure 15:	Colorado Suicide Rates: Males, Ages 15-19 1989-1995	18
Figure 16:	Percent of Suicides Involving a Firearm, Youth 15-19 Colorado and National	19
Figure 17:	Gun Violence Program Matrix	31

# **LIST OF TABLES**

Table 1:	Crisis Intervention and Counseling Programs	33
Table 2:	Hospital-Based Prevention Programs	34
Table 3:	Community-Based Youth Outreach	35
Table 4:	Law Enforcement Strategies	39
Table 5:	Neighborhood Programs	40
Table 6:	Family Gun Violence Prevention Programs	42
Table 7:	School-Based Curricula	43
Table 8:	Counseling and Academic Services for Suspended Youth	46
Table 9:	School-Based Gun Violence Awareness Programs	47
Table 10:	School Enforcement Strategies	48
Table 11:	Peer Group Intervention and Prevention Efforts	50
Table 12:	School-Based Suicide Prevention Programs	54
Table 13:	Community-Based Suicide Prevention Programs	56

#### **EXECUTIVE SUMMARY**

The Colorado Trust funded a research project on youth handgun violence as part of its regular scanning program on the health and well-being of Colorado residents. The project was guided by a series of questions:

- What is the nature and extent of youth handgun violence nationally and in Colorado?
- What do youth and adults across the state think about this problem and possible solutions to it?
- ♦ Are there strategies for eliminating or reducing youth handgun violence that have been tried in different parts of the country with any measure of success?
- What promising approaches might be pursued in this state?

The focus of the research was on access to, carrying, and the intentional use of handguns by youth in late adolescence, that is, high school age youth. The primary concern here was the mortality associated with such violence, including homicide and suicide. The focus was *not* on advocacy for or against any type of gun control policy or legislation. The findings of the research project are organized around the questions listed above. Some key results can be summarized as follows:

- National homicide rates involving youth (aged 15-18) escalated in the mid-1980s through the early 1990s and then began to decline, yet still remaining significantly higher than the time of onset. Colorado experienced a similar trend, although the time of onset was the late 1980s.
- For both the nation and Colorado, males in this age group using handguns as lethal weapons drove this trend.
- While the national and Colorado trends are similar, the recent youth homicide rates in Colorado are about half the magnitude of the national rates.
- ♦ Concerning suicide in the nation and Colorado (1989-95), 50% to 75% of these self-inflicted deaths involved the use of some type of firearm by youth 15-19 years of age.
- ♦ The national rates for this age group have increased slightly since the early 1980s, while they have declined slightly in Colorado.
- ♦ Like homicide, the firearm suicide rates are significantly higher for males than females in this age group, both nationally and in Colorado. However, the rate for males in this state is about 50% higher than the national rate.

These findings suggest that firearms in the hands of youth threaten the health and well-being of Colorado residents, particularly the youth of this state. They also suggest that attempts to address the youth handgun violence problem, be they early prevention efforts or more immediate anti-gun violence interventions, should recognize that males in late adolescence represent the population "at risk." This is the case, moreover, whether the focus is on deaths resulting from interpersonal violence (i.e., homicide) or self-inflicted violence (i.e., suicide).

The increasing prevalence and use of handguns were also confirmed by focus group discussions involving youth and adults conducted in rural and urban locations across the state. Those discussions consistently revealed that handguns were readily available to virtually any youth wanting them. However, many participants suggested that involvement with handguns is primarily a male issue, particularly for those involved with alcohol, drugs, and gangs. This pattern is also documented with national arrest data. Moreover, these discussions also revealed that youth tend to gain access to handguns from parents (or at home), friends' parents, peers, theft or burglary from households in their neighborhoods where guns are known to be present, or illicit gun markets.

Youth and adults also concurred that self-protection was a primary motive behind accessing, carrying, and using handguns. However, adults often identified larger social issues, such as problems in the family (e.g., lack of parental involvement, supervision, weak connections with parents, etc.) or cultural traditions supporting gun ownership and use. Other reasons offered include feelings of power, lack of hope or self-esteem, and involvement with drugs, alcohol, or gangs. Rural adults and youth also noted the frequent carrying and use of guns for sport or hunting. It should be noted, however, that easy *access* to handguns in this state was more the issue than carrying and use.

Concerning solutions to the problem, a clear sense of hopelessness about blocking access to handguns was a common theme, primarily because of the sheer volume of handguns in circulation and the ease with which they can be acquired. However, education was acknowledged as an important consideration. This included education about the consequences of handgun carrying and use as well as storage and safety issues. Additionally, youth and adults, but especially adults, also discussed the importance of strengthening families and providing opportunities for youth in communities that provide alternatives to involvement with handguns and accompanying lifestyles. A theme here was the earlier the intervention, the better.

What emerges from these findings is a relatively clear picture of who uses handguns and how and where they acquire them. Further, a number of common reasons for handgun use were suggested, as were ideas of possible solutions to the problem.

In striking contrast, however, is that while the project documented the proliferation of anti-gun violence interventions, little scientific evidence is available regarding their *effectiveness*. Specifically, 163 such programs were reviewed, and none were model programs. In fact, only one program was deemed promising and two programs were found to provide favorable results by utilizing scientific criteria. More systematic evaluations are currently underway for some

interventions, and perhaps those studies will yield findings warranting the classification of model or promising programs at a later date.

Additionally, 389 suicide prevention programs were reviewed, and only 17 or about 5% explicitly addressed the issue of handguns or other firearms. None of these were classified as model or promising programs by scientific criteria, although three had some favorable results on knowledge and attitudes. None of the other programs are currently being evaluated.

In the absence of compelling scientific evidence of program effectiveness, what can be done to address the problem of youth handgun violence? Clearly, the design and evaluation of prevention and intervention programs focusing on such violence are in its infancy. Hence, knowledge of which youth are most at risk and the factors contributing to that risk within specific cultural and community settings must inform prevention and intervention efforts. Such factors are likely to vary from place to place, and all such efforts should be grounded in knowledge of the local problem.

Programs tried elsewhere that appear in their content to meet the needs of the youth population in question can be incorporated as components of such interventions. The review of programs serves to highlight some possible program components. For example, the law enforcement strategy of the Kansas City Weed and Seed Program was found promising. Additionally, two school-based programs, Safe Alternatives and Violence Education (SAVE) and Handgun Violence Reduction Programs, were found to provide favorable results. Hence, collaboration between law enforcement and schools that includes the components of such interventions might be a promising strategy for some communities struggling with a youth handgun violence problem.

The same point applies not only to the components of interpersonal violence prevention but also to suicide prevention (e.g., Gryphon Place, Project SOAR, Washington State Youth Suicide Prevention Program). Clearly, more needs to be done about access to firearms concerning suicide prevention. The overwhelming majority of the programs reviewed (i.e., approximately 95%) do nothing whatsoever about the issue of youth and firearms of any type.

Attempts to implement intervention strategies that include anti-handgun components should be evaluated extensively, including process, short-term outcome, and long-term impact assessments. This is necessary, given the scarcity of systematic evidence about the effectiveness of youth handgun prevention and intervention programs. More valid and reliable information is needed and should be generated in conjunction with prevention and intervention efforts. Once more definitive evidence is available, then the need for regular and extensive outcome evaluations will abate. Until that time, however, such evaluations should be a required part of the development and implementation of interventions. In addition to determining program effectiveness, it is equally important to determine whether programs have unintended harmful consequences.

It is also important to recognize that any prevention or intervention effort will take place in the midst of a culture that condones, or at least tolerates, the presence of handguns. This was a theme coming out of focus group discussions. However, consistent with the original focus of this research project,

advocacy for gun control policy and legislation (although logically implied) is not advisable. Interested parties are galvanized in their positions on this matter, and the political and economic forces in opposition to such advocacy are intense. The battle fought would decimate resources, with little progress made. Further, the demand for legal ownership and use of guns is great, as is their density and circulation. Hence, to engage the battle seems unwise and unrealistic. Rather, efforts should be directed toward developing, implementing, and evaluating interventions that focus on risk factors that can be modified using promising program components identified in this review that are also sensitive to local conditions.

#### A STUDY OF YOUTH HANDGUN VIOLENCE

#### Introduction

Youth violence has become a common feature of public discourse, both nationally and locally. Yet misconceptions of this problem persist. Today's youth are not trapped on a runaway train of violence *per se*. Rather, as documented in this report, the distinguishing characteristic of youth violence in contemporary America is that it has become more lethal. This clearly raises concerns about what's going on with today's youth, but it also raises concerns about the instruments of violence, particularly guns in the hands of teenagers.

These concerns became the impetus for the present project. Specifically, The Colorado Trust was interested in learning more about the lethality of youth violence in Colorado. Thus, it funded a research effort as one of its regular scanning efforts to explore current issues on the health and well-being of the people in this state. The research effort addresses a series of questions:

- ♦ What is the nature and extent of youth handgun violence, both nationally and in Colorado?
- What do youth and adults across the state think about this problem and possible solutions to it?
- ♦ Are there strategies for eliminating or reducing youth handgun violence that have been tried in different parts of the country with some measure of success?
- What promising approaches might be pursued in this state?

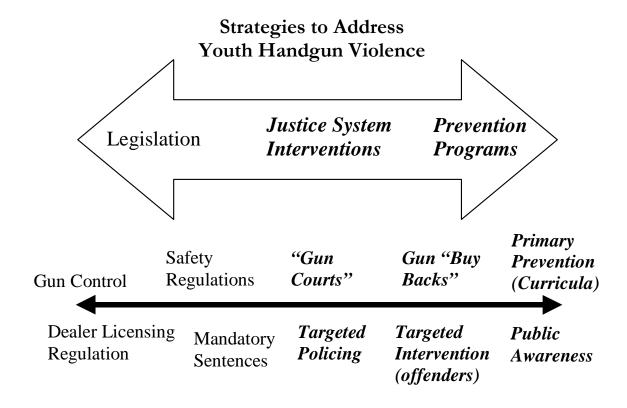
These questions provide the organizational framework for this report. It begins with a presentation of trends and patterns of youth gun violence, followed by a summary of themes coming out of focus group discussions conducted in several rural and urban locations in Colorado. The third part of the report describes prevention and intervention programs implemented across the country to address the problem of lethal youth violence, including a summary of evaluations of those programs, where available. The report closes with general recommendations for actions that might be pursued to address the issue of youth handgun violence, based on the findings of the project.

The research was conducted and this report was prepared by the Center for the Study and Prevention of Violence (CSPV), University of Colorado at Boulder, in collaboration with the Center for Public-Private Sector Cooperation (CPPSC), University of Colorado at Denver. The research team reached agreement about the substantive focus of this project, which included three key components:

1. While some information gathered and analyzed includes youth in early adolescence (about 11-14 years of age), emphasis is placed on those in mid to late adolescence, that is, high-school age youth (about 15-18 years of age).

- 2. The primary focus is on access to, carrying, and the intentional use of handguns by such youth. Fatalities associated with handgun violence are the central concern here, including both homicides and suicides.
- 3. The project is *not* about gun control or advocacy for or against any kind of gun control policy or legislation. Rather, it is about linking the nature of the youth gun violence problem, nationally and locally, to community-based prevention and intervention strategies.

The third component is illustrated further by Figure 1. It shows a continuum of prevention and intervention strategies, ranging from the supply side, that is, gun control strategies, to the demand side, that is, prevention strategies targeting youth and the neutralization of their motivation to engage in violence, especially armed with a handgun.



The review of programs to prevent or reduce the incidence of homicide and suicide focus on the demand side of the continuum, as represented by the examples in bold. The emphasis in some cases is more on access to handguns (e.g., storage and safety issues), but in other cases, the emphasis is on what can be done to reduce the desire or perceived necessity on the part of youth to carry and use these weapons.

#### Youth Gun Violence: Trends and Patterns

Recent high-profile media accounts of incidents involving armed youth have prompted national attention to the problem of youth gun violence. However, news media portrayals tend to highlight the extraordinary or "newsworthy" incidents that may not be indicative of the more common features of youth gun violence in America. Similarly, the 1993 "summer of violence," so labeled by Colorado media, brought much attention to youth gang violence and drive-by shootings, which make up only a small portion of youth violent crime. To the extent that these accounts shape public perception and policy, the image of youth gun violence may be distorted, perhaps resulting in misguided efforts to reduce it.

Trends and patterns of youth gun violence must be accurately understood before solutions to the problem can be offered. Accordingly, this section describes what is currently known about these features of youth gun violence, focusing on the use of handguns in non-lethal and lethal violence, particularly homicide and suicide.

#### Non-Lethal Gun Violence

Gathering information on non-lethal youth handgun violence is challenging. Difficulties arise because the two primary national data sources on non-lethal violent crime, official arrest statistics taken from the Federal Bureau of Investigation's (FBI) Uniform Crime Report (UCR) and the Bureau of Justice Statistics' (BJS) National Crime Victimization Survey (NCVS), are prone to serious reporting problems. Information on age of offender can be acquired from arrest statistics in the UCR for robbery, aggravated assault, and forcible rape. However, such information is limited by two problems. First, some violent incidents are not reported to the police. Second, identification and arrest of the offender is not always done, even if incidents are reported. For example, in 1995, 45.4% of all violent crimes known to the police were cleared by arrests, including 51.5% of all reported rapes, 24.7% of reported robberies, and 55.7% of aggravated assaults (Federal Bureau of Investigation (FBI), 1996). With such low percentages, the characteristics of arrested offenders may not be representative of all offenders, thus potentially biasing estimated patterns and trends of youth handgun violence.

The NCVS, the second national source of information on violent crime, is based on direct reports by victims of violence. It is a self-report telephone survey conducted with a nationally representative sample of U.S. citizens ages 12 and older. The NCVS has reported information on victimization experiences annually since 1972. It circumvents some of the problems with the UCR by relying on victims' rather than police reports, thereby reducing bias due to either (1) a crime not being reported to the police, or (2) a crime not being cleared by arrest. However, relying on the victim's perception of offender characteristics, particularly an offender's age, is problematic, especially in situations of heightened arousal as in violent confrontations.

Given these problems, the best strategy is to use multiple sources of information on non-lethal youth handgun violence to determine if similar conclusions can be drawn about the problem, regardless of

the source of information used. Hence, in addition to the UCR and NCVS, we also use the Youth Risk Behavior Surveillance System (YRBS) and other sources of information on youth gun carrying (e.g., Sickmund, Snyder, & Poe-Yamagata, 1997). These sources are based on youth reporting on their own involvement with carrying and using handguns. The YRBS survey collects and reports information nationally and by state. It involves a national school-based survey conducted annually by the Centers for Disease Control and Prevention (CDC) as well as state, territorial, and local school-based surveys conducted by education and health agencies. Youth weapons violations are estimated using UCR data for both overall national and state-level arrests.

It is important to note that an additional data source problem arises in analyzing trends and patterns of youth handgun violence. Some data sources do not distinguish between handguns and other guns (e.g., rifles and shotguns) in their reporting. Others report numbers or rates broken down by weapon type, but not age (or age, but not weapon type). This makes examining only youth handgun violence impossible. For this report, we have included as much detail as possible. In places where the term "gun" or "firearm" is used, it represents a data source that does not distinguish among gun types. The terms "handgun," "long gun" (rifles and shotguns), "other gun," and "other weapon," are used to designate more detailed data collection and reporting categories. The following sections outline the current general trends and patterns of rape, robbery, and aggravated assault committed by youth, youth arrests for weapons offenses, and self-report data on youth gun carrying, use, and victimization.

General Trends in Arrest for Violent Crime. Youth arrests for forcible rapes¹ have remained relatively stable between 1975 and 1995. While arrest rates rose approximately 36% between 1975 and 1993, those rates declined by 20% between 1993 and 1995 to the lowest rate since 1983. Similarly, robbery² arrest rates for youth in 1995 were 22% higher than in 1975. Aggravated assault³ arrests, however, have shown much more dramatic increases. The arrest rates for aggravated assaults more than doubled between 1983 and 1995. However, this increase could reflect a larger number of crimes cleared by arrests rather than overall increases in incidents of aggravated assault. Youth arrests for weapons violations between 1975 and 1995 increased nearly 150%, from a rate of approximately 80 per 100,000 youth in 1975 to nearly 200 per 100,000 in 1995. While trends in Colorado have been similar to the nation in terms of youth violent arrest rates, Colorado rates in the early 1990s were higher than national rates. Colorado rates were lower than the national level for the first time in several years, due to declines in youth violent arrest rates between 1993 and 1994. Further, while the youth arrest rate for weapons violations in Colorado has been declining since

\_

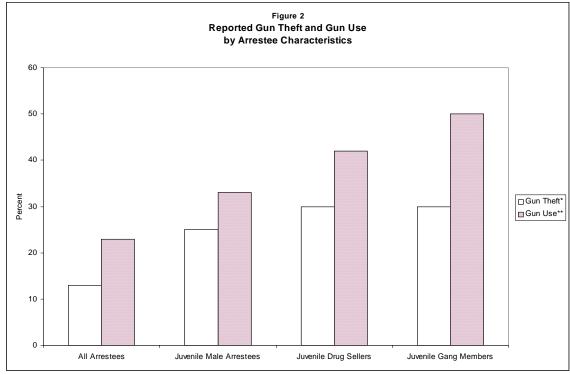
<sup>&</sup>lt;sup>1</sup> Forcible rape is defined by the FBI as: "the carnal knowledge of a female forcibly and against her will. Assaults or attempts to commit rape by force or threat of force are also included; however, statutory rape (without force) and other sex offenses are not included in this category."

<sup>&</sup>lt;sup>2</sup> Robbery is defined by the FBI as: "the taking or attempting to take anything of value from the care, custody, or control of a person or persons by force or violence and/or putting the victim in fear."

<sup>&</sup>lt;sup>3</sup> Aggravated assault is defined by the FBI as: "the unlawful attack by one person upon another for the purpose of inflicting severe or aggravated bodily injury. ...usually accompanied by use of a weapon or means likely to produce death or great bodily harm (attempts are included)."

1993, this arrest rate has been higher for youth than adults in Colorado since 1991 (Colorado Department of Public Health and Environment, 1998).

**Gun Carrying**. Results from a recent Office of Juvenile Justice and Delinquency Prevention (OJJDP) study (see Sickmund, Snyder, & Poe-Yamagata, 1997) indicate that youth offenders are more likely to carry a gun and to have used a gun to commit a crime than their adult counterparts. Twenty percent of arrested young males reported frequently carrying a gun, compared to only 14% of the total survey sample (both adults and youth). Further, 33% of arrested youth who reported owning a gun also reported using one in the commission of a crime (compared to only 25% of all youth and adults arrested). Arrested youth who were either drug sellers or gang members were more likely to steal and use guns during the commission of a crime than other arrested youth (see Figure 2).



Source: Supplementary Homicide Reports

\* Percent of arrestees reported stealing a gun

\*\*Percent of arrested gun owners reported using gun

Guns in Schools. Other studies indicate that the prevalence of youth gun possession goes beyond youth coming into contact with the criminal justice system. In the 1995-96 YRBS, 7.6% of high school students reported carrying a gun at least once in the 30 days prior to the survey. Nearly 5% of high school students and 4% of junior high students reported carrying a gun *to school*, in a 1995-96 PRIDE Survey (Maguire & Pastore, 1997). Nationally, more than 6,000 students were expelled for carrying a gun to school during the 1996-97 year. Handguns were involved in 58% of these expulsions (Bureau of Alcohol, Tobacco and Firearms, 1998). Colorado YRBS data show that Colorado youth carry weapons to school at the same rate as the national average, but they are less

<sup>&</sup>lt;sup>4</sup> The survey sample was taken from individuals arrested and/or detained in the first six months of 1995.

likely to carry guns in other places (Colorado Department of Public Health and Environment, 1998). The YRBS further revealed that, nationally, 8% of all youth and 11% of males reported being injured with some kind of weapon at school in the past year. In Colorado, 10% of all youth and 13% of males reported being injured with a weapon at school. Nationally, 5% of students reported feeling too unsafe to go to school at least once in the thirty days preceding the survey. In Colorado, 4% of students reported feeling too unsafe to go to school (Sickmund, Snyder, & Poe-Yamagata, 1997).

Despite the prevalence of gun carrying in school, school shootings still remain relatively rare events. Since 1992, approximately 175 shooting deaths have occurred in American schools (both student and faculty/staff) (National School Safety Center, 1998). While this is clearly a serious issue, it must be noted that these 175 school-related deaths represent only about 1 percent of all youth killed with guns between 1992 and the present time.

**Summary**. Overall, youth non-lethal violence involving guns has increased in the past two decades. Also, guns affect youth not only as perpetrators, but as victims as well. Youth are three times more likely than adults to be the victims of violence, and one quarter of youth violent victimizations involve the use of a firearm (Sickmund, Snyder, & Poe-Yamagata, 1997).

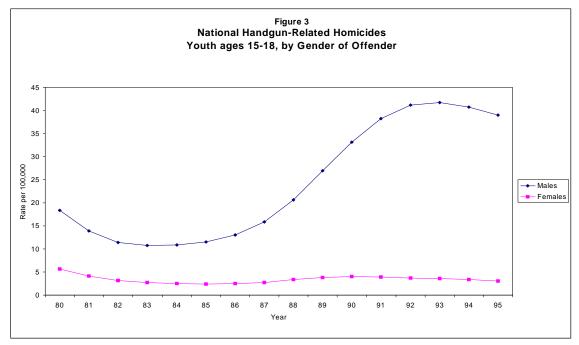
However, increases in non-lethal youth gun violence do not compare to the dramatic increase in the *lethality* of violence committed by and against youth in this country. As more and more youth arm themselves, particularly with handguns that have an ever-expanding technological capability for serious harm, the potential for homicide and suicide grows. Thus, it is extremely important to examine the nature of lethal youth handgun violence, both homicide and suicide.

#### **Lethal Youth Gun Violence**

Lethal gun violence can be documented more accurately than non-lethal violence for two reasons. First, deaths are more likely to be discovered and reported than violent crimes in general, and second, homicides have a much higher clearance rate than do other violent crimes, meaning that more known incidence of homicide result in the arrest of suspected offenders than other violent crimes. Homicide data reported here are taken from the FBI's Supplementary Homicide Reports (SHR). The SHR data provide the richest source of information on the characteristics of homicide offenders. Suicide data is taken from the National Center for Health Statistics (NCHS) Mortality File.

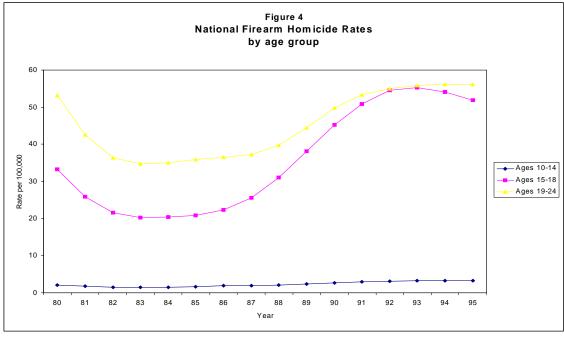
**Youth Homicide**. Males are overwhelmingly the perpetrators in homicide incidents involving youth. They account for over 90% of incidents involving youth 10-17 years of age. Moreover, as illustrated in Figure 3, handgun homicides committed by young males (15-18) between 1980 and 1995, increased by more than 150%, while the rate for females remained low and relatively stable.

Given these striking gender differences, the remainder of this analysis focuses solely on male offenders.



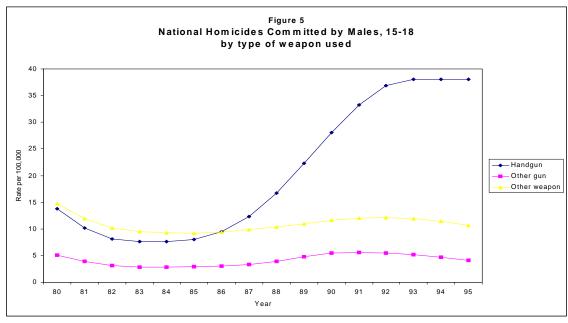
Source: Supplementary Homicide Reports

While trends in homicide rates differ drastically by gender, they also differ by age. Figure 4 shows the national homicide rates for youth 10-14; 15-18; and 19-24 years of age. Since 1980, the rate of homicides committed by youth 10-14 has remained very low and has shown only a slight increase. However, for youth 15-18 and young adults 19-24, homicide rates have increased, with the largest change occurring for youth 15-18.

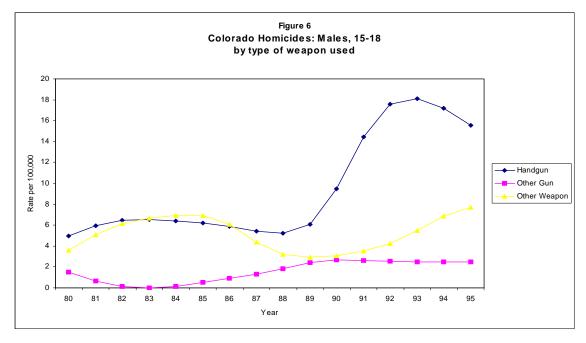


Source: Supplementary Homicide Reports

Young male offenders clearly have driven the increases in youth homicide since the low point of 1984. Given this trend and the focus of this project on handguns, the 15-18 age group of male offenders will be the focus of subsequent documentation of youth homicide trends. Figures 5 and 6 show the youth (15-18) homicide rates, by type of weapon used.



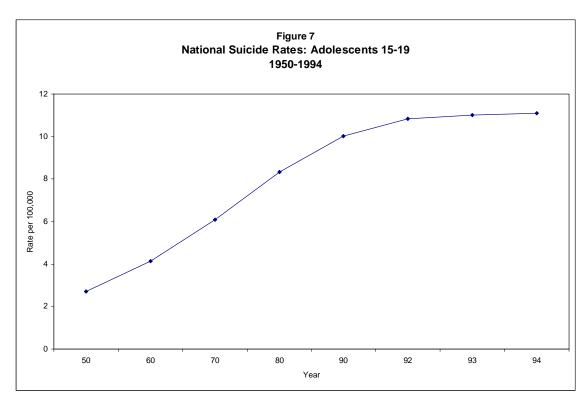
Source: Supplementary Homicide Reports



Source: Supplementary Homicide Reports

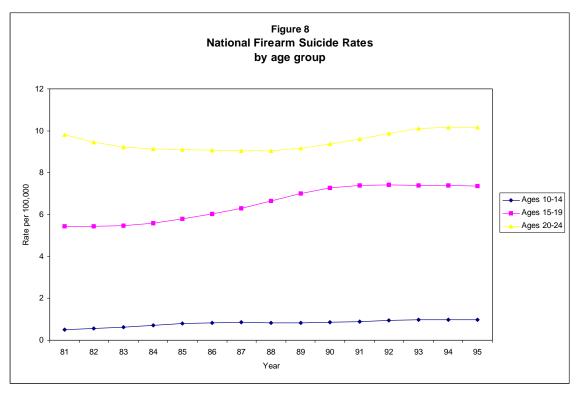
Nationally, the increase in youth homicides has been fueled by the use of handguns. The rate at which other types of guns (shotguns, rifles, etc.) and other types of weapons have been used to commit homicides has remained relatively stable since 1980. However, the trends are slightly different in Colorado. They differ from national trends in that the increase in youth handgun homicides was sharper and began at a later date (1988, compared to 1984, nationally). Most of the increases in youth homicide rates are handgun-related, but unlike the nation, Colorado experienced a small increase in youth homicides involving other guns between 1983 and the early 90s, when they leveled off. Colorado has also experienced an increase in homicide with other weapons in the 1990s that was not present throughout the country.

**Youth Suicide**. National statistics indicate that youth gun violence is not confined to homicide. OJJDP reported that in 1994, for every two youth murdered in the United States, one youth committed suicide (Sickmund, Snyder, & Poe-Yamagata, 1997). In the last half of this century, youth suicide rates have increased by more than 250 percent (see Figure 7).



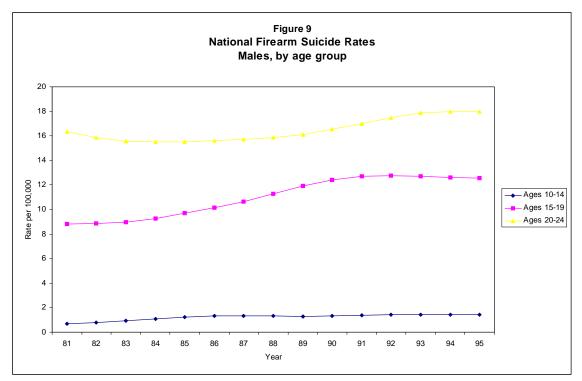
Source: National Center for Health Statistics

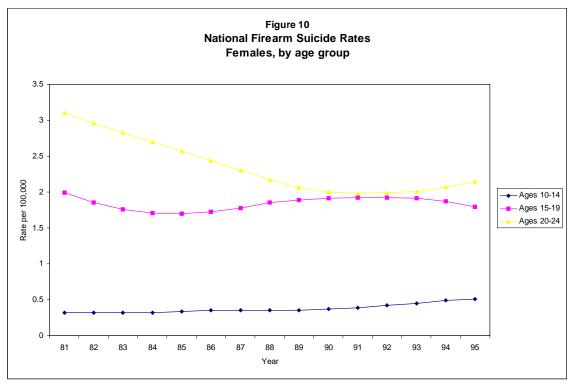
Youth suicide rates increased substantially between 1950 and 1990, gradually leveling at a much higher rate than previous decades. Figure 8 shows that, like homicide rates, rates of gun-related suicide for youth 10-14 remain both unchanged and much lower than for 15-19 year-olds. Gun suicide rates for young adults (aged 20-24) also stayed relatively stable. Only older adolescents (ages 15-19) experienced an increase in gun suicide rates between 1981 and 1995.



Source: National Center for Health Statistics

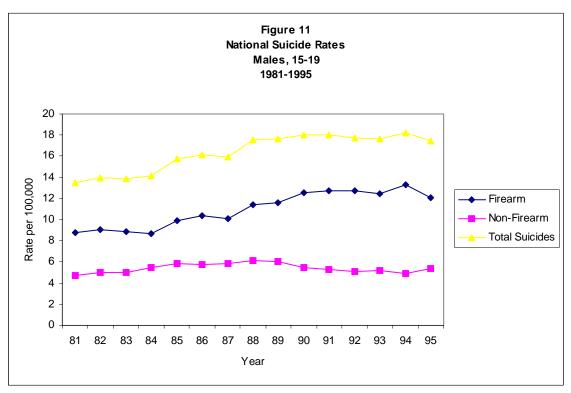
Figures 9 and 10 indicate that gender differences in gun suicides follow similar patterns as gun homicides. While males have experienced some increase in firearm suicide rates since 1981, rates at which young females use guns to commit suicides have either declined or stayed the same, the exception being a very small increase in gun suicides for 10-14 year-old females. Like homicide rates, increases in gun suicide rates indicate that the growth in lethal gun violence remains largely a young, male behavior.





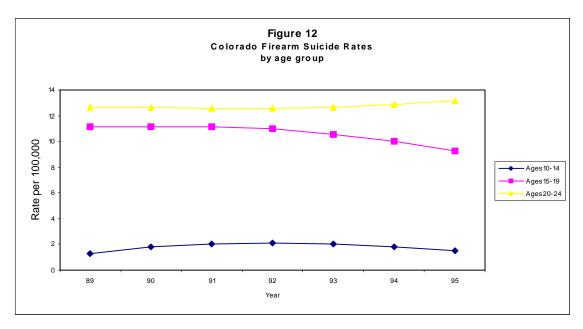
Source: National Center for Health Statistics

While trends in lethal violence primarily involve males, they also clearly involve the use of guns. The homicide data presented showed the recent increases in male homicides involving handguns. Similarly, Figure 11 shows that male suicide rate increases are also being driven by the use of guns. The NCHS data do not allow for the calculation of suicide rates for handguns vs. other types of weapons.

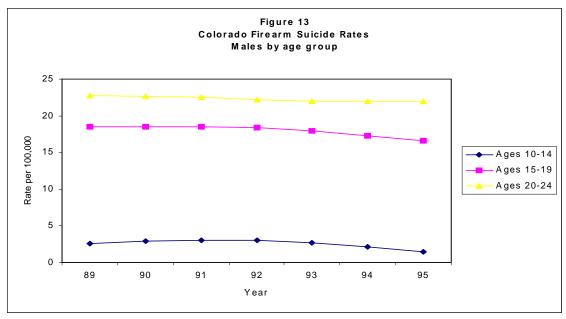


Source: National Center for Health Statistics

Colorado firearm suicide rates, unlike national rates, have shown declines for both 10-14 and 15-19 year olds. However, the gun suicide rate for youth ages 10-14 remains much lower than for older adolescents (see Figure 12).



For both genders, youth firearm suicide rates in Colorado have decreased in recent years, with the exception of 10-14 female gun suicides (and young adult females), that have experienced modest increases. These increases reflect a change from zero to one or two female gun suicides, and therefore are of a smaller magnitude than Figure 14 would indicate. As seen in Figures 13 and 14, while gun suicides for older adolescents, both male and female, are decreasing, the male rate remains much higher than the female rate and has exhibited a much slower decline. This indicates that youth lethal violence in Colorado closely follows the national pattern by being largely a male behavior.



Source: National Center for Health Statistics

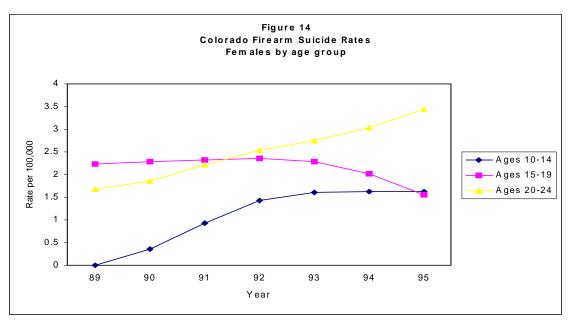
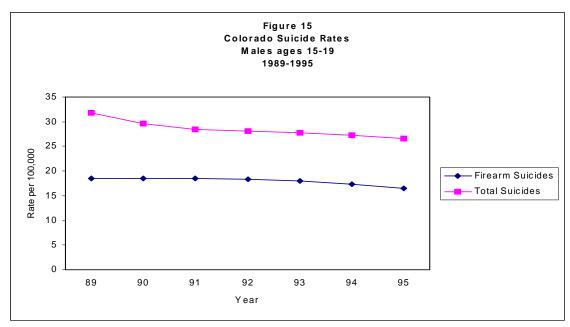
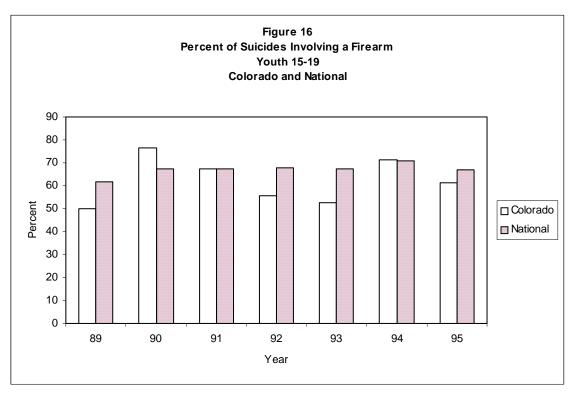


Figure 15 indicates that both firearm suicides and total suicides are declining in Colorado. However, firearm suicide rates have been declining since 1989 at a slower rate than total suicides, indicating that this trend in declining suicide rates in Colorado is due more to a decline in non-gun suicides than in suicides using a firearm. Like suicide trends nationally, firearms are used more often in Colorado youth suicides than any other weapon type (see Figure 16).



Source: National Center for Health Statistics



**Summary**. Guns are playing a lethal role in lives of youth. Both in Colorado and nationally, lethal gun violence has risen significantly. However, it is important to consider that youth gun violence has a very specific and definable character. First, non-lethal youth gun violence does not seem to be growing at the same rate as lethal gun violence. Also, it is largely a male behavior. Female rates of gun violence have always been very low and remain so today. Further, homicide and suicide trends reveal lethal gun violence to be the domain of older adolescents (15-19). Despite widespread attention paid to younger offenders in school shootings, very few younger adolescents (10-14) commit homicide or suicide, and those numbers have not risen substantially in the last 20 years. Youth suicide, while not growing as rapidly or recently as youth homicide, remains at rates that are 2.5 times higher than they were in the middle of this century.

The trends reported above suggest that guns play an increasingly larger role in today's rates of youth suicide and homicide. The use of handguns in particular seems to be driving trends throughout the country and within the state of Colorado. However, the nature of the role played by guns in the lives of youth remains unclear, as does the relative emphasis of reducing youth gun violence by targeting access to guns or focusing more generally on comprehensive violence prevention efforts. Accordingly, we chose to listen to the voices of adults and youth in Colorado to determine what they had to say about these issues. This was done through focus group discussions in rural and urban locations across the state. The results are summarized in the following section.

#### **VOICES IN COLORADO: FOCUS GROUP FINDINGS**

Between April and September of 1998, the Center for Public-Private Sector Cooperation (CPPSC), in collaboration with the Center for the Study and Prevention of Violence (CSPV), conducted focus group discussions about the issue of youth access to, carrying, and use of handguns in Colorado.

CPPSC conducted sixteen (16) focus group discussions in various locations throughout the state with knowledgeable adult and youth respondents, held separately. At each of the following locations, CPPSC conducted two focus group meetings, one with adults and one with youth:

- Durango
- ♦ Grand Junction
- ♦ West Denver
- ♦ Greeley/Weld County
- ♦ Adams County
- ♦ Northeast Denver
- ♦ Colorado Springs
- ♦ The San Luis Valley

In addition, CPPSC conducted one-on-one interviews with several leader/opinion-makers having particular expertise about the issue of youth and handguns.

This qualitative research was conducted with the approval of and in accordance with the procedures of the Human Research Committee of the University of Colorado-Boulder. Consent forms were obtained from all adult focus group participants. Consent forms were also obtained from the parents of all youth participating in focus groups as well as from each youth.

Examples of consent forms are included in Appendix D. All focus groups were given the following instructions and assurances:

- Avoid self-disclosure of sensitive or incriminating information.
- Avoid using the names of anyone who may be involved in handgun or other illegal activities.
- Focus group data is confidential. It is summarized without identification of any individual or group.
- Sessions are tape recorded and transcribed, but all identifying or incriminating information is deleted from the transcript and the tapes are ultimately destroyed.

A fact sheet describing this research project, entitled "A Study of Youth Handgun Violence," was also made available to each focus group (see Appendix E). Generally, adult focus group participants were comprised of local law enforcement officials, youth probation officers and other personnel within the juvenile justice system who work with youth, social workers, and leaders and staff of community-based organizations who work with youth and families. Youth focus groups were

generally balanced between youth having histories of violent/unlawful behavior and youth that did not. Adult focus groups and youth focus groups were asked similar questions to elicit the data sought by the research project. Copies of the specific questionnaires used for adults and youth, as well as details of the focus group protocol, are included in Appendix F. All focus group meetings were facilitated by certified professionals from CPPSC, with assistance from CSPV.

The selection of the focus group locations was the result of deliberations by staff from The Colorado Trust, CPPSC, and CSPV. The purposive selection of sites was guided by the desire to gain rural and urban representation across the different regions of Colorado. Focus group participants were not selected through an equal probability design (e.g., simple random sampling). Rather, participants were selected purposively, based on their knowledge of the handgun issue. Hence, the results of the focus group discussion cannot be generalized to the state and should not be viewed as truly representative of the general Colorado population. However, the results are illustrative of the views informed adults and adolescents have of the youth handgun violence problem in different areas of the state.

The findings reported below generally follow the organization suggested by the focus group questions. Common themes have been distilled from the detailed notes taken by the facilitators and from a computer-based qualitative analysis of tape transcriptions of the sessions using Q.S.R. NUD\*IST software. The findings reflect the data received from the focus groups as well as input from one-on-one interviews with key leaders.

# What is the Prevalence of Youth Access to Handguns?

In response to questions about the extent to which access to handguns by adolescents under the age of 18 is a problem, *adult and youth groups universally reported that access is widespread*. Both adult and youth groups stated that adolescents who were determined to get access to a handgun could do so without significant difficulty. As one youth said, "About half my friends can get a hold of guns or something. They can get them from anyone." Adults echoed such a statement: "Every kid has access. I mean let's face it, if a kid wants a gun he can go find it and get one." However, some noted that "in good neighborhoods and good schools" access is uncommon.

Some law enforcement officials reported that while the total number of juveniles arrested for carrying handguns is flat, or even down, the proportion of first-time offenders charged with handgun violations is up significantly. One criminal justice official noted that arrests for handgun violations rose in the period 1988-93, but since the passage of state legislation on youth and handguns, arrests for possession have declined. This was attributed to the 1993 law, which permits the presumption that a youthful handgun offender is a "danger," and can therefore be held without bond. Prior to 1993, this offense would have resulted in a ticket and no jail time. Now, the "word is out" via the peer network that possession *will* land the offender "in the slammer."

Some respondents noted a significant difference between urban and rural contexts. One focus group participant said that "in this rural community there are lots of guns available but carrying and use are not problems." Others who claimed that rural areas were more apt to teach respect for and safe use of firearms supported this. Many respondents noted that the prevalence of handgun ownership in Colorado translates into easy access for youth. Also, to some extent, attitudes about handgun ownership create a cultural climate that is conducive to easy access.

One respondent noted that it is hypocritical for adults to condemn youth for gaining access to handguns when the legislature and some sheriffs actively oppose most efforts to limit access for adults and actively support routine issuance of permits to carry handguns.

# For Whom is Access, Carrying, and Use of Handguns Problematic?

Both adult and youth focus groups generally concurred that *any adolescent who wants access can achieve it*. Focus groups in smaller communities were more likely to observe that access to, carrying, and even use of handguns is rather uniformly spread throughout their communities, irrespective of social class and ethnic/cultural affiliation. Focus groups in larger cities reported a strong correlation between gang membership, illegal drug trade, and access/carrying/use of handguns. "If you're in a gang, then you have easy access to guns," noted one youth. "And that way you could go and hurt somebody." Some youth reported that gang membership implied with certainty that access to handguns was assured and that carrying and use of those weapons would depend on circumstances of situations they encountered.

Most gang members, you want to kick with the homies, you want to get drunk, you want to get high. You know, then you have to earn respect from your homeboys. That's how you prove yourself. That's why people carry guns.

Most focus group participants related that access to handguns is overwhelmingly a *male issue*. This extended to carrying and use as well. However, in urban areas some youth and adults reported that females were becoming more involved, usually as the carrier of a weapon for a boyfriend or another male. One adult participant noted that females are less likely to be searched by police:

The girls with the gangs are the ones that have the weapons because they're wearing these size 48 waist pants that are hanging down to their kneecaps. And most male cops will not go up to those females and have them pull those pants up and pat them down because of sexual harassment and assault. They're worried about this. They'll go right to the males when the females are standing there. Los Angeles has had several cases recently where an officer patting down a male was shot and killed by a female standing 10, 12, 15 feet [away]. Because that's what they're waiting for. They're holding the weapons. And they're going to protect their people.

Many respondents in various communities reported that "at risk" youth would be much more likely to have access to and carry a handgun. At risk youth are those struggling with personal or social issues that increase the chances of serious violent offending. For example, both youth and adult respondents said such youth are likely to be disempowered, abused, members of dysfunctional and violent families where substance abuse may be present, and to have low impulse control and low self-esteem. The examples below summarize what many youth participants said about peers who carry and use guns.

It's how they grew up. People that are around them. The way they're treated when they're growing up—all your life. How do you think you're going to feel? You're going to be like, I don't care. I know a lot of kids that are like that, that get all weird. All crazy in the head. Because everyone was a jerk to them when they were little and now they don't even care. They'll kill someone like [it was] nothing.

People that have been hurt. I mean basically, gangs, drugs, and someone who's been hurt by someone that's not normally involved with anything.

Many described gun carrying and use as symptomatic of deeper problems these particular youth have, such as failure in school, problems at home, living in an impoverished environment, use of drugs and/or alcohol, and an inability to manage strong emotions such as anger appropriately. Some focus group participants noted that middle class adolescents who are angry at their parents are likely to get involved with handguns.

Respondents, particularly in youth focus groups, also reported that adolescents involved in dealing illicit drugs would be much more likely to have access to a handgun and to carry it. References were made in several focus groups to the correlation between traffic in methamphetamines, cocaine, and crack, and the carrying/use of handguns. They also noted that many male youth, responding to the media glorification of handguns, are quite simply *fascinated and curious* about handguns. "It's just that the kids are curious. They want to know, they're watching. You can't even turn on cartoons without the cartoon characters having guns. And especially with boys, there's a tremendous amount of curiosity," said one adult participant.

# Where Do Adolescents Get Handguns?

There was strong concurrence between youth and adult focus groups that adolescents under the age of 18 get handguns from the following sources, in rough order of priority:

• Parents/close relatives: Respondents reported that theft, or unauthorized "borrowing," of handguns from adults in the same household was the single most frequent source of supply. Some adults noted that it is almost impossible to prevent a determined adolescent from gaining access to a household handgun, no matter how securely the weapon is stored. Youth generally echoed this observation. A few reported that parents and/or close relatives would actually allow them access to a handgun.

- *Other Youth*: Adults and youth reported that there is a sufficient illicit supply of handguns among underage youth to satisfy unlawful demand. Kids can get guns from other kids. Youth in particular reported that they could borrow, "rent," or buy a handgun from friends.
- *Older Adults*: Youth also reported that, like the underage purchase of alcohol, they could get someone they know who is over 18 to buy a handgun for them. Many youth, particularly in urban areas, reported that unlawful retail sales by "street vendors" is common. Often these transactions were described as taking place "out of the trunk of a car."
- Theft and Burglary: Adults and youth focus groups noted that some adolescents would commit thefts/burglaries with the specific intention of stealing handguns. Typically, these respondents noted that adolescents know those households in the community that have handguns (such as gun collectors) and that these households become targets for burglary and theft. Adult groups noted that with household handgun possession rates running between 50% and 65% in Colorado, there is about a 50/50 chance that a burglary committed by an underage youth will net a handgun. Again, however, the most common victims of handgun thefts were reported to be the parents of adolescents.
- *Illicit Vendors*: In urban areas, a few youth, and even fewer adults, reported that illicit "street vendors" would sell handguns to underage youth.

# In What Circumstances Do Adolescents Carry Handguns?

Virtually all respondents, youth and adult, reported that the most common motivation for carrying (and possibly using) handguns was *perceived self-defense or protection*. Adults and youth reported a perceived need to protect themselves from others with handguns, or to prevent victimization from assaults (perpetrated with or without handguns). Youth were more expansive in answering this question, but they generally concurred with adult respondents. Some alluded to the need to carry a gun for protection against predators. They noted the need to "watch your back" or to "be strapped if you're dealing." As one male youth pointed out:

So the only empowering thing I have, the only great equalizer I have, bottom line, is a gun. You know, the cops aren't going to be there to save me. My mom and dad, you know, they're not going to be there. It's going to be you and me. And even if I'm a kid, doing well in school, I'm involved in other things. But you've got to realize there's some situations where if you do everything right, you can still get caught up in a helplessness, where you are at the mercy. And that is the biggest fear, I think, of any child out there is being at the mercy of another child, or a group of children, or adults, and not being able to rely on morals, a sense of justice, or any of those life rules that kind of keep us in line. Not realizing that there are those things that will keep someone from literally killing you. You've got to say, hey, bottom line, I'm going to protect myself.

All suggested that known gang membership/affiliation carried such a great threat of gun violence that having access to and/or carrying a handgun was almost a necessity for protection.

Almost as many respondents reported that adolescents carried guns to show off to their friends. Some reported that youth carried handguns when committing other crimes (burglary/theft) or when involved in dealing illicit drugs.

## In What Circumstances Do Adolescents Use Handguns?

Among all respondents, with the exception of law enforcement and juvenile justice personnel, very few had any direct knowledge of youth who had actually fired a handgun. A few youth reported knowing someone who was shot. Adults and youth alike reported some knowledge of accidental shootings. ". . .they take a gun and they flash it around school. And they don't have any criminal intent, but accidents happen," observed one adult respondent.

Adult and youth respondents basically noted that handguns were used in situations of escalating threat and violence. In many cases, the use of the handgun was limited to flashing or showing the gun in order to alert others to its presence, presumably to create a deterrent effect. One respondent noted that youth carry guns for protection and don't intend to harm anyone.

All they want is protection in case they need it. I say, well, what are you going to do when you pull it out? Are you going to use it? They don't know. They just want to show it off most of the time and say, hey, I've got power. But a lot of times, it's just protection. They don't mean to shoot anybody. Don't want to shoot anybody.

Some gang-affiliated youth or those knowledgeable of gangs in their communities reported that handguns were used to get even with other youth who "dissed" them or for retaliation for previous attacks.

In almost all of the youth and in many of the adult focus groups, the link to drug and alcohol use was made. As noted above, those youth involved in illegal drug trade are highly likely to carry and use handguns. But many youth, particularly those in rural areas, described situations where guns were usually present at community events or at large "kegger" parties in remote locations. As one youth so succinctly put it: "No one sober ever shot off a gun at one of those parties." Many adults and youth pointed to drug and alcohol use as a factor in lowering inhibitions, thus making violent behavior more likely. Some youth, when describing other children they had grown up with or gone to school with, pointed to the time frame (usually between the ages of 12-14) when those youth had started using drugs as a negative turning point.

Adults often noted that handguns were used by adolescents because they do not fully comprehend the seriousness of the consequences, either to the victim or themselves. Some adults and many youth speculated that adolescents are desensitized to gun violence by viewing violent TV shows and films and that this facilitates use of a handgun. A few respondents also reported hearing about handgun

suicides, and some youth knew of other students at their schools who had committed suicide. Some focus group participants speculated that handguns are used by adolescents because they simply are not mature enough to understand the consequences of shooting another person. One participant referred to a media culture of "cartoon violence without consequences." The following quote is an example of the adult comments regarding youth failing to realize the consequences of gun violence:

Society has become desensitized to it, to consequences like that. What the value of human life is. And we talked about it earlier. Youth know the video games, the TV, the movies. You know people are seeing people get blown away all day long. And the value of human life has been decreased because of it. And they don't understand the reality. . .you're looking at life in prison, life in Colorado is life. That means you're going to die in prison. You know, you're talking to kids like that. They don't have a concept of that.

# What Can Be Done to Prevent or Reduce Access, Carrying, and Use?

The most interesting response to questions about access to handguns clearly came from the youth focus groups. Unanimously, they said that *nothing can be done to prevent access*. Their view is that there are so many handguns in circulation (each with a useful life of 20-100 years) that access is easy. One youth put it this way: "If you can't stop drugs and they are illegal, what makes you think you can stop guns when they are legal for anyone over 18?"

Many adult respondents concurred with the adolescents about access, but adults were just as likely to suggest *education programs for adults about safe storage of firearms and tougher legal sanctions* for allowing underage persons to gain access to a handgun. Interestingly, a gun shop owner was quite pessimistic about safe storage. He considered himself very responsible and informed about safe storage, but his son had managed to gain access to a handgun in his home. One criminal justice official who described himself as favoring strict gun control said that parents should assume that their children will encounter handguns during their adolescence or earlier. He therefore had sent his son to a firearms safety program and instructed him about what to do if he sees anyone with a handgun.

What did focus group participants say about solutions to carrying and use of handguns? Youth focus groups generally noted that the kinds of youth that carry handguns are not likely to be dissuaded by any amount of education or threat of consequences. Their view was that these youth carry and use guns for self-defense and that they would "rather be caught with it than without it." Adults tended to focus most immediately on strengthening the juvenile justice system. To some this means swift, certain, and harsh punishment. To others, this means building a rehabilitation system that effectively prevents handgun violence. One pro-gun activist suggested that three things can be done in this area: (1) education, (2) swifter and more certain punishment, and (3) legalization of drugs. Presumably, the latter decriminalizes the drug trade and reduces its propensity for violence.

Among adult respondents, most eventually agreed that the solution to carrying and use of handguns entails *long-term prevention and intervention strategies that build functional families, cohesive communities, and resilient young people.* Most of these adults said parents need more support and help in dealing with the challenges of raising their children and that some need strong support to deal with out-of-control children who may have serious mental health issues. Some noted that it's the "quality of parenting not the number of parents" that is important. Others said that parental rights need to be strengthened as opposed to children's rights. Many pointed to the need for community collaboration to intervene *early* (typically during elementary or middle school) with at risk kids. For example:

It has to be a constant positive reinforcement. That's what we don't [do]. We say education, and I'm all for education, because that's the only way we can teach them. Things happen when you pull the trigger. You point it at someone, something's going to happen. They have to have that trust and reinforcement for them.

It still goes back to very early prevention. About building the families, building the kids that are going to be able to make the choice, have the thought process to make the choice that this is a bad [thing] to do.

One interesting side note: in some youth focus groups, participants were asked if they were ever fearful that a shooting could happen at their school, similar to occurrences in Arkansas, Kentucky, Mississippi, or Oregon. Most youth said no, but those who said they did think about it said, "Yes, and I know who would do it." The youth know who among their peers are at risk.

An issue that surfaced repeatedly, especially in urban areas, was the lack of opportunities available to youth (e.g., economic, educational, and recreational opportunities). Many youth stated, "There's nothing to do here," and many urban youth pointed to the end of busing as a factor in rarely leaving their neighborhoods. Many said that school was irrelevant and wasn't interesting to them. The inability of some youth to envision a positive future for themselves may be linked to a lack of opportunity and exposure to other environments and cultures. When asked if they knew any youth that did not carry or use handguns and why that was so, the youth all said, "They have something else in their lives." Often, "something else" referred to things like having educational goals, going to college, participating in sports, or being active in religious organizations.

Many of the adults who gravitated toward the longer-term prevention or intervention strategies noted that handguns and handgun violence are merely symptoms of dysfunctional and violent homes, schools that don't work, and communities that are in tatters. They noted that asset-building and prevention are much more difficult to "sell" to the public than prosecution and incarceration.

Some adults said that communities are not using the moral force of youth to speak out on this issue, and that efforts should be made to engage youth as advocates and spokespersons on this issue. Some adults also thought that gun safety, hunting with responsible adults, and better education would demystify guns and teach children to treat them safely and with respect.

A particularly articulate gang member said that the best protection for kids is "to be loved and cared for." He noted that when kids don't get this at home, they may find it in a gang.

No one treats them like they need to be treated, so they just don't care what happens. They don't got [sic] anything to look forward to in life. They don't got no [sic] friends, they don't go no [sic] family. So they just don't care . . . Most people that are down, kids that don't care that their family won't show them nothing [sic], so they just go out and hang out with some friends who will.

## What Are the Obstacles to Solving This Problem?

Most participants, youth and adult, noted that *favorable social norms and media glorification of handgun violence made progress on this issue difficult*. One youth group respondent noted, "Don't glorify it. I mean, when you go to the toy store and walk down the aisle, what do you see? Little guns. And they say it looks like a machine gun or whatever it is. And even though those guns may be Styrofoam and full of water, these kids are growing up playing with toy guns. And when they get older, they just want a real gun. They're just tired of the squirt gun and the Nerf gun, and they want a real one." When many parents are handgun owners, it's difficult, according to many adults, to preach "abstinence" to adolescents. Many said that peer pressure and norms constitute formidable barriers to reducing youth access to, carrying, and use of handguns.

Many adults noted that prevention works but that intervention and incarceration are more politically popular. They said that persuading citizens that prevention is a good investment is not easy. In their view, resources are scarce or nonexistent for prevention and social infrastructure-building. In addition, some stated that attention to this issue is inconsistent and not of interest to the general public; when a tragedy occurs, people get mobilized, but soon interest wanes and moves on to other issues. "It's tragic," said one adult participant. "It almost takes a major crime or where somebody has just lost their life for someone to draw attention to it." Some respondents who advocated greater education said that the schools were an obstacle because they refuse to confront the issue and to teach gun safety. Many youth identified fear and the street-level "arms race" as the greatest obstacle to addressing this issue. About carrying a handgun, one young man said, "If I need one, I'll carry it!"

The themes coming out of the focus group discussions should be seriously considered when thinking about action plans for addressing the issue of youth and handgun violence in Colorado. However, these plans should also be informed by prevention and intervention programs that have been tried elsewhere, particularly those that have been evaluated with some measure of success. The following section summarizes a review of such programs.

#### **GUN VIOLENCE PREVENTION PROGRAMS**

The program review consisted of a three-stage process. First, categories of program effectiveness were defined. Second, a search for youth gun violence prevention and intervention programs was conducted. Third, program evaluation information was assessed to identify model and promising programs.

Six categories were used to classify youth gun violence programs according to their effectiveness: model programs, promising programs, favorable evaluation results, unfavorable evaluation results, evaluation in progress, and no evaluation. Categories were determined based on the scientific rigor of evaluation designs that provide varying degrees of confidence in the findings (Neuman, 1994).

Model programs were identified as those that demonstrated a decrease in youth gun violence determined by an evaluation using a classical-experimental design. This category of programs used the highest standard of evaluation and provides the most compelling evidence that outcomes can be attributed to the intervention itself. A classical-experimental design includes five important components which distinguishes it from other designs: pretest, posttest, experimental group, control group, and random assignment of participants to experimental and control groups. These components serve to measure program effects, isolate program treatment and eliminate alternative explanations so that program outcomes can be attributed to the program with a high level of confidence.

*Promising programs* were defined as those that demonstrated a reduction in youth gun violence or risk factors for youth gun violence determined by an evaluation which used a quasi-experimental design. Quasi-experimental designs are variations from the classical design, providing evidence that is less certain than findings produced by classical experiments. For some programs, obtaining a control group or using random assignment are difficult or inappropriate. Designs lacking one of the five components described under model programs results in a variation from the classical design, thus making it difficult to eliminate alternative explanations of findings. One cannot have the same level of confidence that program outcomes are the exclusive result of the intervention.

The favorable evaluation results category was defined as programs evaluated using a preexperimental design demonstrating a decrease in you gun violence or risk factors for youth gun violence. A pre-experimental design typically does not include two or more components of the classical experimental design, generally excluding both a control group and random assignment. Weaknesses in this design result in an inability to attribute outcomes to the program with confidence.

Programs in the *unfavorable evaluation results* category have one or more of the following evaluation results: (1) did not significantly reduce youth gun violence or risk factors for youth gun violence; (2) found evidence of preventive effects for some aspects but not the gun component of the program; and (3) reported mixed results, making the findings inconclusive. The evaluation design used is also indicated for these programs.

The fifth category is *evaluation in progress*. This category includes programs that are currently conducting an evaluation or are planning one for the near future. The evaluation design is specified when possible.

Programs in the *no evaluation* category include programs that have not conducted an outcome evaluation of any type and are not currently planning one. This category may include programs that have conducted a process evaluation, provide anecdotal evidence, or include descriptive statistics. It is important to emphasize that the efficacy of programs in this category is unknown. The program may be effective at reducing gun violence, but without a scientific evaluation, program effectiveness remains unknown.

#### **Program Search**

The second stage of the review process involved conducting a search for youth gun violence prevention and intervention programs. The search was national in scope, with the primary focus on handguns. However, if programs addressed other types of firearms in addition to handguns, they were included in the review. Programs were located through searches on the Internet, Lexis/Nexus, national literature searches, and bibliographic and program reference guides. As programs were identified, they were contacted, and information was requested and entered into a database maintained by CSPV. A program description and evaluation information were requested from each program.

Efforts to contact these programs included: (1) calling them a minimum of five times at different times of the day and week, (2) repeating calls that resulted in disconnected or wrong numbers, and (3) calling directory assistance in the program area to confirm that the program was no longer at that number. If the above actions continued to result in an inability to contact a program, it was listed as "unable to contact," or "no longer in operation." These programs are not included in the review. However, evaluations were available for several programs that no longer exist, and these programs were included in the review. Despite CSPV's efforts to create a comprehensive listing of youth gun violence prevention programs, some programs are not a part of this list because they did not appear in any of the search locations identified above, or they were established after the final program search was conducted.

A recent report published by OJJDP includes programs that we were unable to locate in our original search, mostly law enforcement strategies. A review of their "demonstrated" and "promising" programs did not change our findings significantly, this was due to differences in criteria for defining effectiveness. Specifically, the only categories that would have been affected by including these programs were the evaluation in progress category (n=3)<sup>5</sup> and the no evaluation category. Therefore, these programs were not added to this report. For a list and description of additional law enforcement programs please refer to OJJDP's report, Promising *Strategies to Reduce Gun Violence* (1999).

30

<sup>&</sup>lt;sup>5</sup> These three programs are: Consent to Search and Seize Firearms-St. Louis, MO; Targeted Enforcement Program, Indianapolis Weed and Seed Initiative-Indianapolis, IN; and Child-Development Community Policing (CD-CP) Program-New Haven, CT.

### **Program Assessment**

The final stage of the review involved assessing information to identify model and promising programs. Descriptions and evaluations were assessed according to criteria specified above to determine their effectiveness. This process involved abstracting the information received from the programs into a document that includes the following: intervention type, program goals, target group, risk and protective factors targeted, treatment, evaluation category, evaluation design, evidence of effect, and whether there was a sustained effect. The information was updated periodically. Programs in the process of conducting an evaluation were contacted at their projected date of completion and approximately six months after initial calls were made.

The review has three main objectives. First, it provides a general understanding of how youth gun violence is being addressed in the United States. Second, it determines whether programs are targeting the main entry points for preventing youth gun violence. More specifically, it identifies whether such efforts address access to guns or the demand for carrying or using guns. Additionally, the review organizes programs in terms of the settings for intervention. Third, it assesses the availability of evaluation reports to determine program effectiveness.

To achieve these objectives, programs are described by relevant social settings: societal/community, legal/juvenile justice, neighborhood, family, school, and peers. Under each setting, programs are then grouped by more specific types of intervention. The Gun Violence Program Matrix lists the types of programs that were reviewed under each social setting. Each description includes a delineation of: (1) the types of prevention or intervention efforts implemented; (2) the general content of the program; and (3) the targeted entry points for preventing youth gun violence: access, carrying, or use of guns, particularly handguns. Finally, the review provides an update on the effectiveness of existing youth gun violence prevention and intervention programs within each context.6

	Figur	e 17. Gun Viole	ence Program M	<b>Iatrix</b>	
Societal/ Community-Based Programs	Legal/Justice System Interventions	Neighborhood Prevention and Intervention	Family-Based Prevention	School-Based Prevention	Peer Group Prevention and Intervention
Community Crisis Intervention and Counseling	Law Enforcement Strategies	Educational Outreach	Home Firearm Safety Courses	School Curricula	Peer Outreach
Hospital-Based Injury Prevention	Pre-Trial Release Programs	Revitalization Projects	Family Gun Injury Education	Academic Services and Counseling for Suspended Youth	Hospital Visitation Programs
Community Youth Outreach	Gun Buyback Programs			School Gun Violence Awareness Programs	
Public Awareness Campaigns	Other Justice System Interventions			School Enforcement Strategies	

<sup>&</sup>lt;sup>6</sup> Programs that we were unable to contact or failed to send us information are not discussed in the text but are included in the total number of programs.

31

A sample of 166 programs was identified for the review. Three programs did not have a gun component and were not included in the final program review. The final sample of 163 programs include those that were unable to be contacted (n=6) and those that were no longer operating (n=17).

The review found that while many youth gun violence prevention programs have been implemented across the nation, few have been evaluated for effectiveness. Specifically, of the 163 programs reviewed, none fit our model program criteria, only one fit the promising program criteria, and two showed favorable results. That is, no programs were evaluated using a classical-experimental design showing a significant reduction in youth gun violence. Only one evaluated program showed promising results using a quasi-experimental design, while two others were evaluated using pre-experimental designs, making it difficult to attribute the results exclusively to those programs.

## Societal/Community-Based Gun Prevention/Intervention Programs

Community-based programs are mostly educational in scope; however, some programs provide additional services. Community-based gun prevention programs can be categorized into the following groups: (1) crisis intervention and counseling programs, (2) hospital-based injury prevention programs, (3) community-based youth outreach, and (4) public awareness campaigns.

## **Community Crisis Intervention and Counseling Programs**

Crisis intervention and counseling programs provide support services to victims of gun violence as well as their families and the public. Support services include counseling and education about alternatives to violence. The programs provide a place for victims of gun violence to meet, support each other, and process their grief and anger. The main goals of these programs are: (1) to empower youth, and (2) to prevent them from becoming future victims or perpetrators of violence. Some programs provide additional services such as mentoring, restorative justice efforts, creating violence-free zones, and community presentations.

The intervention points for crisis intervention and counseling programs differ by the type of victim of gun violence. When crisis intervention and counseling are provided to victims, family, and friends of gun violence who are not likely to engage in violent behavior, the intervention does not target carrying, access, or use of guns among youth. Rather, it serves as a coping strategy for victims to process the event so they can go on with their lives. While sometimes victims or family members use this experience to advocate for gun violence prevention, or start a program or public awareness campaign, this is not the intended objective.

In contrast, when counseling and crisis intervention programs target victims of gun violence that are likely to engage in gun violence or have a high exposure to gun violence, the intervention point for the program addresses carrying and use of guns. This is so because victims, family, and friends may be vulnerable yet receptive to alternatives to violence, including a change of attitudes and behavior about gun carrying and use. Providing counseling to a youth immediately after an incident involving

a gun may be especially important when considering that retaliation is one reason guns are used by youth.

The effectiveness of community crisis intervention/counseling programs is unknown. As shown in Table 1, none of the programs have conducted an evaluation or are currently planning an evaluation.

Table 1. Crisis Intervention and Counseling Programs				
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
No Evaluation	Drive-By-Agony	Counseling, grief support, mentoring, and public awareness	Youth	N/A
No Evaluation	HELP For Survivors	Survivor support and public education	Youth & adults	N/A
No Evaluation	Kids Alive and Loved (KAL)	Crisis intervention, violence education, and prevention	Youth	N/A
No Evaluation	Save Our Sons and Daughters (SOSAD)	Counseling, crisis intervention, and violence prevention	Youth & adults	N/A

## **Hospital-Based Injury Prevention Programs**

Three types of hospital-based injury prevention programs have been implemented. The first type involves counseling injured patients of gun violence. The *Hospital-Based Youth Violence Intervention* program consists of six structured counseling components. The structured counseling allows the patients to review and assess the incident while considering their teen homicide risk level and use of conflict resolution skills. Patients also discuss realistic alternatives to violence, their coping skills and support system, and they develop a safety plan. Youth are then referred to services for follow-up or out patient counseling.

The second type of hospital-based injury prevention program involves mentoring, which is sometimes conducted with reality tours of the trauma unit. Young adults or teens are trained to provide mentoring services to patients injured due to violence, and to youth at risk of engaging in violence. Patients are generally provided services while recovering in the hospital and through follow-up. Violence prevention and nonviolent conflict resolution skills are the main focus of the mentoring. For youth at risk of engaging in violence, mentoring is provided in conjunction with a tour of the trauma unit. Youth witness the real effects of violence while considering alternatives to violence.

The third type of hospital-based program consists of gun violence awareness workshops and presentations provided by victims of gun violence. Two hospitals have started programs that provide violence awareness workshops and presentations to youth in schools, prisons, and community organizations. Former patients with disabling injuries have been trained to educate youth about the consequences of gun violence and ways to prevent violent behavior.

Hospital-based injury prevention programs target carrying and use of guns. Regardless of the type of program, whether it provides counseling, mentoring, or gun violence awareness, hospital-based injury prevention programs are designed to reduce the number of violence-related injuries, particularly those involving the use of guns. These strategies provide services to youth when they are experiencing or witnessing the consequences of gun violence and may be more receptive to the alternatives to violence. These programs target youth who have already been injured, and the focus is to intervene and prevent re-injury. In contrast, hospital-based-awareness programs provide early prevention targeting youth who have not been injured.

Whether hospital-based injury prevention programs effectively reduce youth gun violence is uncertain. Table 2 shows that none of the programs have been evaluated, although the Hospital-Based Youth Violence Intervention program is currently conducting a classical-experimental design.

Table 2. Hospital-Based Prevention Programs				
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
Evaluation in Progress	Hospital-Based Youth Violence Intervention	Psycho-educational counseling	12-17 years	N/A
No Evaluation	Hospital-Based Youth Violence Prevention Program	Youth education and trauma unit floor	Youth	N/A
No Evaluation	People Opening the World's Eye to Reality - P.O.W.E.R.	Hospital-based peer advocates for violence prevention	Youth	N/A
No Evaluation	Shock Mentor Program	Mentoring and emergency room tour	Youth	N/A

## **Community-Based Youth Outreach**

Community-based youth outreach programs focus on educating youth and supporting or employing strategies and efforts to reduce youth gun violence. Programs educate youth about the risks of guns through the following approaches: the media, community presentations, one-on-one interactions, or hands-on youth awareness projects. One program provides education and mentoring. Some programs also address goals and implement strategies that are important to the community. Included among these are decreasing the number of guns in the community, supporting law enforcement efforts to disrupt the illegal gun market, truancy prevention, afternoon programs for youth, a safe passage home program, and rehabilitating juvenile gun offenders.

Community-based youth outreach programs target access, carrying, and use through education and youth involvement in community-based gun violence awareness. Programs involving mentoring for youth target carrying and use in a more direct approach. Truancy prevention, afternoon programs, safe passage home programs, and rehabilitating juvenile offenders provide youth with alternatives to violence, gun free routes, and treatment to aid in reducing the risks of youth gun violence.

The efficacy of community-based youth outreach programs is unknown. However, the *East Bay Gun Violence Prevention Project* in Oakland, CA and the *Hands Without Guns Project* in Washington, DC are currently conducting evaluations, although the evaluation designs are unknown.

	Table 3. Cor	nmunity-Based Youth Outreach		
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
Evaluation in Progress	East Bay Gun Violence Prevention Project	Education, youth development, and afternoon programs	Youth	N/A
Evaluation in Progress	Hands With Guns Washington, DC	Public awareness and community-based youth training program	Youth	N/A
Evaluation in Progress	Youth, Firearms, and Violence In Atlanta	Community education and juvenile gun offender rehabilitation	Youth & adults	N/A
No Evaluation	ANDREW	Public awareness, workshops, presentations, and support groups	Youth & parents	N/A
No Evaluation	Hands Without Guns Boston, MA	Public awareness and community-based youth training program	Youth	N/A
No Evaluation	Hands Without Guns Chicago, IL	Public awareness and community-based youth training program	Youth	N/A
No Evaluation	Hands Without Guns Holland, MI	Public awareness and community-based youth training program	Youth	N/A
No Evaluation	MAD DADS	Mentoring and youth outreach	Youth	N/A

## **Public Awareness Campaigns**

Public awareness campaigns are the largest prevention efforts found in this review. Of the 163 programs reviewed, 75 or 46% of the programs are public awareness campaigns. The main goal of these campaigns is to educate the public about youth gun violence and unintentional injury and death. The risks and consequences of youth gun violence are emphasized, along with responsible gun ownership, gun safety, and safe storage. Public awareness campaigns use the media, disseminate fact sheets and relevant literature, and sponsor events. Additionally, a large component of many awareness campaigns is to lobby for legislation that they believe will lead to a reduction in unintentional gun injury or youth gun violence. Some campaigns also distribute gunlocks at reduced prices.

Public awareness campaigns target youth access, carrying, and use of guns; however, most of their efforts are directed at youth access. The efficacy of these approaches is unknown due to a lack of evaluations. For a list of the public awareness campaigns reviewed see Appendix A.

# **Legal/Justice System Intervention Programs**

Several categories of intervention programs within the juvenile justice system have been identified. Most of the programs consist of: (1) law enforcement strategies; (2) pre-trial release classes; (3) gun buyback programs; and (4) additional justice system gun violence prevention/intervention efforts, including gun courts.

## **Law Enforcement Strategies**

Law enforcement strategies typically involve targeted policing of areas or groups of people to reduce illegal carrying, use, and sale of firearms. Strategies of this sort range from a well-researched, problem-solving strategy to simply assigning a number of squads to an area for search and seizure of guns. Several programs have implemented a replication of the Boston Gun Project's problem-solving strategy. It includes: (1) documenting the supply and demand sides of the gun violence problem; (2) providing enhanced enforcement in problem areas; (3) ensuring swift, certain, and severe sanctions are used; (4) cracking down on the illicit firearm markets through trace data; and (5) conducting an evaluation of the project. Replications generally do not include all aspects of the Boston Model, particularly the evaluation component. All of the law enforcement strategies include providing heightened surveillance to areas with a high level of gun violence. However, the surveillance teams vary by project. Some surveillance squads specialize in search and seizure techniques. Others focus on gang-related violence, and some include tracing guns. Some surveillance squads target vehicles, while others focus on identifying the gun traffickers.

Law enforcement strategies target the three intervention points: access, carrying, and use of guns. However, most strategies do not target all three intervention points in a single program, and very little is done on the part of early prevention. These programs focus on treating the problem with sanctions, after an event has occurred. This effort serves to provide youth with a clear understanding of the consequences of violent gun behavior, but little is done to address the reasons youth are carrying and using guns. Law enforcement strategies target the distribution of and access to guns by youth. This is especially crucial for youth, since the illicit gun market is a major source for accessing guns (Sheley & Wright, 1993a, 1993b).

Table 4 provides evaluation results for programs within the justice system context. The *Kansas City Weed and Seed* program is the only program evaluated with a quasi-experimental design and showing promising results. The target area for this program had a homicide rate that was about 20 times the national rate and the second highest number of drive-by shootings of any patrol beat in the city prior to implementation. The Kansas City Police Department increased surveillance in this area, placing four police officers in the area during evening and early morning hours to increase seizure of weapons. Searching automobiles and frisking suspects were the two main methods officers used to seize guns. These methods were done in a fashion to ensure that constitutional rights were not violated.

A quasi-experimental design was used to evaluate the program. Program treatment and results were compared to a control area. Data collected included gun seizure information, crime reports, calls for service, and arrest records. The findings suggest that increased patrols in gun crime "hot spots" can reduce gun crimes by focusing on the seizure of illegally carried guns. More specifically, they indicate that in the target area, gun seizures by police officers increased by more than 65%, while gun crimes decreased by 49%. The rate of gun crimes and guns seized did not change in the control area, and there was no measurable displacement of gun crimes to surrounding patrol areas.

Findings from the *Gun Suppression Program* suggest that while there was a 62% reduction in gunrelated homicides in the target area, there was also some displacement to the west of the target area. With the exception of the *Boston Gun Project*, no other law enforcement strategies have been evaluated. The Boston Gun Project is currently being evaluated.

## **Pre-trial Release Programs**

The second type of justice system program is a pre-trial release class for juvenile offenders convicted of a handgun or other weapon possession or violation. These classes range from a one-time, three-hour course to a 16-session, 2-hour course. The main goals of these classes are to educate youth about the risks and consequences of carrying and using a gun. Many of these programs also focus on providing alternatives to using or carrying a gun. Specifically, these classes provide youth with a realistic understanding of carrying and using a gun by: (1) discussing relevant statistics, (2) gun shot victim presentations, (3) providing a legal understanding of the consequences, (4) weapon expert presentations on the risks of carrying or using a gun, and (5) providing alternatives to violence. Some of these programs encourage or require the parents to attend the classes. Parent classes discuss safe gun storage and the risks of firearms.

Pre-trial release programs primarily target carrying and use of guns. Programs that encourage or require parents to attend also target access to guns. While these programs educate youth about the risks and consequences of using or carrying a gun, they do not address the reasons youth carry and use guns. Many youth do so for protection (Mock, 1994; Shapiro, Dorman & Clough, 1997; Sheley & Wright, 1992), "excitement," "power/safety," due to a "comfort with aggression," and as an "aggressive response to shame" (Shapiro, Dorman & Clough, 1997). For many youth, the risks and consequences are minimal or not enough to deter the behavior. For other youth, the risks and consequences increase their status or provide access to a gang. Discussing the risks and consequences only indirectly addresses reasons for carrying. To change the perspective that gun violence is an appropriate means for gaining power, excitement, and dealing with aggression, classes need to discuss these issues directly and illicit alternative strategies that youth find appropriate for dealing with them.

Only one of the pretrial release programs has conducted an evaluation: *Save Our Streets*, which used a pre-experimental design. The results of the evaluation were mixed. Specifically, improvements in knowledge, attitudes, and skills were detected, but there was also an increase in delinquent behavior. Recidivism data showed that youth who attended more than half of the program were less likely to be arrested for any offense, including a weapon offense, than those who attended fewer than three classes. However, due to the nature of the evaluation design it is uncertain whether the results can be attributed solely to program efforts.

### **Gun Buyback Programs**

The main goal of gun buyback programs is to reduce firearm-related crimes by reducing the number of guns or the availability of guns in a target area. Other purposes of gun buyback programs are to:

(1) provide the community a place to dispose of unwanted guns, (2) raise public awareness about the dangers of firearms not stored safely, (3) change the norms of a gun tolerant society, and (4) create cooperation among local agencies (Elseroad, 1996). To reach these goals, a police station generally offers its facility and personnel time to collect firearms at a predetermined time and location. People turn in guns usually in exchange for money, generally about \$50.00. Some programs have offered other items such as basketball tickets and shoes for guns. Oftentimes these campaigns result from a publicized firearm incident that recently occurred in the area. The meaningfulness of the campaign tends to lead to more acts of altruism in the form of anonymous donations and pledges. The social cohesion and altruistic acts that gun buyback programs build constitute their most positive aspect.

Gun buyback programs target access to guns. In a society where the availability of guns is very high, a gun buyback program would appear to be a promising approach to reducing youth gun violence. However, research has found many limitations to this approach. First, the target population of armed offenders is not likely to turn in their guns. Research suggests that older males or females who have never been arrested were most likely to turn in their guns (Callahan & Rivara, 1992; Rosenfeld, 1996). While some guns are nonetheless removed from the community, the goal of getting guns out of the hands of youth is not met. Second, those who turn in a gun continue to have one or more guns in the home, and some buy another to replace the gun they turned in (Rosenfeld, 1996). In fact, Rosenfeld (1996) found that about a quarter of the respondents who turned in guns during the *St. Louis Gun Buyback* reported that they would buy another one. Additionally, 62% of the respondents had at least one or more guns in the home after turning one in. These findings were similar to the *Seattle Gun Buyback* (Callahan & Rivara, 1992). Such findings suggest that despite participation in the gun buyback programs, many people were not changing toward a gun-free home. Another limitation noted by Rosenfeld (1996) is that high caliber guns, those likely to be used by violent offenders, are not typically turned in to a gun buyback program.

Research on gun buyback programs has not been favorable. The St. Louis Gun Buyback program and the Seattle Gun Buyback program were evaluated using a quasi-experimental design and a pre-experimental design, respectively. The evaluations showed little effect on reducing the frequency of gun-related crimes (Callahan & Rivara, 1992; Rosenfeld, 1996).

### Additional Justice System Gun Violence Prevention/Intervention Efforts

Three other programs within the justice system were found that did not fit in the above categories. A multidimensional program, a gun court, and an inmate rehabilitation program have been implemented to reduce the number of gun-related crimes. The multidimensional program consists of assault crisis teams that monitor, mentor, and mediate youth at risk of committing gun-related crimes. The gun court focuses on providing swift, severe, and certain sanctions for gun-related crimes to deter criminals from carrying guns and to protect the public. The inmate rehabilitation program focuses on educating and rehabilitating inmates who have been gunshot victims to prevent them from recidivating or becoming involved in similar situations once released.

The intervention points for these programs vary. The assault crisis teams provide the most coverage on the continuum of intervention points. Youth at risk of having access to, carrying, or using guns, are monitored, mentored, and provided mediation for disputes. The selected youth are asked to participate in activities such as conflict resolution training, peer-focused violence-reduction education, and a mentoring program. In contrast, the gun court targets carrying and use through court orders or sanctions after a crime has been committed. Finally, the inmate rehabilitation program targets future carrying and use by providing treatment to reduce recidivism.

Little is known about the effects of these types of approaches. However, an evaluation of Assault Crisis Teams is in progress, and more will be known in the near future. Prior research suggests programs that are multidimensional should be promising, but this will not be certain until an evaluation is conducted.

	Table 4. La	w Enforcement Strategies		
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising Quasi-Experimental	Kansas City Weed and Seed Program	Targeted policing-gun interdiction	Youth & adults	49% decrease in gun crimes
Unfavorable Results Quasi-Experimental	Saint Louis Police Department Gun Buyback	Gun buyback	Youth & adults	No significant effects
Unfavorable Results Pre-Experimental	Gun Suppression Program	Gun Interdiction	Youth & adults	Effects displaced
Unfavorable Results Pre-Experimental	Save Our Streets	Pre-adjudication 16-lesson class	Youth 13-17	Mixed results
Unfavorable Results Pre-Experimental	Seattle Gun Buyback	Gun buyback	Youth & adults	No significant effects
Evaluation in Progress	Assault Crisis Teams	Monitoring, mentoring, and mediating services	15-19 year-old males	N/A
Evaluation in Progress	Boston Gun Project	Targeted policing, enhanced enforcement, appropriate interventions and sanctions gun tracing	Youth	N/A
Evaluation in Progress	Handgun Intervention Program	Pre-trial release class, one-time, 3-hour class	Mostly 12-15 year-old males	N/A
No Evaluation	Gun Court	Gun court	Youth & adults	N/A
No Evaluation	Juvenile Diversion Program: Firearm Awareness and Safety Training	Court ordered one-day class	12-28 year-old males	N/A
No Evaluation	Juvenile Weapons Court	Gun court and one-time, 3-hour class	Youth & parents	N/A
No Evaluation	National Gun Buyback	Gun buyback	Youth & adults	N/A
No Evaluation	Operation Cease-Fire: Denver Nuggets Gun Buyback	Gun buyback	Youth	N/A
No Evaluation	Philadelphia Firearms Trafficking Task Force	Interdiction of illegal gun trafficking	Youth & adults	N/A
No Evaluation	Project LIFE (Lasting Intense Firearm Education)	Gun buyback	Youth under 17 & parents	N/A
No Evaluation	St. Paul Police Department Youth Gun Project	Targeted policing, enhanced enforcement	Youth	N/A

## **Neighborhood Prevention and Intervention Programs**

Two programs target the neighborhood as a context for preventing or reducing gun violence. An educational outreach program and a playground revitalization project are designed to reduce exposure to handguns and the number of outdoor injuries, including gunshot wounds among children. In general, these programs focus on educating neighborhood residents about violence prevention and providing a safe place for youth to live, interact, and play. Both of these programs include educating parents and/or youth about violence prevention. The program that only targets youth in the neighborhood focuses on renovating the playgrounds in the neighborhood and providing safe and supervised activities for youth. Results may be enhanced when gun violence prevention education is provided to youth, reinforced by the parents, and the information is realistic for them in their environment or play area.

The intervention points for these programs are access to and use of guns. Specifically, the playground revitalization program assumes that by providing a safe environment for youth to play, along with supervised activities, gunshot wounds (gun use) in that area or among the youth would be reduced. In terms of the education and outreach program, the intervention point indirectly focuses on gun access. The lessons educate parents and youth about handgun "avoidance" and help to mobilize parents to create handgun-free zones in their home or communities.

Table 5 shows that the playground revitalization program was evaluated using a quasi-experimental design. While the program showed a decrease in the number of gun related injuries, this effect was also found in the control area. Under this circumstance, the decrease in the number of gun-related injuries appears to be the result of a general trend in the area, not necessarily due to the program. The other program has not been evaluated, and the efficacy of the program cannot be determined. It is interesting that there are very few programs being implemented in this context, given the nature of the problem. A study conducted by Sheley and Wright (1992) found that street sources are the third most common method for youth to obtain guns. Within the neighborhood setting, gaining access, carrying, and using guns are a likely occurrence. This would make the neighborhood context a promising setting for implementing prevention or intervention efforts. Focusing on the neighborhood as well as the individual may be more fruitful when the environment supports or eliminates barriers to individual behavioral change.

Table 5. Neighborhood Programs				
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
Unfavorable Results Quasi-Experimental	Safe Kids/Healthy Neighborhoods Injury Prevention Program	Playground revitalization and supervision	5-16 years	No significant effects
No Evaluation	Safe Homes and Havens	Gun violence neighborhood awareness	Children (no age range specified)	N/A

## **Family-Based Gun Injury Prevention**

Two family focused gun injury prevention efforts were identified. Home firearms safety courses and gun injury education provided by health care practitioners are designed to educate families about how to reduce gun injuries in the home.

#### **Home Firearm Safety Courses**

Firearm safety courses have two main goals. First, the programs provide youth with the knowledge, skills, and attitudes necessary for safe gun handling and storage in the home. Second, parents are provided with skills to teach their children to act responsibly and safely when encountering an unsupervised firearm. One of the programs targets youth ages 11 to 17, although an adult must accompany youth 11-15. Youth aged 16-17 may attend alone. Participants are not allowed to bring ammunition, and the firing of firearms is not part of the course. This four-hour course is typically taught by a NRA-certified police officer and includes topics such as: children and gun safety, gun parts and operation, ammunition, basic gun safety, gun storage, cleaning, and unloading procedures. The intervention point for firearm safety courses is unintentional use of guns by youth in the home. Gun access is assumed in this situation, and home firearm safety training equips parents and youth with skills and education to prevent unintentional gun injury.

### **Family Gun Injury Education**

Youth gun injury and death in the home has been identified as a public health problem. Pediatricians and health care professionals are often asked to provide gun injury education since they are natural messengers of health and safety information. Kits and curricula on gun injury prevention have been developed for health care professionals to incorporate into medical visits with parents. Kits and curricula have been obtained from the Center to Prevent Handgun Violence or developed within their practice. *Steps to Prevent Firearm Injury (STOP)* and *STOP II* are the kits provided by the Center to Prevent Handgun Violence. The kits are designed for health professionals across all disciplines to prepare them to educate parents about the risks associated with guns in the home and the community.

The intervention point for family gun-injury education efforts targets access and unintentional use. The kits and curricula emphasize the risks for children of having a gun in the home. Guns in the home, particularly guns that are not stored safely, pose a risk for children as well as teenagers. Research suggests that the most common methods of obtaining guns among a sample of inner-city students and juvenile inmates were through family, friends, and then street sources (Sheley & Wright, 1992). This suggests that early prevention focusing on safe gun storage that is continued as youth get older may prevent access for teenagers as well.

The efficacy of gun violence prevention programs in the family context is unknown. None of the programs have been evaluated. Increasing the number of programs targeting parents as well as the knowledge base through evaluations is needed given the research on access to guns.

Table 6. Family Gun Violence Prevention Programs				
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
No Evaluation	Blue Oaks Home Firearm Safety Course	Home firearm safety class	Youth and parents	N/A
No Evaluation	Colorado Medical Society Task Force on Youth	Physician kits for educating parents about the risks of guns in the home	Parents with children	N/A
No Evaluation	A Gentle Touch	10-step violence prevention curriculum	Parents with children age 0-5	N/A
No Evaluation	Home Firearm Safety Course	Home firearm safety class	Youth 11-17	N/A
No Evaluation	Polymath Enterprises	Home firearm safety class	Children of gun owners	N/A
No Evaluation	STOP (Steps to Prevent Firearm Injury) and STOP II	Pediatrician kits for educating parents about the risks of guns in the home	Parents with children	N/A

#### **School-Based Prevention and Intervention Efforts**

Four types of school-based prevention and intervention efforts were identified, including: (1) curricula, (2) counseling and academic services for suspended youth, (3) public awareness and outreach, and (4) school enforcement strategies.

#### School-Based Curricula

School-based curricula are the second most common type of prevention effort and range from targeting youth in Pre-K through 12th grade. In general, these curricula include lessons on violence in the U.S., injury prevention, myths of violence, and alternatives to violence. Posters, videos, handouts, exercises, and fact sheets often accompany lesson plans. School teachers, and in some programs police officers, teach lessons that range from one day, to a semester, to a year. Most of the gun prevention curricula target either early childhood or adolescent stages of development, and a few have curricula for all grades. Programs that target early childhood tend to provide simple activities, coloring books, and posters. Curricula targeting the older age groups tend to provide statistics, fact sheets, discussion material, graphic videos, and alternatives to violence. Some programs provide a curriculum as the main component in conjunction with a public awareness campaign, counseling, victim rehabilitation, and/or a gun reporting campaign. One program is aimed at educators providing "how to" strategies for increasing school safety and preventing weapons-related incidents.

The intervention point for school-based curricula varies depending on the age group and content of the program. However, most curricula do not target access. They tend to assume that youth can or do have access to guns. The few curricula that target access provide lessons aimed at parents addressing safe gun storage and risks of gun accessibility in the home. Curricula for Pre-K up to about 8th grade tend to focus on accidental injury. Curricula for the later age groups target prevention of carrying and using guns. Simple skill building activities, consequences of playing with guns, gun safety, and conflict resolution skills are the main areas of emphasis. For the later grades, it is also assumed that

youth have access to guns, and the intervention focuses on carrying and using guns. That is, most of these programs seek to prevent carrying and use by suggesting alternatives to using guns in conflict situations, discussing peer pressure, and teaching refusal skills related to violence and weapon possession. This approach educates youth about the risks of guns, with the intent to change or influence norms around guns. Curricula that also offer public education campaigns widen the target group in an effort to reinforce what youth are learning in school. Curricula that include a reporting aspect incorporate consequences that are consistent with their lessons, with the goal of reinforcing norms against guns in the school environment. While these approaches seem theoretically appropriate, the research results are mixed.

Table 7. School-Based Curricula				
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
Favorable Results Pre-experimental	Handgun Violence Reduction Program	Gun violence prevention lessons that can be incorporated into a core subject	7 <sup>th</sup> and 9 <sup>th</sup> grade youth	Knowledge, attitude and behavioral projection increased
Favorable Results Pre-Experimental	Safe Alternatives & Violence Education (SAVE)	One-day violence awareness class	Youth 10-18 and parents	69% had no subsequent offense
Unfavorable Results Quasi-Experimental	Solutions without Guns or Violence: The Peacemaker Program	Gun violence prevention 17-lesson curriculum	4 <sup>th</sup> -8 <sup>th</sup> grade	No significant effect on weapon component
Unfavorable Results Quasi-Experimental	Think First For Kids	Six week, one-hour-per-week curriculum	2 <sup>nd</sup> -3 <sup>rd</sup> grade	No significant effect on weapon component
Evaluation in Progress	Straight Talk About Risks (STAR)	3 weeks of lessons that can be incorporated into a core subject	Pre-K-12 <sup>th</sup> grade	N/A
Evaluation in Progress	Oklahoma Department of Health- School Safety Curriculum	25 lessons that are designed to be integrated into a core subject	Youth 5-12	N/A
No Evaluation	Firearm Injury Prevention	18-lesson curriculum on firearm risks and consequences	K-8 <sup>th</sup> grade	N/A
No Evaluation	Gun Safety Awareness Program	Curriculum guide - Kids and Guns: A Deadly Equation	K-12 <sup>th</sup> grade	N/A
No Evaluation	Eddie Eagle Gun Safety Program	Five lessons on gun safety	Preschool-6 <sup>th</sup> grade	N/A
No Evaluation	No Guns For Me!	20-lesson curriculum that can be incorporated into a core subject	3 <sup>rd</sup> - 10 <sup>th</sup> grade	N/A
No Evaluation	Reading, Writing & Weapons - Nonviolent Crisis Intervention	5-section educator training video for increasing school safety & preventing weapon- related incidents	K - 12 <sup>th</sup> grade	N/A
No Evaluation	Virginia Youth Violence Project - University of Virginia	4 to 45 hour youth violence prevention course	Youth in target area	N/A
No Evaluation	Violence Prevention Curriculum	Curriculum that can be incorporated into a core course	K - 12 <sup>th</sup> grade	N/A
No Evaluation	Making the Peace Curriculum	15-session violence prevention curriculum - with session on guns	Youth 12-18	N/A
No Evaluation	Options, Choices & Consequences	Two, 50-minute sessions on consequences of youth gun possession & related violence	Youth 14-17	N/A
No Evaluation	Tragic Consequences	Lesson plans & 48-minute video on the consequence of gun violence	7 <sup>th</sup> - 12 <sup>th</sup> grade	N/A
No Evaluation	Violence Prevention Project	10 lessons on violence prevention, including guns	Youth	N/A

Table 7 provides the evaluation information for the school-based curricula, illustrating that two of the four that have been evaluated show preventive effects, and two programs have failed to show such results for the gun component of their program. *Safe Alternatives and Violence Education* (*SAVE*) is a one-day, six-hour violence awareness class for juvenile offenders (10-18) and their parents who have been caught in possession of a weapon on or near a school campus. The goals of the program are to reduce violent youth activities and weapon possession, to increase youth awareness of the consequences and offer alternatives to peer-pressure, anger, and conflict situations, to increase youth and parent interaction, and to provide an alternative to schools besides expulsion for weapon offenses. SAVE includes several program components: violence desensitization, anger management styles, self-esteem building, refusal skills training, and strategic choice making; parenting skills and awareness; the reality of violence; reality checks for participants; and goal-setting.

SAVE was evaluated with a pre-experimental design consisting of a one group pretest-posttest. Probation records for the sample of youth were collected to determine recidivism. The findings indicated that of the 620 students and 611 parents who attended SAVE, 86% had not been cited for a new offense within six months of the program, 81% remained violation-free within 12 months of the program, and 78% remained violation-free within two years of the program. However, the findings should be interpreted with caution since the design does not allow them to be attributed entirely to the program, primarily because no comparison group was used.

The *Handgun Violence Prevention Program* is a school-based curriculum that has three objectives: (1) to reduce handgun related injuries and deaths, (2) to reduce handgun thefts, and (3) to provide handgun safety awareness education. The program targets 7th and 9th grade youth. The curriculum includes descriptions of the extent of violence in American society, why violent acts occur and how victims feel about violence, ways conflict situations can be handled non-violently, the effects of the media on children's perceptions of violence, how America compares to other countries concerning violence, the role handguns play in the commission of violent crimes, problems in the criminal justice system that complicate the problem of violent crime, what to do to increase the odds of surviving a violent attack, and the difference between real violence and fictional violence.

The program was evaluated using a pre-experimental design that included a one-group pretest-posttest and a three to four-month follow-up. Changes in attitudes, knowledge, and behavioral projections and exposure were examined, but actual behavioral outcomes were not measured. Seventh graders had significant increases in positive attitude, behavioral projection, and curriculum knowledge. The same was true for ninth graders. However, levels of knowledge, behavioral projection, and positive attitudes declined following the cessation of the program, but overall exposure to gun violence remained lower after program participation.

Whether preventive effects can be attributed to program SAVE or the Handgun Violence Reduction Program is questionable since both evaluations were conducted using a pre-experimental design; that is, lacking a control group. Concerning the other school-based curricula, programs with the strongest methodological designs show no significant difference or improvement for the gun component of the

program. These findings are more conclusive. The evaluation results suggest that curricula aimed at 4th through 8th graders and 2nd and 3rd graders have had no appreciable effect on weapon related issues.

### **Academic Services and Counseling of Suspended Youth**

Three programs provide counseling and academic services to youth suspended for weapons violations. Such interventions enable suspended youth to continue their education and seek counseling for their actions while they are suspended from school. The suspending school provides the youth with academic assignments to be completed during their suspension. Program staff provide youth tutoring and assistance with assignments as well as additional assignments when needed. Youth are required to participate in individual and group counseling regularly. Some programs also provide social and psychological assessments conducted by a guidance counselors, violence prevention awareness and curriculum training, and job referrals for youth older than 16.

School suspension programs that provide counseling and academic services to youth suspended for weapons violations target carrying and use. These programs assume that suspending youth without treatment or the ability to continue academic progress is insufficient and possibly detrimental for behavioral change. Rather, programs of this sort assert that combining suspension with academic progress, counseling, and in some cases, violence prevention awareness, is a better prescription for change. Considering that a suspension will result in youth having more unsupervised time on their hands, with an increased risk of falling behind academically, it seems at least necessary that a program interested in behavior change provide these services. Counseling for a suspended youth would help facilitate cognitive change at a time when they are experiencing consequences for their behavior, perhaps encouraging the use of alternatives to violence. Providing academic services does not directly target use and carrying of guns, but it may help prevent youth from finding themselves deeper in an antisocial setting.

Table 8 provides the evaluation information on programs for suspended youth. It is uncertain whether these programs are effective at reducing further carrying and use since none of these programs have been evaluated. However, the *Boston Public Schools Counseling and Intervention Center* (formerly the Barron Assessment and Counseling Center) is being evaluated and should provide some insight in the near future. Based on the program's recidivism rate for weapon offenses, it appears promising. The program has maintained a 4-5% recidivism rate for second offenses involving weapons since it began in 1987.

	Table 8. Counseling and Academic Services for Suspended Youth				
Evaluation Category	Program Name	Program Type	Age Group	Effect	
Model	None				
Promising	None				
No Evaluation	Boston Public Schools Counseling and Intervention Center	Counseling, psycho-educational assessment, and academic services	High school	N/A	
No Evaluation	Hazelwood Center High School Student Intervention Program	Counseling and academic services	High school	N/A	
No Evaluation	Second Chance School	Counseling, tutoring, mentoring, and academic services	Middle and high school	N/A	

## **School Gun Violence Awareness Programs**

Public awareness campaigns focusing on youth gun violence can be found in school settings and are sometimes conducted by students. While school gun violence awareness programs are not as widespread as community-based programs, the idea of reinforcing norms against gun violence in more than one social setting may be more fruitful than restricting it to just the community. Generally, school-based awareness programs consist of community representatives such as school administrators, law enforcement personnel, health care practitioners, and sometimes students interested in the prevention of gun violence. Representatives provide schools with gun violence education materials, presentations and discussions, videos, and sponsor rallies and conferences. Other strategies include ribbon campaigns, gun turn-in projects, essay contests, and poster distribution. These programs help to ensure that messages against youth gun violence are heard in more than one context and in a realistic manner that is different from what is seen on television and in the media.

School-based gun violence awareness programs target access, carrying, and use through education and morality-based campaigns. While this approach appears to address youth access, carrying, and use in a peripheral manner that does not permeate the students every day life, it plays a role that is consistent with other educational campaigns in the community. Unlike schools that receive a presentation here and there, programs that are based in the school provide continual education and activities to change the moral fabric of the school around the gun issue. These approaches provide information about guns that help dispel myths provided by violent movies and the media and educate youth about the risks and consequences of guns.

	Table 9. School-Base	d Gun Violence Awareness Prog	rams	
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
No Evaluation	Build the Missing Peace	Student outreach, gun turn-in, and public awareness campaign	Children & youth	N/A
No Evaluation	Guns, Teens and Consequences	Gun violence prevention / anti-weapons video presentation	Middle & high school students	N/A
No Evaluation	GRIEF - Gun Responsibility in Every Family	Classroom presentations	Children, youth, & adults	N/A
No Evaluation	Gunwise - Wake Up America Program	Multimedia presentations to youth and educators and poster campaigns	Children & youth	N/A
No Evaluation	Kelsey's Pizzaria School Gun Program	Student, parent, and principal contracts to keep guns out of school	Middle school students	N/A
No Evaluation	Students Against Handgun Abuse	Student-based awareness campaign	Youth 13-21	N/A
No Evaluation	Student Pledge Against Gun Violence	Student-based awareness campaign	Primary & secondary schools	N/A
No Evaluation	WARN - Weapons are Removed Now	School presentations and anonymous reporting campaign	K - 12 <sup>th</sup> grade	N/A

The evaluation information provided in Table 9 on School Gun Violence Awareness programs shows that it is uncertain whether these programs are having a preventive effect on youth access, carrying, and use of guns. None of the programs have been evaluated, and none of the programs have current plans to conduct evaluations.

## **School Enforcement Strategies**

School enforcement strategies seek to prevent students from bringing guns to school and to identify youth that have brought them, with the goal of reducing the number of weapon-related incidents in school. Three types of enforcement strategies have been found: school policies, the use of metal detectors, and reporting of weapons. School policies provide students, school officials, and teachers with a clear understanding of the consequences of bringing weapons to school, including immediate suspension, police arrest, and investigation for possible expulsion. The rights and responsibilities for teachers, parents, and law enforcement officials in dealing with students involved in weapon offenses are outlined by the policy, and in some cases students are required to sign a contract that states their understanding of the policy.

A more direct strategy has been implemented in New York Public Schools where hand-held metal detectors are being used by school security to reduce the number of weapons brought to campus. School security officers have been trained to conduct unannounced lobby searches of students with the hand-held metal detectors.

The last strategy is a reporting campaign where students can anonymously call a hotline to report information about other students bringing weapons to school. Callers are given a five-digit code to claim a \$100 reward for the arrest of a gun carrier and a \$50 reward for the arrest of a carrier of weapons other than guns. Once a call is received the police are dispatched to the school where

officers conduct an investigation. The hotline number is advertised in public service announcements, on flyers distributed at PTA meetings, and on school bulletin boards.

School enforcement strategies target student carrying and use of guns. The potential effectiveness of these strategies requires school officials to inform youth of the policy on gun use and to follow through with the consequences stipulated. Limitations of this approach include: (1) youth who feel they have nothing to lose, (2) youth that receive rewards that are greater than the punishments for carrying and using guns, (3) and the failure to address other reasons youth carry guns. Metal detector strategies seek to deter students from bringing or carrying guns to and at school through random searches. Reporting campaigns target both carrying and the possible use of guns. While this approach begins as an intervention that stops students who have been identified as carrying and perhaps threatening to use a gun, it may result in preventing these incidents after enough youth have been caught. This approach also serves to lessen fear among youth who may otherwise bring a gun to school for protection. However, youth who carry and use for both protection and status may not use a hotline to protect themselves. It may simply not address the motivation for such behavior.

The efficacy of school enforcement strategies is unknown. Table 10 shows that none of these strategies have been evaluated, and there are no known plans to conduct an evaluation.

Table 10. School Enforcement Strategies				
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
No Evaluation	New York City Metal Detector Program	Lobby searches with metal detectors	Students	N/A
No Evaluation	State Attorney General's Law Enforcement/Education Task Force	School-based zero tolerance statute for firearms and school violence	Students	N/A
No Evaluation	Weapon Watch	Anonymous weapon reporting hotline	Students	N/A
No Evaluation	Zero Tolerance Program	School-based zero tolerance policy for weapon possession on school property	Students	N/A

## **Peer Group Prevention and Intervention Efforts**

Peer education, outreach, and hospital visitation are the main types of prevention and intervention efforts pertaining to peer groups. Peer education programs predominate, while remaining a strong component for the other two types of efforts. The main goal of peer education programs is to prevent or reduce violence among youth through education by prosocial peers. Several methods are used to achieve this goal. Not all methods are used by all programs. First, programs train youth to provide presentations in schools and in the community. The main focus of the presentations is to educate youth about the impact of violence on youth and suggest strategies for prevention. Second, a few programs use the media to inform youth about methods of becoming leaders in preventing violence. Last, for some programs, youth leaders play an active role in urging policy makers to take action in preventing violence.

#### **Peer Education**

Peer group prevention programs are designed to prevent carrying and use of weapons through education. The programs educate youth about violence prevention through topics such as communication skills, stories of personal experiences by victims of gun shot wounds, prosocial leadership, combating peer pressure, understanding the risks of using alcohol and drugs, and fear. While several topics appear to address issues of carrying and use, it is uncertain whether education alone will affect the population of youth most at risk of engaging in gun violence. The literature suggests that protection (Mock, 1994, Sheley & Wright, 1992) or "power/safety" (Shapiro, Dorman & Clough, 1997) are primary reasons youth carry and use firearms. These programs assume that addressing the issue of fear or the risks of carrying and using guns will have some impact on the problem of youth gun violence. However, a more focused intervention on the issues of fear and need for protection may have a greater effect. Additionally, the age appropriateness for youth gun violence or weapon related education has not been addressed in the research, and it is uncertain when youth gun violence education is most effective for different age groups.

### **Peer Outreach and Hospital Visitation Programs**

Other interventions are peer outreach and hospital visitation programs, designed to reduce youth violence through a peer focused intervention that occurs after a youth has either been identified as a "gun carrier" or is recovering from gun shot wounds. Youth are trained to become mediators or to provide support to their injured peers. These programs provide more one-on-one interaction than a peer education program and specifically target the youth gun carrying and using population. They use prosocial peers as examples or teachers to help other youth understand the consequences of using or carrying a gun and other ways to solve conflicts.

These programs target carrying and use of guns, identifying youth at an intervention point which for some is late but important. The task is more difficult for the program that focuses on identifying youth as gun carriers and users. It requires providing youth with realistic alternatives to using guns for solving conflict that will be positively reinforced. Many youth think that conflict resolution techniques are "stupid" and are not "cool." Changing this perception is the biggest task for this program. However, this problem may not be as difficult for the program that provides peer support to victims of gun shot wounds. The hospital visitations and follow-up may be a good time to present issues of violence prevention and methods of nonviolent conflict resolution skills since youth are faced with the harsh consequences of methods that they believed were cool or provided status.

The focus of these programs is to convince injured youth not to retaliate against those who caused the injuries and to teach them alternatives to gun violence. While achieving this would be a major step in the right direction, there are several other reasons youth carry guns, none of which are addressed by these programs. They do not directly address changing norms that support carrying or using a gun for status, to get attention, or for retaliation.

The evaluation information presented in Table 11 indicates that none of these programs have been evaluated, and it is uncertain whether they are effective at reducing youth access, carrying, and use of guns. However, Teens on Target is currently being evaluated. Evaluation efforts within this category seem especially crucial since the peer group has extremely strong effects on delinquency and violence among youth (Elliott, 1994).

Table 11. Peer Group Intervention and Prevention Efforts				
Evaluation Category	Program Name	Program Type	Age Group	Effect
Model	None			
Promising	None			
Evaluation in Progress	Teens on Target - Oakland	Peer education and teen advocacy	Elementary & middle school	N/A
No Evaluation	Caught in the Crossfire	Peer hospital visitation	12-17 years	N/A
No Evaluation	Keep Our Kids Alive (KOKA)	Peer education	Youth (specify)	N/A
No Evaluation	Pioneers for Peace	Peer education by teenage victims of violence and gun violence	Youth 15-24	N/A
No Evaluation	Teens on Target - Los Angeles	Peer education and teen advocacy	Elementary & middle school	N/A
No Evaluation	Words Not Weapons	Peer education	Youth 14-18	N/A

Peer group programs tend to focus on adolescent carrying and use of guns and to provide peer guided alternatives to gun violence. In general, this approach addresses the problem of youth gun carrying and use by educating youth about the risks of using or carrying a gun or by imposing a change in normative means of solving conflict or other problems. There are two limitations to the latter component of this approach. First, it fails to provide meaningful alternatives for using or carrying guns. Second, the programs only provide alternatives for solving conflict and do not address appropriate alternatives for other reasons youth carry guns, such as attaining status, getting attention, or retaliation.

#### SUICIDE PREVENTION PROGRAMS

CSPV contacted 389 suicide programs operating throughout the country. These programs were located through searches on the Internet, the Lexis/Nexus database, additional national literature searches, and bibliographic and program reference guides. Additionally, CSPV staff contacted national suicide, injury prevention, violence prevention, and mental health organizations for program lists, directories, and referrals. For a listing of suicide programs and organizations, please see Appendix B.

Priority was initially given to youth suicide programs that operated on a local/community level. These programs were categorized according to the CDC 1992 guide to suicide prevention programs (see Appendix C). Local community programs were characterized as (1) gatekeeper training for adults and/or peers; (2) youth educational presentations or curricula; (3) public awareness and information dissemination campaigns; (4) crisis intervention, counseling and support services; and (5) aftercare, "postvention," and survivor support. Due to initial limited results regarding local/community programs, the search was subsequently broadened to include regional and statewide programs and programs which provided support for both youth and adults.

Few crisis lines were contacted directly. However, a national listing of suicide crisis lines was reviewed (National Directory of Suicide Prevention, 1997). These programs were not extensively included in this report for two reasons. First, they did not incorporate the use of guns in suicide into their intervention efforts. Second, these were regional, state or national, rather than community-based programs. Additionally, suicide survivor groups are not included because these efforts operate outside the realm of prevention, and they also fail to incorporate information on the role of guns in suicide in their efforts.

#### **Suicide Prevention Strategies**

The direct suicide prevention programs contacted focus on providing information regarding risk factors for suicide, warning signs, education on handling depression, and resources for appropriate referrals for potentially suicidal youth. These efforts are generally directed towards two audiences (either individually or together). Gatekeeper education focuses on training for adults and youth to identify, support, and refer those who may be at risk for attempting suicide. Additionally, programs may target general youth who themselves may be at risk. These programs include education on handling depression, seeking support, and sites where assistance can be sought. They often incorporate self-esteem and social competency development into their educational programs.

#### **Public Service Campaigns**

These programs generally focus on a broad-based educational effort to facilitate awareness regarding the problem of suicide, how it may be prevented, warning signs, intervention strategies, and crisis resources available.

### **Suicide Intervention Strategies**

These programs target either immediate suicide prevention or intervention after a suicide has been threatened, attempted, or completed. Crisis Centers and Hotlines provide immediate counseling (usually by telephone) to suicidal individuals who seek assistance. "Means Restrictions" programs focus on restricting access to handguns, drugs, and other lethal tools that are commonly used to commit suicide. Interventions that occur after a suicide has occurred, often referred to as "postvention," generally focus on members of the community after one or more youth have committed suicide, or on the "survivors" of suicide, including a person's close friends and family. These programs focus on coping with loss and grief, partially in an effort to prevent "cluster" suicides (meaning suicides prompted by the suicide of a friend or loved one).

## **Suicide Prevention with Gun or Handgun Components**

Of the 389 programs reviewed, only 17 specifically included a component targeting the use of guns in youth suicide. Six of these were school-based programs, while the remaining twelve were community-based programs. Most of these efforts focused on education regarding guns as the most common means of youth suicide and that a gun in the home represented a significant risk factor for suicide. Some programs identified youth fascination with or display of guns as an important warning sign or risk factor. The following sections describe the 17 suicide programs that directly address guns and discuss evaluation results for each, where available.

## **School-Based Programs**

School-based prevention programs included those targeting gatekeepers, either adults, youth, or both, and programs that focus on general suicide prevention education (see Table 12). Unfortunately, few evaluation results are available, so little is known about the efficacy of these programs.

The *Team Up to Save Lives the CD-ROM* program, developed by the Institute for Juvenile Research at the University of Illinois-Chicago, is designed to provide a framework which schools can use to create effective suicide prevention programs. This package includes instructional videos for parents and educators that focus on communication techniques for educators to use with at risk youth, detailed lessons on suicide risk factors, warning signs, intervention, means restriction, and crisis intervention techniques. Program users can also print out a five-page risk-assessment, review the steps of suicide intervention, learn how to enlist the aid of parents and mental health professionals, and receive information on available suicide prevention resources. Access to guns as a risk factor and the most common lethal means of suicide are addressed in this curriculum. Each CD-ROM includes self-assessment instruments for the program. However, currently no evaluation data are available for the curriculum.

A similar gatekeeper-training program, *Gryphon Place*, trains both adults and peer/adolescents in suicide intervention. School faculty are trained to recognize potentially suicidal students and to understand intervention strategies for working with suicidal youth. Additionally "Parent Night,"

sessions are offered to provide information on suicide in general and on the "Gatekeeper Program" for students. These sessions are designed to both educate the community about suicide and to discuss parental concern about the student curriculum. The Gryphon Place program also includes a four-lesson curriculum presented in four, one-hour class sessions focusing on: (1) self-esteem and coping skills; (2) choosing positive skills, teenage stressors, and substance abuse; (3) communication and intervention skills; and (4) resources available for help. Limiting youth access to guns, plus other forms of safe and responsible gun ownership, is addressed among many topics during all gatekeeper training activities for adults, as well as in general suicide prevention/intervention information services provided by Gryphon Place to the public. Access to guns in the home is addressed as a risk factor for suicide within the program. Statistical data on suicide distributed by the program includes information regarding suicide by firearms as the most common method.

Initial, pre-experimental, evaluation results of the Gryphon Place program show modest increases in knowledge and attitudes towards suicides in all seven of the schools in which the program was implemented. Scores on a 14-point test measuring knowledge of risk factors and warning signs, identifying and intervening with suicidal youth, and attitudes towards people who attempt or complete suicide improved between 18% and 30%, depending on school, with the largest improvements occurring in the two special education classrooms in which the program was implemented. While these initial results are encouraging, it is not possible to attribute all of the change in knowledge and attitudes to this specific program, nor is it certain how this change may translate into behavior. Unfortunately, the impact this program may have on actual suicide threats, attempts, or completions is unknown at this time.

Another program with some encouraging initial indicators is *Project SOAR* (Suicide Options Awareness Relief), which is implemented district-wide in the Dallas Public Schools system. This program, like Gryphon Place, also combines adult gatekeeper training with a student curriculum for youth in kindergarten through twelfth grades, although the primary emphasis of this program is the adult component. Several varying efforts are combined in this strategy with the intention of creating a school environment which promotes mental health and in which coping skills are taught to students. Parents are given opportunities to learn parenting and communication skills. School faculty participate in suicide awareness sessions, where they learn to identify suicide risk factors, warning signs, and procedures for obtaining assistance. Additionally, a five-lesson suicide prevention curriculum is taught in health classes. Students are taught to identify at risk peers, risk factors, warning signs, and how to provide support and appropriate intervention. The most heavily stressed component of this program is the extensive training sessions for counselors and nurses on all school campuses. School personnel are trained to offer resources to identify at risk students, provide crisis intervention counseling, and to refer students who are at risk for committing suicide. Guns as a lethal means of suicide completion are addressed in the adult training session and in the student curriculum section of this program.

Data for threatened, attempted, and completed suicides have been compiled by the Dallas Public Schools (DPS) since the inception of this program in 1987. The number of suicide completions has remained steady (but very low), with three completed suicides in 1987 and 1988, and only two in 1996 and 1997. Suicide attempts have dropped (from 81 to 36), however, since 1987. Suicide threats in DPS dropped from 289 to 154 between 1987 and 1988 (data were reported in two year intervals) and 1991-1992, but then rose slightly to 172 threats made in 1996 and 1997, a number still far lower than in the year the program was implemented. These data seem encouraging, but it is impossible, without comparisons, to attribute the declines in suicide threats and attempts solely to this program. Additionally, it should be noted that the overall number of completed suicides since the inception of the program has remained very low. Without knowing how many suicides were completed, attempted, and threatened before the program was implemented (data not available), these results are difficult to interpret and should be taken with much caution.

Additional school-based prevention efforts include brief, one-time (one-hour to one-day) presentations given to students regarding general suicide prevention. These programs, *Teen Outreach Program* (Santa Cruz) and the *San Francisco Youth Suicide Risk Reduction Curriculum*, are knowledge-based programs focusing on: self-esteem, depression, coping skills, risk factors, substance abuse, access to lethal means (particularly guns), getting help, recognizing self-destructive behavior, difference between "normal" depression and chronic depression, which may lead to suicide. An additional program, the *Teen for Life Project* (Alameda County), in addition to the above education, also discusses restricting access to lethal means, including handguns and provides a 24-hour telephone counseling crisis line. No evaluation results are available for these programs.

Table 12. School-Based Suicide Prevention Programs					
Evaluation Category	Program Name	Age Group	Effect		
Model	None				
Promising	None				
Favorable results with pre-experimental design	Gryphon Place	7 <sup>th</sup> - 12 <sup>th</sup> grade students	18% to 30% increases in knowledge/attitudes		
Favorable results with pre-experimental design	Project SOAR	K - 12 <sup>th</sup> grade students	Decline in suicide threats & attempts since program inception (results difficult to interpret)		
No Evaluation	San Francisco Youth Suicide Prevention/Risk Reduction Curriculum	Youth (no age range specified)	N/A		
No Evaluation	Suicide Prevention/Crisis Support of Alameda County	Youth (no age range specified)	N/A		
No Evaluation	Team Up to Save Lives	15-19 years	N/A		
No Evaluation	Teen Outreach Program (Santa Cruz)	13-18 years	N/A		

## **Community-Based Programs: General**

Most community-based suicide prevention programs operate primarily through widespread public information dissemination efforts. They range from broad audiences (statewide, national) to more targeted outreach campaigns, often through local hospitals and physicians. Unfortunately, no evidence exists as to the efficacy of these strategies in reducing the number of youth suicides. These

programs represent a challenge to evaluators, as it is extremely difficult to isolate the effects of such broad influences.

General public information strategies include the distribution of printed materials (e.g., radio and television public service announcements) that provide information about youth suicide. These efforts include education about restricting youth access to lethal means, including gun safety and safe storage, and the relationship between alcohol/drug use and suicide. Many programs distribute statistical fact sheets on youth and firearm-related suicide. Programs differ in their approach to restricting access to guns, from groups advocating safe storage (not legislative) and gun safety locks to those who actively advocate for gun control legislation. In addition to education, many programs operate crisis lines and conduct conferences and gatekeeper training sessions. For a comprehensive listing of the suicide prevention public awareness programs that specifically target guns, please see Table 13.

One public awareness program, the *Washington State Youth Suicide Prevention Program*, also integrates a school-based curriculum and a gatekeeper training program with public awareness activities such as those listed above. School presentations, which are part of health class curricula, are implemented statewide and target general suicide prevention, including risk factors, depression, warning signs, and resources for assistance. Gatekeepers are also trained to identify and intervene with youth at risk for suicide. A pre-experimental outcome evaluation of this training found that gatekeepers were able to demonstrate knowledge of assessment and intervention theory, strong beliefs in their ability to intervene, accurate assessment of the risk of suicide in case studies, and competence for delivering workshops. Since no pre-test was administered in this evaluation, it is difficult to discern whether changes in knowledge and attitudes are attributable to the program (as compared to knowledge those participating already had when entering the program). It is also impossible with these data to determine the effect on the actual prevention of suicide in youth. Other similar statewide prevention efforts also include gatekeeper training components as well as grief counseling. Evaluations have not been done for these programs; for a complete listing, please see Table 13.

## **Community-Based Programs: Hospitals**

Two community-based suicide prevention programs that were identified focus on using physicians to educate parents and youth. The *Rush Youth Suicide Prevention Program (RYSPP)* provides written materials to families, including current information on mental illness and suicidal behavior, teaches advocacy skills, and focuses on problem solving to improve treatment of suicidal youth. This program specifically targets youth that have attempted or threatened suicide. Parents and guardians are supported throughout the program, which does not directly provide treatment, but reinforces the value of available mental health service the youth are receiving elsewhere. RYSPP uses home visits and frequent contacts with the youth and families in the programs to develop relationships between RYSPP case managers and families. Trained case managers meet with families in their homes or at the medical center three-to-five times over a six-month period. The program operates under the philosophy that developing personal ties between parents and health professionals helps families

understand and address teen suicide more effectively than a traditional lecturing format of suicide education and intervention. Blocking access to lethal means, including guns, is addressed, particularly during home visits. Counselors encourage families to remove the most dangerous tools from the home of a suicidal adolescent. No evaluation results currently exist for the program.

Another program, *Community Action for Youth Survival – Suicide (CAYS)*, provides a *Three-Step Intervention for Parents of Suicidal Adolescents* information guide to local physicians. Physicians are asked to follow these steps if an adolescent patient is suspected of being at high risk for suicide. Parents are addressed separately from their adolescent to avoid calling attention to guns as a means of suicide. The recommended steps are: (1) Tell parent their child is at risk for suicide and why the physician believes this, (2) Educate parent as to how he or she can reduce the risk of suicide by removing guns from the home or locking them up, and (3) Give parents information (provided by CAYS) on how to safely dispose of an unwanted gun. In Chicago, physicians are requested to help the parent call 911, explain that there is an adolescent at risk of suicide, and that the parent is requesting that guns in their home be picked up and disposed of. Arrangements are then made for gun pick-up. This program collects statistics on firearm turn-ins to police for the purposes of suicide prevention, but no evaluation of this program exists.

Table 13. Community-Based Suicide Prevention Programs				
Evaluation Category	Program Name	Age Group	Effect	
Model	None			
Promising	None			
Favorable results with pre-experimental design	Washington State Youth Suicide Prevention Program	15-24 years	Increases in gatekeeper knowledge and confidence to intervene	
No Evaluation	Alaska Community-Based Suicide Prevention	Youth (no age range specified)	N/A	
No Evaluation	American Society of Suicidology	Youth & adults (nationally)	N/A	
No Evaluation	Arkansas Youth Suicide Prevention Program	15-24 years	N/A	
No Evaluation	Community Action for Youth Survival	Youth (no age range specified)	N/A	
No Evaluation	International Association for Suicide Prevention - Means Restriction Advocacy	Youth & adults (nationally)	N/A	
No Evaluation	The Link Counseling Center, Inc Suicide Prevention and Aftercare	Youth (no age range specified)	N/A	
No Evaluation	Rush Youth Suicide Prevention Program	13-17 years	N/A	
No Evaluation	Speak Out for Kids Campaign (Gun Safety Lock Campaign)	Youth (no age range specified)	N/A	
No Evaluation	Suicide Prevention Services of Sacramento	Youth & adults (no age range specified)	N/A	
No Evaluation	Youth Suicide Prevention Project (Bothell, WA)	Youth (no age range specified)	N/A	

Little information currently exists regarding the efficacy of youth suicide prevention programs in general and gun-focused prevention more specifically. However, some early data seem to indicate the possibility that gatekeeper training can be effective for both adults and youth. These programs may help to educate individuals to recognize the potential for suicide, in them and in others. Further, this type of training may hold promising for educating gatekeepers in restricting access to guns as a possible intervention point for youth that have been identified as potentially suicidal. More information is needed in order to indicate that this kind of intervention would ultimately affect the youth gun suicide rate.

#### SUMMARY AND RECOMMENDATIONS

This research project began with the knowledge that youth violence in America has become increasingly more lethal. This alarming fact raises concerns about today's youth, but especially, about guns in their hands. It also sets youth violence today apart from that of the past. Given national trends, the guiding question for this project became -- do residents of Colorado face a similar problem? This question was initially addressed by documenting patterns and trends of youth violence in Colorado, compared to the nation, with an emphasis on lethality, both homicide and suicide. Key findings here include the following:

- ♦ Like the nation, arrest rates for weapons violations involving youth increased in Colorado from the late 1980s to the early 1990s, but they have been declining since that time. Yet they remain higher for youth than adults.
- National homicide rates involving youth (15-18) escalated in the mid 1980s through the early 1990s and then began to decline, yet still remaining significantly higher than the time of onset. Colorado experienced a similar trend, although the time of onset was the late 1980s.
- For both the nation and Colorado, males in this age group using handguns as lethal weapons drove this trend.
- ♦ While the national and Colorado trends are similar, the recent youth homicide rates in Colorado are about half the magnitude of the national rates.
- ♦ Concerning suicide in the nation and Colorado (1989-95), 50% to 75% of these self-inflicted deaths involved the use of some type of firearm by youth 15-19 years of age.
- ♦ The national rates for this age group have increased slightly since the early 1980s, while they have declined slightly in Colorado.
- ♦ Like homicide, the firearm suicide rates are significantly higher for males than females in this age group, both nationally and in Colorado. However, the rate for males in this state is about 50% higher than the national rate.

These findings suggest that firearms in the hands of youth threaten the health and well-being of Colorado residents, particularly the youth of this state. They also suggest that attempts to address the youth handgun violence problem, be they early prevention efforts or more immediate anti-gun violence interventions, should recognize that males in late adolescence represent the population "at risk." This is the case, moreover, whether the focus is on deaths resulting from interpersonal violence (i.e., homicide) or self-inflicted violence (i.e., suicide).

The increasing prevalence and use of handguns was also confirmed by focus group discussions involving youth and adults conducted in rural and urban locations across the state. Those discussions consistently revealed that handguns were readily available to virtually any youth wanting them. However, many participants suggested that involvement with handguns is primarily a male issue, particularly for those involved with alcohol, drugs, and gangs, a pattern also documented with national arrest data. Moreover, these discussions also revealed that youth tend to access handguns from their parent (or at home), their friends' parents, peers, theft or burglary from households in their neighborhoods where guns are known to be present, or illicit gun markets.

Why do the youth of this state want guns? And, what can be done about it? Such questions were also addressed by the focus groups. Youth and adults concurred that self-protection was a primary motive behind accessing, carrying, and using handguns. However, adults often identified larger social issues, such as problems in the family (e.g., lack of parental involvement, supervision, weak connections with parents) or cultural traditions supporting gun ownership and use. Other reasons offered include feelings of power, lack of hope or self-esteem, and involvement with drugs, alcohol, or gangs. Rural adults and youth also noted the frequent carrying and use of guns for sport or hunting. It should be noted, however, that easy *access* to handguns in this state was more the issue than carrying and use.

Concerning solutions to the problem, a clear sense of hopelessness about blocking access to handguns was a common theme, primarily because of the sheer volume of handguns in circulation and the ease with which they can be acquired. However, education was acknowledged as an important consideration. This included education about the consequences of handgun carrying and use as well as storage and safety issues. Additionally, youth and adults, but especially adults, also discussed the importance of strengthening families and providing opportunities for youth in communities that provide alternatives to involvement with handguns and accompanying lifestyles. A theme here was the earlier the intervention the better.

This research project has yielded important information about the nature and extent of the youth handgun violence problem in the nation and the state, relying on statistical analyses of patterns and trends, as well as focus group discussions across the state. What emerges is a relatively clear picture of who uses handguns and how and where they acquire them. Further, a number of common reasons for handgun use were suggested, as were ideas of possible solutions to the problem.

In striking contrast, although the project documented the proliferation of anti-gun violence interventions, little scientific evidence is available regarding their *effectiveness*. Specifically, 163 such programs were reviewed, and none were model programs, with only three deemed promising or showing favorable results by scientific criteria: The Kansas City Weed and Seed law enforcement strategy was deemed promising, and two school-based curricula, Safe Alternatives and Violence Education (SAVE) and the Handgun Violence Reduction Program, were shown to have favorable results. More systematic evaluations are currently underway for some interventions (e.g., Hospital-Based Youth Violence Intervention, East Bay Gun Violence Prevention Project, Hands Without Guns, Boston Gun Project, Handgun Intervention Program, Assault Crisis Teams, Straight Talk

About Risk, Oklahoma Department of Health School Safety Curriculum, Boston Public School Counseling and Intervention Center). Perhaps those studies will yield findings warranting the classification of model or promising programs at a later date.

Additionally, 389 suicide prevention programs were reviewed, and only 17 or about 5% explicitly addressed the issue of handguns or other firearms. None of these were classified as model or promising programs by scientific criteria, although three had some favorable results on knowledge and attitudes: Gryphon Place, Project SOAR, and the Washington State Youth Suicide Prevention Program. None of the other programs are currently being evaluated.

In the absence of compelling scientific evidence of program effectiveness, what can be done to address the problem of youth handgun violence? Clearly, the design and evaluation of prevention and intervention programs focusing on such violence is in its infancy. Hence, knowledge of which youth are most at risk and the factors that contribute to that risk within specific cultural and community settings must inform prevention and intervention efforts. Such factors are likely to vary from place to place, and all such efforts should be grounded in knowledge of the local problem.

Programs tried elsewhere that appear in their content to meet the needs of the youth population in question can be incorporated as components of such interventions. The review of programs can serve to highlight some possible program components. For example, the law enforcement strategy of the Kansas City Weed and Seed Program was found promising. That also was the case with the school-based Safe Alternatives and Violence Education (SAVE) and Handgun Violence Reduction Programs. Hence, collaboration between law enforcement and schools that includes the components of such interventions might be a promising strategy for some communities struggling with a youth handgun violence problem.

The same point applies not only to the components of interpersonal violence prevention but also to suicide prevention (e.g., Gryphon Place, Project SOAR, Washington State Youth Suicide Prevention Program). Clearly, more needs to be done about access to firearms concerning suicide prevention. The overwhelming majority of the programs reviewed (i.e., approximately 95%) do nothing whatsoever about the issue of youth and firearms of any type.

Attempts to implement intervention strategies that include anti-handgun components should be evaluated extensively, including process, short-term outcome, and long-term impact assessments. This is necessary, given the scarcity of systematic evidence about the effectiveness of youth handgun prevention and intervention programs. More valid and reliable information is needed and should be generated in conjunction with prevention and intervention efforts. Once more definitive evidence is available, then the need for regular and extensive outcome evaluations will abate. Until that time, however, such evaluations should be a required part of the development and implementation of interventions. In addition to determining program effectiveness, it is equally important to determine whether programs have unintended harmful consequences.

It is also important to recognize that any prevention or intervention effort will take place in the midst of a culture that condones, or at least tolerates, the presence of handguns. This was a theme coming out of focus group discussions. However, consistent with the original focus of this research project, advocacy for gun control policy and legislation (although logically implied) is not advisable. Interested parties are galvanized in their positions on this matter, and the political and economic forces in opposition to such advocacy are intense. The battle fought would decimate resources, with little progress made. Further, the demand for legal ownership and use of guns is great, as is their density and circulation. Hence, to engage the battle seems unwise and unrealistic. Rather, efforts should be directed toward developing, implementing, and evaluating interventions that focus on risk factors that can be modified using promising program components identified in this review that are also sensitive to local conditions.

#### REFERENCES

- American Foundation for Suicide Prevention. (1997). The 1997 Directory of Survivor Support Groups for Families and Friends of Suicide. New York, NY: Author.
- American Association of Suicidiology. (1997). Suicide Crisis Centers: National Listings. Washington, DC: Author.
- Boyd, J.H. (1983). The Increasing Rate of Suicide by Firearms. *New England Journal of Medicine*, 308, 872-874.
- Boyd, J.H., & Moscicki, E.K. (1986). Firearms and Youth Suicide. *American Journal of Public Health*, 76(10), 1240-1242.
- Brent, D.A., Perper, J.A., & Allman, C.J. (1987). Alcohol, Firearms, and Suicide Among Youth: Trends in Allegheny County, Pennsylvania, 1960 to 1983. *Journal of the American Medical Association*, 257, 3369-3372.
- Bureau of Alcohol, Tobacco and Firearms, Crime Gun Analysis Branch. (1998, May). *CGAB Shots*. Falling Waters, WV: Author.
- Callahan, C.M., & Rivara, F.P. (1992, June 10). Urban High School Youth and Handguns: A School-Based Survey. *Journal of the American Medical Association*, 267(22), 3038-3042.
- Center for Mental Health Services. (1995). *CMHS Mental Health Directory*, 1995. Rockville, MD: Author.
- Centers for Disease Control and Prevention. (1992). *Youth Suicide Prevention Programs: A Resource Guide*. Atlanta, GA: Author.
- Centers for Disease Control and Prevention. (1994, April 22). Programs for the Prevention of Suicide Among Adolescents and Young Adults. *Morbidity and Mortality Weekly Reports*, 43(RR-6), 1-7.
- Child Injury Prevention Resource Center. (1988). *Injury Prevention Programs in State Health Departments: A National Survey*. Boston, MA: Harvard School of Public Health.
- Colorado Department of Public Health and Environment, Advisory Council on Adolescent Health. (1998, February). *Adolescent Health in Colorado, 1997*. Denver, CO: Author.
- Committee on Adolescence, Group for the Advancement of Psychiatry. (1996). *Adolescent Suicide* (Report No. 140). Washington, DC: American Psychiatric Press, Inc.

- Dew, M.A., Bromet, E.J., Bent, D., & Greenhouse, J.B. (1987). A Quantitative Literature Review of the Effectiveness of Suicide Prevention Centers. *Journal of Consulting and Clinical Psychology*, 55, 239-244.
- Dorpat, T.L., & Ripley, H.S. (1960). A Study of Suicide in the Seattle Area. *Comprehensive Psychiatry*, 1, 349-359.
- Eddy, D.M., Wolpert, R.L., & Rosenberg, M.L. (1989). Estimating the Effectiveness of Interventions to Prevent Youth Suicides. In *Alcohol*, *Drug Abuse*, *and Mental Health Administration: Report of the Secretary's Task Force on Youth Suicide. Volume 4* (DHHS Publication No. ADM 89-1624, pp. 37-81). Washington, DC: U.S. Government Printing Office.
- Elliott, D.S. (1994, February). Serious Violent Offenders: Onset, Developmental Course, and Termination The American Society of Criminology 1993 Presidential Address. *Criminology*, 32(1), 1-21.
- Elseroad, J. (1996). Gun Reduction Advocacy: A Common Sense Approach. In M.R. Plotkin (Ed.), *Under Fire: Gun Buy-Backs, Exchanges and Amnesty Programs* (pp. 97-120). Washington, DC: Police Executive Research Forum.
- Federal Bureau of Investigation, U.S. Department of Justice. (1996). *Crime in the United States*, 1995. Washington, DC: U.S. Government Printing Office.
- Franklin, J.L., Comstock, B.S., Simmons, J.T., & Mason, M. (1989). Characteristics of Suicide Prevention/Intervention Programs: Analysis of a Survey. In *Alcohol, Drug Abuse, and Mental Health Administration. Report of the Secretary's Task Force on Youth Suicide. Volume 3* (DHHS Publication No. ADM 89-1623, pp. 93-102). Washington, DC: U.S. Government Printing Office.
- Garland, A., Whittle, B., & Shaffer, D. (1988). A Survey of Youth Suicide Prevention Programs. Journal of the American Academy of Child and Adolescent Psychiatry, 28, 931-934.
- Garland, A., & Zigler, E. (1993). Adolescent Suicide Prevention: Current Research and Social Policy Implications. *American Psychologist*, 48, 169-182.
- Hollinger, P.C., Offer, D., Barter, J.T., & Bell, C.C. (1994). Suicide and Homicide Among Adolescents. New York, NY: Guilford Press.
- The Johns Hopkins Center for Gun Policy and Research. (1997). *Firearm Violence: An Annotated Bibliography*. Baltimore, MD: Author.

- Kellerman, A.L., Lee, R.K., Mercy, J.A., & Banton, J. (1991). The Epidemiologic Basis for the Prevention of Firearm Injuries. *Annual Review of Public Health*, 12, 17-40.
- Lester, D. (1974). Effect of Suicide Prevention Centers on Suicide Rates in the United States. *Health Services Research*, 89, 37-39.
- Lester, D. (1971). Geographical Location of Callers to a Suicide Prevention Center: Note on the Evaluation of Suicide Prevention Programs. *Psychological Reports*, 28, 421-422.
- Loftin, C., McDowall, D., Wiersema, B., & Cottey, T.J. (1991). Effects of Restrictive Licensing of Handguns on Homicide and Suicide in the District of Columbia. *New England Journal of Medicine*, 325, 1615-1649.
- Maguire, K., & Pastore, A.L. (Eds.). (1997). *Sourcebook of Criminal Justice Statistics*, 1996 (NCJ 165361). Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics.
- Markush, R.E., & Bartolucci, A.A. (1984). Firearms and Suicide in the United States. *American Journal of Public Health*, 74, 123-127.
- The MÈRE Project. (1997). The National Suicide Prevention Directory. Los Angeles, CA: Author.
- Miller, H.L., Coombs, D.W., Leeper, J.D., et al. (1984). An Analysis of the Effects of Suicide Prevention Facilities on Suicide Rates in the United States. *American Journal of Public Health*, 74, 340-343.
- Mock, L.F. (1994, November). Young People, Violence, and Guns: What NIJ Is Doing Now. *National Institute of Justice Journal*, 42-46.
- National School Safety Center. (1998, August). *Categorical Breakdown of Total School-Associated Violent Deaths* (In-House Report). Westlake Village, CA: Author.
- Nelson, F.L. (1987). Evaluation of a Youth Suicide Prevention Program. *Adolescence*, 20, 813-825.
- Neuman, W.L. (1994). *Social Research Methods: Qualitative and Quantitative Approaches* (2nd Edition). Needham Heights, MA: Allyn and Bacon.
- Office of Juvenile Justice and Delinquency Prevention. (1999, February). *Promising Strategies to Reduce Gun Violence*. Washington, DC: Author.
- Overholser, J., Hemstreet, A., Spirito, A., & Vyse, S. (1989). Suicide Awareness Programs: Effects of Gender and Personal Experience. *Journal of the American Academy of Child and Adolescent Psychiatry*, 28, 925-930.

- Rosenfeld, R. (1996). Gun Buy-Backs: Crime Control or Community Mobilization? In M.R. Plotkin (Ed.), *Under Fire: Gun Buy-Backs, Exchanges and Amnesty Programs* (pp. 1-28). Washington, DC: Police Executive Research Forum.
- Shaffer, D., Garland, A., Gould, M., Fisher, P., & Trautman, P. (1988). Preventing Teenage Suicide: A Critical Review. *Journal of the American Academy of Child and Adolescent Psychiatry*, 27, 675-687.
- Shaffer, D., & Bacon, K. (1989). A Critical Review of Preventive Intervention Efforts in Suicide, with Particular Reference to Youth Suicide. In *Alcohol, Drug Abuse, and Mental Health Administration. Report of the Secretary's Task Force on Youth Suicide. Volume 3* (DHHS Publication No. ADM 89-1623, pp 31-61). Washington, DC: U.S. Government Printing Office.
- Shaffer, D., Garland, A., & Whittle, R. (1988). An Evaluation of Three Youth Suicide Prevention Programs in New Jersey. New Jersey Adolescent Suicide Prevention Project: Final Project Report. Trenton, NJ: New Jersey Department of Human Services, Governor's Advisory Council on Youth Suicide Prevention.
- Shaffer, D., Garland, A., Fisher, P., Bacon, K., & Vieland, V. (1990). Suicide Crisis Centers: A Critical Reappraisal with Special Reference to the Prevention of Youth Suicide. In F.E. Goldston, C.M. Heinecke, R.S. Pynoos, & J. Yager (Eds.), *Preventing Mental Health Disturbance in Childhood* (pp. 135-166). Washington, DC: American Psychiatric Press.
- Shaffer D., Garland A., Vieland, V., Underwood M., & Busner C. (1991). The Impact of Curriculum-Based Suicide Prevention Programs for Teenagers. *Journal of American Academy of Child and Adolescent Psychiatry*, 30, 588-596.
- Shaffer, D., Vieland, V., Garland, A., Rojas, M., Underwood, M., & Busner, C. (1990). Adolescent Suicide Attempters: Response to Suicide-Prevention Programs. *Journal of the American Medical Association*, 264, 3151-3155.
- Shapiro, J.P., Dorman, R., Burkey, B.M., & Welker, C. (1993). *Attitudes Toward Guns and Violence in Third- Through Twelfth-Grade Youth*. Cleveland, OH: Gun Safety Institute.
- Shapiro, J.P., Dorman, R.L., & Clough, J.B. (1997, September). Developmental and Factor Analysis of a Measure of Youth Attitudes Toward Guns and Violence. *Journal of Clinical Child Psychology*, 26(3), 311-320.
- Sheley, J.F., & Wright, J.D. (1992). *Guns and Violence in Urban America*. Paper presented at the National Conference on Prosecution Strategies Against Armed Criminals and Gang Violence: Federal, State, and Local Coordination, San Diego, CA.

- Sheley, J.F., & Wright, J.D. (1993, December). *Gun Acquisition and Possession in Selected Juvenile Samples* (NCJ 145326). Washington, DC: U.S. Department of Justice, National Institute of Justice.
- Sheley, J.F., & Wright, J.D. (1993, Autumn). Motivations for Gun Possession and Carrying Among Serious Juvenile Offenders. *Behavioral Science and the Law*, 11(4), 375-388.
- Simmons, J.T., Comstock, B.S., & Franklin, J.L. (1989). Prevention/Intervention Programs for Suicidal Adolescents. In *Alcohol, Drug Abuse, and Mental Health Administration. Report of the Secretary's Task Force on Youth Suicide. Volume 3* (DHHS Publication No. ADM 89-1623, pp. 80-92. Washington, DC: U.S. Government Printing Office.
- Slap, G.S., Vorters, D.G., Chaudhuri, S., & Cantor, R.M. (1989). Risk Factors for Attempted Suicide During Adolescence. *Pediatrics*, 84, 762-772.
- Sloan, J.H., Rivara, F.P., Reay, D.T., Ferris, J.A.J., Path, M.R.C., & Kellerman, A.L. (1990). Firearms Regulations and Rates of Suicide. *New England Journal of-Medicine*, 322, 369-373.
- Snyder, H.N., Sickmund, M., & Poe-Yamagata, E. (1997, August). *Juvenile Offenders and Victims:* 1997 Update on Violence (NCJ 165703). Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- Spirito, A., Overholser, J., Ashworth, S., Morgan, J., & Benedict-Drew, C. (1988). Evaluation of a Suicide Awareness Curriculum for High School Students. *Journal of the American Academy of Child and Adolescent Psychiatry*, 27, 705-711.
- Vaughan, R.D., McCarthy, J.F., Armstrong, B., Walter, H.J., Waterman, P.D., & Tiezzi, L. (1996, April). Carrying and Using Weapons: A Survey of Minority Junior High School Students in New York City. *American Journal of Public Health*, 86(4), 568-572.
- Wallace, L.J.D., Calhoun, A.D., Powell, K.E., O'Neil, J., & James, S.P. (1996). *Homicide and Suicide Among Native Americans: 1979-1992* (Violence Surveillance Summary Series, No. 2). Atlanta, GA: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control.
- Weiner, I.W. (1969). The Effectiveness of a Suicide Prevention Program. *Mental Hygiene*, 53, 357-363.
- Zimmerman, J.K., & Asnis, G.M. (Eds.). (1995). *Treatment Approaches with Suicidal Adolescents*. New York, NY: John Wiley & Sons.

## **APPENDIX A: GUN PROGRAMS**

# **Crisis Intervention and Counseling Programs (From Table 1)**

Drive-By-Agony	Kids Alive and Loved (KAL)
Lynwood, CA	Atlanta, GA
(310) 537-8018	(404) 727-4437
www.drive-by-agony.org	www.sph.emory.edu/bshe/imhr/prevention.html
HELP for Survivors Chicago, IL (312) 879-7920 www.childmmc.edu/help/survivor.htm	Save Our Sons and Daughters (SOSAD) Detroit, MI (313) 361-5200

# **Hospital-Based Prevention Programs (From Table 2)**

Hospital-Based Youth Violence Intervention	People Opening the World's Eye to Reality (P.O.W.E.R.)
Boston, MA	Brooklyn, NY
(617) 534-5196	(718) 574-5100
Hospital-Based Youth Violence Prevention Program Trauma Unit Tour Camden, NJ (No longer in operation)	Shock Mentor Program Prince George's Hospital Center Cheverly, MD (301) 618-3751

# **Community-Based Youth Outreach (From Table 3)**

East Bay Gun Violence Prevention Project Oakland, CA (510) 832-7071	Hands Without Guns Washington, DC (202) 544-2637 www.handswithoutguns.org
Hands Without Guns Boston, MA (617) 542-7712 www.handswithoutguns.org	MAD DADS Omaha, NE (402) 451-3500 www.maddadsnational.com
Hands Without Guns Chicago, IL (312) 879-7923 www.handswithoutguns.org	Youth, Firearms and Violence in Atlanta Atlanta, GA (404) 727-5481
Hands Without Guns Holland, MI (616) 494-2637 www.handswithoutguns.org	

# Law Enforcement Strategies (From Table 4)

Assault Crisis Teams St. Louis, MO (314) 516-5038	National Gun Buyback Program Atlanta, GA (No longer in operation)
Boston Gun Project	Operation Cease Fire: Denver Nuggets Gun Buyback
Cambridge, MA	Denver, CO
(617) 495-5188	(303) 893-6700
Gun Court	Philadelphia Firearms Trafficking Task Force
Providence, RI	Philadelphia, PA
(401) 222-3215	(215) 597-3059
Gun Suppression Program	Project LIFE (Lasting Intense Firearms Education)
Kansas City, MO	Indianapolis, IN
(No longer in operation)	(317) 924-7440
Handgun Intervention Program Detroit, MI (313) 965-3724	Saint Louis Police Department Gun Buyback Saint Louis, MO (314) 444-5321
Juvenile Diversion Program: Firearm Awareness and Safety Training Tucson, AZ (Unable to contact - March 1999)	Saint Paul Police Department Youth Gun Project Saint Paul, MN (612) 292-3613
Juvenile Weapons Court - Brooklyn, NY	Save Our Streets Program
New York, NY	Washington, DC
(No longer in operation)	(202) 293-0388
Kansas City Weed and Seed Program	Seattle Gun Buyback
Kansas City, MO	Seattle, WA
(No longer in operation)	(206) 684-7555

# **Neighborhood Programs (From Table 5)**

Safe Homes and Havens Program Violent Injury Prevention Center	Safe Kids/Healthy Neighborhoods Injury Prevention Program New York, NY
Chicago, IL	(212) 939-1426
(773) 880-2192	
www.childrensmemorial.org/cmhweb/cmhotherdepts/advocacy/vipc/vipcsafe.htm	

# Family Gun Violence Prevention Programs (From Table 6)

Blue Oaks Home Firearm Safety Course Chandler, AZ (602) 897-0909 www.blueoaks.com/courses.htm	Home Firearm Safety Course Colorado Springs Police Department Colorado Springs, CO (No longer in operation)
Colorado Medical Society Task Force on Youth Englewood, CO (303) 930-0407	Polymath Enterprises' Home Firearm Safety Class P.O. Box 3706 Winnetka, CA 91396-3706 www.babcom.com/polymath/hfsc.htm
A Gentle Touch: 10 Step Violence Prevention Curriculum Englewood, CO (303) 220-9200	Steps to Prevent Firearm Injury (STOP) and STOP II Center to Prevent Handgun Violence Washington, DC (202) 289-7319 www.handguncontrol.org

# **School-Based Curricula (From Table 7)**

Eddie Eagle Gun Safety Program/National Rifle Association	Oklahoma State Department of Health School Safety
Fairfax, VA	Curriculum
(800) 231-0752	Oklahoma City, OK
www.nrahq.org/safety/eddie	(405) 271-3430
Firearm Injury Prevention Curriculum	Options, Choices and Consequences
NM Emergency Medical Services for Children	Seattle Police Department Crime Prevention Section
Albuquerque, NM	Seattle, WA
(505) 272-5062	(206) 386-9766
Gun Safety Awareness Program Dade County Public Schools Miami, FL (305) 757-0514	Solutions Without Guns or Violence: Peacemaker Program The Gun Safety Institute Cleveland, OH (216) 623-1111
Handgun Violence Reduction Program Baltimore County Police Department Towson, MD (410) 887-2214	Straight Talk About Risks (STAR) Center to Prevent Handgun Violence Washington, DC (202) 289-7319 www.handguncontrol.org
Making the Peace Curriculum	Reading, Writing and Weapons
Oakland Men's Project	Nonviolent Crisis Intervention
Oakland, CA	Brookfield, WI
(510) 835-2433	(414) 783-5787
No Guns For Me! Options, Inc. Merrimack, NH (800) 782-7300	Safe Alternatives and Violence Education (SAVE) San Jose Police Department San Jose, CA (408) 277-4133 www.sccoe.k12.ca.us/savejpd.htm

## **School-Based Curricula (Continued)**

Think First for Kids Park Ridge, IL (847) 692-2740 www.thinkfirst.org	Violence Prevention Curriculum Little Rock, AR (501) 324-2162
Tragic Consequences: Teenagers and Guns	Virginia Youth Violence Project
Niles, IL	Charlottesville, VA
(800) 424-0362	(804) 924-8929
www.unitedlearning.com	curry.edschool.virginia.edu/curry/centers/youthvio

# **Counseling and Academic Services for Suspended Youth (From Table 8)**

Boston Public Schools Counseling and Intervention Center	Second Chance School
Jamaica Plain, MA	Topeka, KS
(617) 635-8123	(785) 232-0551
Hazelwood Center High School Student Intervention Program Florissant, MO (314) 839-9500	

# **School-Based Gun Violence Awareness Programs (From Table 9)**

Build the Missing Peace	Kelsey's Pizzaria School Gun Program
Cloverly, MD	Orlando, FL
(No longer in operation)	(No longer in operation)
GRIEF - Gun Responsibility in Every Family Naugatuck, CT (203) 729-3636	Student Pledge Against Gun Violence Northfield, MN (507) 645-5378 www.pledge.org
Guns, Teens, and Consequences	Students Against Handgun Abuse
Tulsa, OK	Baltimore, MD
(918) 746-6450	(410) 889-1477
Gunwise: Wake Up America Program University of Utah, Department of Pediatrics Salt Lake City, UT (801) 588-2293 or (801) 982-1241	Weapons Are Removed Now (WARN) Reseda High School Reseda, CA (818) 342-6186

## **School Enforcement Strategies (From Table 10)**

New York City Metal Detector Program	Weapon Watch
New York, NY	Memphis, TN
(718) 935-2000	(901) 325-4240
State Attorney General's Law Enforcement Task Force	Zero Tolerance Program
Trenton, NJ	San Diego, CA
(609) 984-6500	(619) 293-8050

# **Peer Group Intervention and Prevention Efforts (From Table 11)**

Caught in the Crossfire Oakland, CA (510) 444-6191 ext. 303 www.dreamtek.com/Youth_ALIVE/crossfire.html	Teens on Target (TNT) - Los Angeles Downey, CA (310) 940-7847 www.dreamtek.com/Youth_ALIVE/tnt.html
Keep Our Kids Alive (KOKA) New York, NY (No longer in operation)	Teens on Target (TNT) - Oakland Oakland, CA (510) 444-6191 ext. 303 www.dreamtek.com/Youth_ALIVE/tnt.html
Pioneers for Peace Rehabilitation Institute of Michigan Detroit, MI (313) 745-5053	"Words Not Weapons" Massachusetts Department of Public Health Boston, MA (617) 624-5433

# **Gun Violence Research Organizations and Centers**

Center to Prevent Handgun Violence (CPHV) Washington, DC (202) 289-7319 www.handguncontrol.org	Minnesota Center Against Violence & Abuse (MINCAVA) Saint Paul, MN (612) 624-0721 www.mincava.umn.edu
Firearm Injury Center Medical College of Wisconsin Milwaukee, WI (414) 257-5576 www.mcw.edu/fic	National Center for Injury Prevention and Control Centers for Disease Control and Prevention Atlanta, GA (770) 488-1506 www.cdc.gov/ncipc
Harborview Injury Prevention and Resource Center Seattle, WA (206) 521-1520 weber.u.washington.edu/~hiprc	Pacific Center for Violence Prevention San Francisco, CA (415) 285-1793 www.pcvp.org
Harvard Injury Control Research Center Boston, MA (617) 432-2123 hsphsun2.harvard.edu/Organizations/hcra/hicc.html	Violence Policy Center Washington, DC (202) 822-8200 www.vpc.org
Johns Hopkins Center for Gun Policy and Research Baltimore, MD (410) 955-3995 www.jhsph.edu/gunpolicy	Violence Prevention Research Program University of California, Davis Sacramento, CA (916) 734-3539 web.ucdmc.ucdavis.edu/vprp

# **National Coalitions and Public Awareness Campaigns**

,	
Anti Violence Campaign International Health and Epidemiology Research Center Sherman Oaks, CA (818) 788-2662	Mothers Against Violence in America (MAVIA) Seattle, WA (206) 323-2303 or (800) 897-7697 www.mavia.org
Ceasefire Action Network (CAN) Washington, DC (202) 530-5888 www.gunfree.org	McGrufff Handgun Violence Prevention Campaign National Crime Prevention Council (NCPC) Washington, DC (202) 466-6272 www.ncpc.org
Cease Fire, Inc. Washington, DC (202) 429-1741 www.ceasefire.org	National SAFE KIDS Campaign Washington, DC (202) 662-0600 www.safekids.org
Coalition to Stop Gun Violence (CSGV) Washington, DC (202) 530-0340 www.gunfree.org	PAX: Gun Violence Awareness New York, NY (212) 254-5300 www.paxusa.org
Educational Fund to End Handgun Violence (EFEHV) Washington, DC (202) 530-5888 www.gunfree.org	Project Lifeline Center to Prevent Handgun Violence (CPHV) Washington, DC (202) 289-7319 www.handguncontrol.org
HELP Network (Handgun Epidemic Lowering Plan) Chicago, IL (773) 880-3826 www.childmmc.edu/help/helphome.htm	Safe Start Campaign Children's Defense Fund Washington, DC (202) 628-8787 www.childrensdefense.org/safestart.html
Handgun Control, Inc. (HCI) Washington, DC (202) 898-0792 www.handguncontrol.org	The Silent March Against Gun Violence Brooklyn, NY (516) 247-9101
Join Together Boston, MA (617) 437-1500 www.jointogether.org	Target Guns - Physicians for Social Responsibility Washington, DC (202) 898-0150 www.psr.org
Mothers Against Violence Fairfield, AL (205) 785-6765	

# **State Coalitions and Public Awareness Campaigns**

#### Alabama

Coalition to Decrease Firearm Violence Vestavia Hills, AL (205) 979-2999

#### **Arizona**

Arizona Lawyer's Committee on Violence	Handgun Control Activists
Tucson, AZ	3617 Camino Real
(520) 628-8300	Glendale, AZ 89310

#### California

Gamerina	•
Californians for Responsible Gun Laws Berkeley, CA (510) 649-8946 www.gunlaws.org	Handgun Control, Inc. – Sacramento Sacramento, CA (916) 492-9797
Contra Costa Coalition to Prevent Gun Violence Walnut Creek, CA (510) 313-6808 www.planeteria.net/home/cccpgv	Prevent Handgun Violence Against Kids San Rafael, CA (415) 331-3337
Gun Violence Task Force Coalition for a Nonviolent City Pasadena, CA (213) 254-2274	Handgun Control, Inc. San Diego Committee Against Handgun Violence San Diego, CA (619) 235-9167
Orange County Citizens for the Prevention of Gun Violence Mission Viejo, CA (714) 888-8740 members.aol.com/stopgunvio	Legal Community Against Violence (LCAV) San Francisco, CA (415) 433-2062 www.lcav.org
Handgun Control, Inc. – Western Regional Office Los Angeles, CA (310) 446-0056	Women Against Gun Violence Los Angeles, CA (310) 204-2348

### Colorado

Colorado Coalition Against Gun Violence Denver, CO (303) 298-8001

#### Connecticut

Connecticut Collaborative for Education Against Gun Violence Southport, CT (203) 637-2694

## <u>Florida</u>

Florida Coalition to Stop Gun Violence Dania, FL (954) 989-9374

## Georgia

Georgians Against Gun Violence, Inc.	"Not Even One" Program (NEO)
Marietta, GA	The Carter Center
(404) 521-3605	Atlanta, GA
www.gagv.org	(404) 420-3870
Georgians United Against Gun Violence Atlanta, GA (404) 699-0708	

#### Hawaii

Hawaii Firearms Coalition	Hawaii Firearms Control Coalition
Kaneohe, HI	Honolulu, HI
(808) 235-4222	(808) 586-5940

### Illinois

(312) 341-0939	On Target Coalition Illinois Council Against Handgun Violence (ICHV) Chicago, IL	Quad Citizens for Responsible Gun Laws Rock Island, IL (319) 322-1240
www.ichv.org	(312) 341-0939	(317) 322-12-10

## <u>Indiana</u>

Concerned Citizens About Gun Violence
Indianapolis, IN
(317) 940-9682

#### Iowa

Iowans for the Prevention of Gun Violence
Iowa City, IA
(319) 887-1188

## Kansas

Kansas Safe State	Kansans for Handgun Control
Wichita, KS	Shawnee Mission, KS
(316) 264-9303	(913) 369-5499

## Kentucky

Kentuckian's Chapter for Handgu	n Control
Louisville, KY	
(502) 894-9050	

## Louisiana

Louisiana Ceasefire Baton Rouge, LA (504) 766-6432

## **Maryland**

Marylanders Against Handgun Abuse Education Fund Baltimore, MD (410) 889-1477

#### Massachusetts

City-Wide Violence Prevention Task Force Department of Health and Human Services Springfield, MA (413) 787-6710 www.increasethepeace.org	Teens Against Gang Violence (TAGV) Dorchester, MA (617) 282-9569 www.tagv.org
Stop Handgun Violence, Inc. Newton, MA (617) 243-8174	

## Michigan

Michigan Citizens for Handgun Control	Women Against Gun Violence
Birmingham, MI	Farmington Hills, MI
(810) 540-6868	(810) 661-2030
Michigan Partnership to Prevent Gun Violence East Lansing, MI (517) 332-4299 www.mppgv.org	

## Minnesota

Citizens for a Safer Minnesota (CSM)	Unload It & Lock It Campaign	
Saint Paul, MN	Minneapolis, MN	
(612) 292-8698	(612) 378-1875	
Minnesota Gun Violence Action Team	Violence-Free Duluth Gun Circle	
Saint Paul, MN	Duluth, MN	
(612) 266-8354	(218) 726-2067	

### Missouri

Coalition Against Concealed Guns	Missourians Against Handgun Violence
Charles, MO	Saint Louis, MO
(314) 946-2657	(314) 997-6301
Missourians Against Handgun Violence Kansas City , MO (816) 855-1721	

#### Nebraska

Nebraskans for Responsible Gun Ownership Omaha, NE (402) 334-8944

#### **New Hampshire**

Seacoast Advocates for Gun Control New Hampshire Ceasefire Rye, NH (603) 964-9079

#### New Jersey

Cease Fire New Jersey Trenton, NJ (609) 396-7044

#### **New Mexico**

Ceasefire New Mexico Santa Fe, NM (505) 982-8336

#### **New York**

Handgun Control, Inc. of New York	New Yorkers Against Gun Violence (NYAGV)
New York, NY	New York, NY
(212) 873-3361	(212) 674-3710
	www.nyagv.org

#### **North Carolina**

North Carolinians Against Gun Violence (NCGV) Education Fund Chapel Hill, NC (919) 403-7665 www.ncgv.org

### Ohio

ANDREW Toledo, OH (419) 474-6902

#### Oregon

<u>o.ogo</u>		
Oregonians Against Gun Violence	Oregon Safe Storage Coalition	
Portland, OR	Portland, OR	
(503) 233-1224	(503) 261-2822	

### **Pennsylvania**

Pennsylvanians Against Handgun Violence Wynnewood, PA (888) 444-7248 www.pahv.org

#### Tennessee

Tennesseans for Responsible Gun Ownership 2504 Forestglen Circle Clarksville, TN 37043

#### **Texas**

Texans Against Gun Violence (TAGV) - Austin	Zero Accidental Killings
Austin, TX	2411 Fountainview, Suite 170
(512) 473-9100	Houston, TX 77057
Texans Against Gun Violence (TAGV) - Greater Houston Chapter Houston, TX (713) 827-8916 www.insync.net/~tagvhou	

#### Utah

Utahns Against Gun Violence Salt Lake City, UT (801) 328-4930 www.inconnect.com/~uagv

#### Vermont

Vermonters Against Violence South Burlington, VT (802) 864-4677

#### Virginia

Virginians Against Handgun Violence (VAHV) Richmond, VA (804) 649-8752 www.vahv.org

### Washington

Safe Storage Coalition	Washington Cease Fire/Ceasefire Foundation of Washington
Harborview Injury Prevention and Research Center	Seattle, WA
Seattle, WA	(206) 322-1236
(206) 521-1524	www.waceasefire.org

## **APPENDIX B: SUICIDE PREVENTION PROGRAMS**

# **School-Based Suicide Prevention Programs (From Table 12)**

Gryphon Place Kalamazoo, MI (616) 381-1510 www.gryphon.org	Suicide Prevention/Crisis Support of Alameda County Teen For Life Project Berkeley, CA 94709 (510) 848-1515
Project SOAR Dallas, TX (214) 989-8200	Team Up To Save Lives Institute for Juvenile Research Chicago, IL 60612 (312) 996-9170
San Francisco Youth Suicide/Risk Reduction Curriculum San Francisco, CA (415) 984-1902	Teen Outreach Program Suicide Prevention Service of Santa Cruz Santa Cruz, CA (408) 459-9373

# **Community-Based Suicide Prevention Programs (From Table 13)**

Alaska Community-Based Suicide Prevention Program Alaska Department of Health & Social Services Juneau, AK (800) 478-2072 or (907) 465-4894	Rush Youth Suicide Prevention Program Rush-Presbyterian-St. Luke's Medical Center Chicago, IL (312) 563-2550
American Association of Suicidology Washington, DC (202) 237-2286	Speak Out For Kids Campaign Acadia Hospital Youth Suicide Prevention Task Force Bangor, ME (207) 973-6166
Arkansas Youth Suicide Prevention Program Little Rock, AR (800) 448-3014 or (501) 682-1323	Suicide Prevention Services of Sacramento Sacramento, CA (916) 368-3324
Community Action for Youth Survival - Suicide Institute for Juvenile Research University of Illinois at Chicago Chicago, IL (312) 996-1666	Washington State Youth Suicide Prevention Program Olympia, WA (360) 236-3675 depts.washington.edu/ysp
International Association for Suicide Prevention - Means Restriction Advocacy Rush Center for Suicide Research & Prevention Chicago, IL 60612 (312) 942-7208	Youth Suicide Prevention Project Bothell, WA (No longer in operation)
The Link Counseling Center, Inc. Suicide Prevention & Aftercare Atlanta, GA (404) 256-9797 www.thelink.org	

# **Suicide Research Organizations**

American Association of Suicidology (ASA)	Suicide Information and Education Center (SIEC)
Washington, DC	Calgary, Alberta, Canada
(202) 237-2280	(403) 245-0299
www.suicidology.org	www.siec.ca
American Foundation for Suicide Prevention (AFSP) New York, NY (888) 333-2377 www.afsp.org	

#### APPENDIX C: TYPES OF SUICIDE PREVENTION PROGRAMS\*

**School Gatekeeper Training**: This type of program is directed at school staff (teachers, counselors, coaches, etc.) to help them identify students at risk of suicide and refer such students for help. These programs also teach staff how to respond in cases of a tragic death or other crisis in the school.

**Community Gatekeeper Training:** This type of gatekeeper program provides training to community members such as clergy, police, merchants, and recreation staff. This training is designed to help these people identify youths at risk of suicide and refer them for help.

**General Suicide Education:** These school-based programs provide students with facts about suicide, alert them to suicide warning signs, and provide them with information about how to seek help for themselves or for others. These programs often incorporate a variety of self-esteem or social competency development activities.

**Screening Programs:** Screening involves administration of an instrument to identify high-risk youth in order to provide more thorough assessment and treatment for a smaller, targeted population.

**Peer Support Programs:** These programs, which can be conducted in either school or non-school settings, are designed to foster peer relationships, competency development, and social skills as a method to prevent suicide among high-risk youth.

**Crisis Centers and Hotlines:** These programs primarily provide emergency counseling for suicidal people. Hotlines are usually staffed by trained volunteers. Some programs offer a "drop-in" crisis center and referral to traditional mental health services.

**Means Restriction:** This prevention strategy consists of activities designed to restrict access to firearms, drugs, and other common means of committing suicide.

**Intervention After a Suicide:** Strategies have been developed to cope with the crisis sometimes caused by one or more youth suicides in a community. They are designed in part to help prevent or contain suicide clusters and to help youth effectively cope with feelings of loss that come with the sudden death or suicide of a peer. Preventing further suicides is but one of several goals of intervention made with friends and relatives of a suicide victim - so-called "postvention" efforts.

<sup>\*</sup> Reprinted from: Centers for Disease Control and Prevention. (1992). *Youth Suicide Prevention Programs: A Resource Guide*. Atlanta, GA: Author.

## **APPENDIX D**

# **Focus Group Consent Forms**

Adult Participants

Parent Consent for Youth Participants

Youth Participants

### Youth and Guns Focus Group Discussion: Adult Consent Form

You are invited to participate in a focus group discussion on youth and guns in Colorado. A focus group discussion is a guided group interview with a facilitator who will ask questions and an assistant who will take notes and tape record the discussion. The Youth and Guns Project is being conducted by the University of Colorado to gather information about youth access to handguns, carrying handguns, and using handguns in attempted or completed suicide, homicide, or gun injuries to others.

Participation in the project will have no known direct benefit to you, but the information gained could help determine the seriousness of the youth handgun violence problem in Colorado and inform future efforts to prevent or reduce it.

The focus group discussion will last about one hour. We will ask your opinion about youth and handguns. Topics such as the following will be discussed: The magnitude of the problem in your community, the kinds of youth involved with handgun violence, how they access handguns, circumstances for carrying and using handguns, what can be done about the problem, obstacles to doing so, and any other general perceptions you might have about youth and handguns.

There is little risk to you from participating in this study besides the potential discomfort of discussing unpleasant issues. Furthermore, we are interested in general themes coming out of focus groups discussions across the state. All information will be presented in summary form so that nothing can be traced to specific groups or individuals. Tape recordings of the discussion will be transcribed, and any identifying information will be deleted. Once they have been transcribed, the tapes will be destroyed. This will protect the confidentiality of all information collected.

If you decide to participate, please know that your participation is voluntary. You can withdraw your consent or cancel your participation in the focus group at any time. You also can refuse to answer any question(s) for any reason.

If you have questions regarding your rights as a participant, any concerns regarding this project, or any dissatisfaction with any aspect of this study, you may report them, confidentially if you wish, to:

Executive Secretary, Human Research Committee, Graduate School, Campus Box 26, Regent 208, University of Colorado Boulder, Boulder CO 80309-0026 or by telephone to (303) 492-7401. Copies of the University of Colorado Assurance of Compliance to the federal government regarding research involving human subjects are available upon request from the Graduate School address listed. You also may contact the research director of this study: Dr. Kirk R. Williams, Professor and Associate Director, Center for the Study and Prevention of Violence, University of Colorado, Boulder, CO 80309-0442 (303-492-1032). (also local contact person when identified)

Thank you for your consideration of this important study.

l understand the above part of the Youth and (	·	to participate in the focus group discussions, as
Yes No		
Signature	Date	_

### Youth and Guns Focus Group Discussion: Parental Consent Form

Your child has been asked to participate in a focus group discussion on youth and guns in this state. A focus group discussion is a guided group interview with a facilitator who will ask questions and an assistant who will take notes and tape record the discussion. The Youth and Guns Project is being conducted by the University of Colorado to gather information about youth access to handguns, carrying handguns, and using handguns in attempted or completed suicide, homicide, or gun injuries to others.

The purpose of the study is to gather information about how youth access handguns, why they carry handguns, and the circumstances in which they use handguns, including attempted or completed suicide, homicide, or gun injuries to others.

Participation in the project will have no known direct personal benefits to your child, but the information gained could help determine the seriousness of the youth handgun violence problem in Colorado and inform future efforts to prevent or reduce it.

The focus group discussion will last about one hour. We will ask questions about topics such as: The seriousness of the problem in your community, the types of youth involved, how they access handguns, circumstances in which they carry or use handguns, what can be done about the problem, obstacles in doing so, and other general perceptions about youth and handguns.

There is very little risk involved with participating in the focus group, besides the potential discomfort of discussing unpleasant issues. Furthermore, we are interested in general themes coming out of focus group discussions across the state. All information will be presented in summary form so that nothing can be traced to specific groups or individuals. Tape recordings of the discussion will be transcribed, and any identifying information will be deleted. Once they have been transcribed, the tapes will be destroyed. This will protect the confidentiality of all information collected.

If you decide to allow your child to participate, please know that his or her participation is voluntary. Your child can choose to withdraw consent or cancel participation in the focus group at any time. Your child can also refuse to answer any question(s) for any reason.

If you have questions regarding your child's rights as a participant, any concerns regarding this project, or any dissatisfaction with any aspect of this study, you may report them, confidentially if you wish, to:

Executive Secretary, Human Research Committee, Graduate School, Campus Box 26, Regent 308, University of Colorado -Boulder, Boulder, CO 80309-0026 or by telephone to (303) 492-7401. Copies of the University of Colorado Assurance of Compliance to the federal government regarding research involving human subjects are available upon request from the Graduate School address listed. You also may contact the research director of this study: Dr. Kirk R. Williams, Professor and Associate Director, Center for the Study and Prevention of Violence, University of Colorado, Boulder, CO 80309-0442 (303-492-1032). (also local contact person when identified)

Thank you for your consideration of this important study. I understand the above information and give consent for my child to participate in the focus group discussions, as part of the Youth and Guns Project.

Yes	No		
Signature		Date	

## Youth and Guns Focus Group Discussion: Youth Consent Form

You are invited to be a part of a focus group discussion on youth and handgun violence in Colorado. A focus group discussion is a guided group interview with a facilitator who will ask questions and an assistant who will take notes and tape record the discussion. The Youth and Guns Project is being conducted by the University of Colorado to gather information about youth access to handguns, carrying handguns, and using handguns in attempted or completed suicide, homicide, or gun injuries to others.

This is part of a study being conducted by the University of Colorado – Boulder. If you want to participate, you must first take a parental consent form home to get permission from your parent or guardian. He or she must read and sign the form, and you must return it to the scheduled time and place of the meeting. You also must sign THIS form yourself and return it with the parental consent form if you want to participate in the focus group discussion.

The focus group discussion will last about one hour. We will be covering topics such as: The seriousness of the youth handgun violence problem in your community, the types of youth involved, how they get handguns, the situations in which they carry or use them, what can be done about the problem, things that may stand in the way of doing so, and any other general ideas you may have on this topic.

There is very little risk involved with participating in the focus group, besides the potential discomfort of discussing youth handgun violence. We are interested in general themes coming out of focus group discussions held across the state. If you choose to be involved, please know that your participation is voluntary. You can change your mind about participating or quit at anytime. You also can refuse to answer any questions for any reason. Every effort will be made to make sure that no comments will be linked to specific groups or individuals. All information will be presented in summary form. Tape recordings of the discussion will be transcribed, and any identifying information will be deleted. Once they have been transcribed, the tapes will be destroyed. This will protect the confidentiality of all information collected.

Your involvement will help us understand the seriousness of the youth handgun violence problem in the state and what can be done to reduce or stop it. Thank you for considering this important study.

If you have questions regarding your rights as a participant, any concerns regarding this project, or any dissatisfaction with any aspect of this study, you may report them, confidentially if you wish, to:

Executive Secretary, Human Research Committee, Graduate School, Campus Box 26, Regent 308, University of Colorado Boulder, Boulder, CO 80309-0026 or by telephone to (303) 492-7401. Copies of the University of Colorado Assurance of Compliance to the federal government regarding research involving human subjects are available upon request from the Graduate School address listed. You also may contact the research director of this study: Dr. Kirk R. Williams, Professor and Associate Director, Center for the Study and Prevention of Violence, University of Colorado, Boulder, CO 80309-0442 (303-492-1032). (also local contact person when identified)

I understand the above information and voluntarily agree to participate in the focus group dis	scussion on
youth and handgun violence in Colorado, as part of the Youth and Guns Project.	

Yes	No		
Signature		Date	

#### APPENDIX E: A STUDY OF YOUTH HANDGUN VIOLENCE

#### **Background:**

Nationally, from 1984 to 1993, there has been a 465% increase in handgun homicides among youth ages 15 to 19. This rate has declined only slightly since 1993 and raises a couple of questions: How prevalent is youth handgun violence, including suicide, in Colorado? Are there promising strategies for eliminating or reducing youth handgun violence?

The Colorado Trust is interested in learning more about the issue and is funding a research effort to answer these questions. The research is being conducted by the Center for the Study and Prevention of Violence, University of Colorado at Boulder, in cooperation with the Centers for Public-Private Sector Cooperation, University of Colorado at Denver. This effort is one of many scanning efforts regularly conducted by the Colorado Trust to explore current issues related to the health and wellbeing of the people of Colorado.

### This research project WILL:

- document the nature of the problem, both nationally and in Colorado;
- review existing prevention or intervention programs focusing on youth access to handguns, carrying and using handguns;
- summarize results obtained from focus groups conducted across the state; and
- identify concrete and promising prevention or intervention efforts that can reduce youth handgun violence in Colorado.

#### This Research Project WILL NOT:

- address the issue of handgun control; or
- advocate for or against any kind of handgun control policy or legislation.

Research: The Center for the Study and Prevention of Violence, University of Colorado at Boulder (CSPV), will conduct the study in cooperation with the Centers for Public-Private Sector Cooperation, University of Colorado at Denver (UCD). CSPV is a national center that conducts research, disseminates information and provides technical assistance on the causes and prevention of violence. The Center at UCD is the service and outreach arm of the Graduate School of Public Affairs.

*Funding*: The Colorado Trust is a private foundation dedicated to the health and well-being of the people of Colorado. Through its mission, it supports the goals of accessible and affordable health care programs and the strengthening of families.

#### APPENDIX F: FOCUS GROUP PROTOCOL

### **Project Description**

- Nationally, from 1984 through 1993, there has been a 465% increase in handgun homicides among youth ages 15 to 19. This rate has declined only slightly since 1993 and raised a couple of questions: How prevalent is youth handgun violence, including suicide, in Colorado? Are there promising strategies for eliminating or reducing youth handgun violence?
- The Colorado Trust is interested in learning more about the issue and is funding a research effort to answer these questions. The research will be conducted by the Center for the Study and Prevention of Violence, University of Colorado at Boulder, in cooperation with the Center for Public-Private Sector Cooperation, University of Colorado at Denver. This effort is one of many scanning efforts regularly conducted by The Colorado Trust to explore current issues related to the health and well-being of the people of Colorado.
- The Research Project Will:
  - Document the nature of the problem, both nationally and in Colorado;
  - Review existing prevention or intervention programs focusing on youth access to handguns, carrying and using handguns;
  - Summarize results obtained from focus groups conducted across the state; and
  - Identify concrete and promising prevention or intervention efforts that can reduce youth handgun violence in Colorado.
- The Research Project Will Not:
  - Address the issue of handgun control; or
  - Advocate for or against any kind of handgun control policy or legislation.

#### Research

The Center for the Study and Prevention of Violence, University of Colorado at Boulder (CSPV), will conduct the study in cooperation with the Center for Public-Private Sector Cooperation, University of Colorado at Denver (UCD). CSPV is a national center that conducts research, disseminates information and provides technical assistance on the causes and prevention of violence. The Center at UCD is the service and outreach arm of the Graduate School of Public Affairs.

### **Funding**

The Colorado Trust is a private foundation dedicated to the health and well-being of the people of Colorado. Through its mission, it supports the goals of accessible and affordable health programs and the strengthening of families.

#### Instructions

#### **Guidelines**

- 1. *No self-disclosure*. Participants will be asked not to disclose any sensitive/incriminating information that could be traced to them or identify themselves during the recording of focus group discussions.
- 2. *No reporting about other named individuals*. Participants will be asked not to mention the names of any other individuals who may have been involved in handgun-related activities.
- 3. Only a thematic summary of results. Focus group data will be summarized to document themes cutting across the focus groups, without identification of a specific group or any specific individuals.
- 4. *Tape-recorded sessions*. Focus group meetings will be recorded, and all participants will be informed that this is being done in the instructions. The tapes will be transcribed then destroyed.
- 5. Ask them if they have any questions?

#### **Consent Forms**

- 6. *Informed consent*. All adult subjects and youth will be asked to complete a consent form, and parental consent forms will be obtained for all youth (high school students, typically 14-18 years of age) participating in the focus groups.
- 7. *Standardized instructions and questions*. Focus group protocols will include the instructions covering points 1-3 and the focus group questions.
- 8. *Tape-recorded sessions*. Focus group meetings will be recorded, and all participants will be informed that this is being done in the instructions.
- 9. Destruction of tapes. Tapes will be transcribed, and any identifying or incriminating information that perhaps may be divulged during the session, despite instructions to the contrary, will not be included in the transcriptions. Once the transcription process is completed, including any necessary deletion of identifying or incrimination comments, the tapes will be destroyed.

## **Youth Focus Group Questions**

- 1. How common is it for youth that you know to have access to handguns? Possible probes:
  - How many youth do you know who have access to handguns?
  - Is it common among your friends?
  - What about at your school?
- 2. Are certain kinds of youth more likely to have access to handguns? Possible probes:
  - What kinds? Tell me about these youth? What are their characteristics?
  - Are they from certain neighborhoods/areas?
  - Do they go to certain schools?
  - How else would you describe them in general terms? Describe the kinds of youth that are more likely to have access to handguns?
- 3. How do youth in your community get access to handguns? Possible probes:
  - Do they get them from their homes?
  - Do they buy them? Where?
  - Do they steal them?
- 4. Why do you think these youth carry handguns? Possible probes:
  - Tell me more about that.
  - Are there any other reasons these youth might carry handguns?
- 5. Under what circumstances do you think youth would, or do, use handguns? (Said another way: Why do you think youth would, or do, use handguns?) When do you think youth would, or do, use handguns?

Possible probes:

- Do you personally know of a situation in which a youth used a handgun?
- Can you describe it without identifying the people involved?
- 6. What do you think can be done in your community to reduce, or prevent, youth access to handguns?

Possible probes:

- What can be done to prevent youth from carrying handguns?
- What can be done to prevent them from using them?

- 7. If you tried to do any of the things we just talked about, what obstacles do you think you would face in your community (what do you think would get in the way of preventing youth from carrying handguns or from using them)?

  Possible probes:
  - Do you think you could overcome (each) obstacle? How?
- 8. Is there anything else we should know about problem with youth and handguns in your community, or how communities like yours might address these problems?