

**Commentary on:** Gill JR, Lenz KA, and Amolat MJ. Gunshot Fatalities in Children and Adolescents in New York City. *J Forensic Sci* 2003;48(4):832–35.

Sir:

This letter is written in response to the article by Gill, Lenz, and Amolat. The problems I see with the article are numerous, but for the sake of brevity I will limit my commentary to the more obvious ones.

First, regarding the writers' stated purpose; they inform us that their statistical analysis is to provide "greater and standardized information" that "can help formulate policy and guide preventative practice such as what has been done for improving motor vehicle safety." They further state that "It is imperative that public health professionals and others involved in the investigation and adjudication of firearm-related deaths take an active role and intervene in an *epidemic* (emphasis mine) that has been acknowledged but not effectively addressed." As authorities in the medical field, the writers feel qualified to take on a growing epidemic. But to what epidemic do they refer? That "epidemic" is the unfortunate number of shooting deaths of young people in the City of New York. Those curious about the source of this epidemic, need only read the final three paragraphs of the article to see what the authors view as the problem: the availability of guns. The recommendations they discuss involve "addressing individual gun owners," using schools to promote "gun-safe-homes," "stricter safety standards," and "liability on gun manufacturers and distributors," with all of these having the effect of making guns less accessible when needed (and therefore, less useful), and more expensive to produce and buy.

The writers' contribution to this not-so-subtle anti-gun effort is to compile and publish statistics pertaining to the *victims* of shooting incidents, rather than statistics pertaining to the *shooters* (those who choose to pull the trigger). What evidence do the writers produce to demonstrate that their approach can help solve this vexing social problem? None, as far as I can see. According to their own statistics 92% of the shooting deaths in New York City during the period, 1996 through 2000, were a result of "homicide." The data they gathered enables them to determine such things as the percentage of victims that were shot in the head rather than the torso, and the percentage of victims that were shot at close range. But, of what value is this data? The shooter chooses the victim, and where to aim. If the authors wish to make any real contribution to the solution of this problem, they must look at the shooters, not the victims. By couching the discussion in terms of a public health issue (epidemic) and concentrating attention only on the victims, the difficult questions of why young people choose to kill, and how to change that behavior, is ignored and debate turns toward restricting the public's access to guns or "promotion of gun-safe homes," as discussed in the final paragraph of the article. Approaching the problem in this way, the writers ignore areas of inquiry that most directly address the problem.

A more constructive investigative approach would require examination of the background of the shooters. What are their homes and schools like? What do we know of their psychological makeup? Do the shooters live with their fathers, mothers or both? Do both parents work outside of the home? Is there a history of drug dependence or domestic violence in the family. Do the shooters attend public or private school, and how did they perform academically? How much, and what type of television programming do they routinely watch. The number of avenues of investigation is seemingly limitless. Yet, the authors choose to study the victims, and only a

small subset of them. It is difficult to understand how knowing the average distance the average victim was from the average assailant, or what percentage of victims were drinking alcohol prior to their death, will help prevent these shootings.

The second issue to be addressed is the writers' decisions to include 18-year-old adults in their statistics dealing with children and adolescents. The writers' data shows that nearly all of these deaths resulted from homicide (92%), and the vast majority of these victims (68%) were either 17 or 18-years-of-age. I believe the reason for the decision to publish data on young victims was to maximize public outrage. Crimes against children alarm the public more than crimes against adults. The decision to include 18-year-old adults in the statistics inflates the numbers, making the problem of crime against children seem worse than it actually is. This reinforces the notion that the government must do something, anything, to stop it. The shooting deaths of 18-year-old men are tragic. But characterizing them as helpless children is disingenuous and plays into the hands of those who wish to manipulate public opinion, rather than elevate public policy debate with relevant data.

The third issue to be addressed is the writers' failure to consider the possibility that some of the deaths may have been a result of self-defensive actions by the police or public, and therefore, not part of a problem to be solved (or epidemic to be cured). The topic of self defense is completely ignored in this study. The verbiage of the article subtly suggests that during the period 1996 through 2000, not a single justifiable shooting took place in New York City. All 263 shooting deaths were characterized by the writers as either homicides (92%), suicides (6.5%) or accidents (1.5%). The word "homicide," although literally meaning any killing of a human, suggests, in the minds of the public, a murderous criminal act. But, were all these homicides murders? The writers do not differentiate. Was there no instance in which a person was shot and killed because he or she was engaged in a criminal act that threatened the police or the public? Criminals die by gunfire sometimes (an occupational hazard). Participation in criminal street gangs is common among 17 and 18-year-old inner-city males, and such criminal activity surely increases the likelihood of one dying as a result of defensive fire. The authors' decision to ignore instances of self-defense is not helpful, and plays into the hands of those politicians and lobbyist who seek to play demagog on the issue of private gun ownership.

My fourth point concerns the authors' claim that their data can help guide "public health professionals" to find ways of minimizing the number of gun-related deaths among our youth, as they claim was done with deaths related to automobile accidents. I presume they refer to recommendations in automobile design (air bags, seat belts, collapsible steering columns, etc.). Since their statistics show that accidental firearm-related deaths are a very small part of the problem, such a claim is ridiculous. Firearms are among the most highly refined and reliable mechanical devices ever developed. Very few of the deaths discussed in the article were the result of accidents. From my knowledge of firearms, it seems to me that few, if any of these accidents, were a result of design defects in the firearms used. Accidents are not the primary issue; the intentional criminal misuse of firearms is the issue. The only way to stop murder is to change the attitudes and behaviors of the people who choose to engage in the crime, or to remove such people from society. No government-mandated safety feature can keep a determined killer from committing murder. If, somehow, all firearms were to magically disappear, those who wish to kill would still be able to find a way. Knives, baseball bats, cast iron pipes, poison, ropes, fifth floor windows and speeding cars (among other assorted items) will still

be available in abundance. To address the problem of violence by, and against, young people, the scientific community must turn its attention to the social and cultural influences that encourage it.

Intelligently crafted public policy requires an honest assessment of the positive and negative outcomes of the proposed policy. For example, requiring trigger locks on guns kept in homes may save some number of people who would otherwise die from accidents and suicide, but would likely cause death and injury to those who cannot get access to their firearm quickly enough to react to a threat to themselves or other innocent people. Guns have both good uses (crime deterrence, self-defense, hunting, competitive shooting, collecting, etc.) and bad uses (murder, robbery, suicide, etc.). Public policy, if poorly set, can discourage or prevent the good, while having little influence on, or even encouraging, the bad. Unfortunately, Gill, Lenz and Amolat completely ignore the positive uses of firearms—and by concentrating on the shooting victim rather than the shooter, they provide us little help in finding ways to prevent

the bad uses of guns. I can see where the writers might reply that their database doesn't contain data pertaining to the shooters, and that this is just a limitation of their study. There are limitations in every study. But typically, researchers openly acknowledge such limitations and recommend further avenues of study. These writers chose not to do so.

The article deals far more with politics than forensic science. The printing of such an article in a well respected scientific journal lends it undeserved weight, and encourages further submissions of similar politically and ideologically driven material.

The comments and opinions set forth in this letter are my own. For the record, I have been a court-qualified forensic firearms examiner for the last 10 years, have conducted thousands of examinations of evidence recovered in shooting investigations and have testified numerous times in federal and state courts.

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