

HANDGUN CONTROL

ONE MILLION STRONG . . . working to
keep handguns out of the wrong hands.

File:
CRIME-GUNS

MEMORANDUM

To: Bruce Reed
From: Richard Aborn
Date: October 19, 1993
Re: Proposed Comprehensive Legislative Agenda

INTRODUCTION

Since 1987, while the homicide rate has soared, the rate of murders committed with all weapons *other than handguns* has actually *declined* by 7%. The entire increase in the national murder rate, from 1987 to 1992, was due to a huge, 52% jump in the rate of murders committed with *handguns*.

Handgun Control has, for years, argued that handguns are the problem, and that we need a "national handgun policy" in order to reach a solution. Although the Brady Bill has consumed the public's attention over the past few years, right now the people are ready for much more comprehensive initiatives.

According to the Louis Harris poll released in June 1993, 89% favor the Brady Bill, 82% favor handgun registration, 67% favor limiting purchasers to one-gun-per-month, 63% favor a ban on assault weapons, and 62% favor a special handgun tax.

A Peter Hart Maryland poll conducted in September 1993 found the 80% would support to a "comprehensive" handgun bill, including licensing, registration, regulation of private transfers, a mandatory safety examination and a limit of only two handgun purchases per year. This proposal received approval just as *broad* as a simple ban on assault weapons. But support for the comprehensive approach was even more *deep*. People want real solutions to the problem of gun violence, and only a comprehensive program is perceived to provide such a solution.

Therefore, Handgun Control will soon propose comprehensive legislation to regulate every level of the handgun industry. While the Brady Bill will save lives, our comprehensive legislation, coupled with education and legal action, will offer a solution to America's epidemic of gun violence.

We would welcome the support and participation of the White House in this important endeavor.

SECTION 1. HANDGUN LICENSE AND REGISTRATION

The Problem:

Handguns are much too easily accessible in this country. In 24 states, you can buy a handgun just as fast as you can buy a quart of milk. As a result, handguns are obtained and used by felons, fugitives, the mentally ill, and those who resort to violence in the heat of passion or the depths of depression.

The Brady Bill will save many lives by making handguns a little less accessible. But the Brady Bill will not solve the problem. We need to do more. Buying a handgun should be more like buying and using a car.

In our country, we require a drivers' *license* and motor vehicle *registration* because cars are very dangerous consumer products. In order to get a drivers' license, one has to (1) reach a minimum age; (2) present proof of residency; (3) successfully complete a safety examination; (4) present proof of liability insurance coverage; and (5) pay a fee to cover the cost of the license.

This has proven to be an effective system for regulating drivers and tracking car ownership. We should implement such a licensing and registration system for handguns because handguns are much *more* dangerous than autos. While cars kill by accident, handguns kill because they are designed and intended to do so. The need is clear.

The Solution:

A. A person would have to obtain a handgun license in order to buy, or otherwise receive transfer of any handgun or handgun ammunition. In many ways, a handgun license would be like a driver's license. It would be issued by states and function as a photo identification card. It would remain valid for two years and be renewable. To get a handgun license, an applicant would have to:

- (1) Be at least 21 years old.** (Currently, federal law prohibits licensed dealers from *selling* handguns to persons under 21 but it is perfectly legal for an unlicensed person to sell or give a handgun to a child of any age. *See e.g.* S.1087/H.R.3098)

- (2) **Present proof of residency such as utility bills.** (Under current federal law, it is illegal for an unlicensed person to buy a handgun outside his/her state. Unfortunately, while drivers' licenses are usually used to prove residency in gun purchases, several states require little or no proof of residency in order to get a drivers' license. John Hinckley bought his handgun with a Texas drivers' license even though he was no longer a resident.)
 - (3) **Go through both fingerprint and name-based background checks.** (The Brady Bill requires a name-based criminal history check. However, fingerprints are needed for the most reliable proof of identity.)
 - (4) **Successfully complete a mandatory safety training course.** (An untrained handgun owner is a menace to society and himself/herself.)
 - (5) **Present proof of liability insurance coverage.** (This is particularly important because of a raised level of liability below.)
 - (6) **Pay a fee to cover the cost of the license.** (This is the most practical and fairest funding mechanism.)
- B. Before taking possession of any handgun, a person would display his/her license for examination. Then the transferor, whether a licensed gun dealer or a private individual, would contact the state police or similar authorized agency and:**
- (1) **Confirm that the handgun license is still valid because licenses would be revoked if the licensee no longer meets the qualifications.**
 - (2) **Provide the information necessary to register the handgun transfer.**
- C. The purchaser would then have to wait through a 7-day cooling-off period before receiving a handgun.** (Even if an applicant has no criminal record, he/she should complete a cooling-off period so shootings will not take place in the heat of passion or depths or depression.)

SECTION 2. RESTRICTIONS ON GUN POSSESSION

The Problem:

Currently, there are no restrictions on the possession/ownership of handguns, rifles and shotguns except on persons who are: felons, fugitives, committed to a mental institution, dishonorably discharged from the military, or illegal aliens.

It was perfectly legal for David Koresh to own hundreds of guns and millions of rounds of ammunition. It is legal for children, and most people convicted of violent crimes (i.e., misdemeanor assaults), to possess guns. Federal law needs strengthening.

The Solution:

- A. The following would be added to the list of persons prohibited from receiving or possessing firearms:**
- (1) Persons convicted of violent misdemeanors, such as simple assault;**
 - (2) Persons convicted of spousal abuse or child abuse; and**
 - (3) Persons while subject to a protective order.**
- B. It would be illegal for persons under age 21 to possess handguns, except while under the direct supervision of a parent/guardian or adult instructor authorized by parent/guardian. It would also be illegal to transfer a handgun to such a juvenile or to negligently store or leave a loaded handgun where it is accessible to a juvenile. (The latter provision is similar to legislation which has been adopted in eleven states since 1989. In Florida, the first state to enact such a law, accidental shooting deaths of children were cut by 2/3rds.)**
- C. There would be created a special federal arsenal license in order for any person to possess more than 20 firearms or more than 1000 rounds of ammunition. The requirements for getting such a license would be similar to the requirements for a machinegun license, including: (1) a full background check; (2) a fee; and (3) a certificate from local law enforcement approving the license. (Anyone who has a personal arsenal is a danger to society. Even if the person never intends to shoot anyone, he/she is a perfect target for gun theft. The federal and local law enforcement authorities should know the location of such arsenals and require strict anti-theft security measures.)**
- D. The authority of ATF to grant "restoration of gun privileges" to prohibited persons would be abolished. Further, states could only restore gun privileges to prohibited persons if the state's reviewing agency affirmatively restores such privileges after specifically considering whether a restoration of gun privileges is warranted. (The McClure-Volkmer Act of 1986 made it much too easy for guns to be restored to felons. Felons should only have gun privileges restored if state authorities specifically order it.)**

SECTION 3. RESTRICTIONS ON SELLERS/DEALERS

The Problem:

There are more than 280,000 federally licensed gun dealers in America. According to the National Alliance of Stocking Gun Dealers, there are only about "16,000 legitimate storefront independent firearms dealers" and "approximately 5,500 chain and department stores" which sell guns. So, more than 90% of federally licensed gun dealers are not engaged in the regular, legitimate sale of guns.

Hundreds of thousands of "kitchen table" dealers exist because it is so easy to get a license. All one has to do is fill out a simple form and pay \$10 per year. In the past, newspaper reporters have done such things as get a firearms license for a dog, in order to show how lax the system is.

Further, there are a whole host of other loopholes in the law. A federal license is *not* required in order to sell ammunition, and in fact, ammunition is sold across state lines by mail! Felons and children can legally be employed by gun stores to sell guns. And federally licensed dealers are *not* legally required to cooperate when law enforcement authorities telephone for gun tracing information.

The Solution:

A. Federal Firearms Licenses ("FFLs") would be limited to bona fide retail dealers by requiring:

- (1) Dealers must prove that they are in compliance with all state and local laws.** (Now, the federal government is required to grant a gun license even when it is known that gun sales are forbidden at the licensed premises. This is a common problem in New York City where only a handful of gun stores may operate legally.)
- (2) The annual fee would be increased to \$1000 per year.** (The National Alliance of Stocking Gun Dealers favors an increase in the annual fee from \$10 to the "range of \$350 to \$500.")
- (3) The time granted to ATF to conduct a background check on applicants would be extended from 45 to 180 days.** (ATF is simply unable to conduct a reasonable background check in 45 days, especially because applications are currently received at the rate of about 400 per working day.)

- (4) **The number of yearly inspections permitted would be increased from 1 to 3.** (The McClure-Volkmer Act of 1986 restricted the inspection authority of ATF. This leads to lax interest by dealers who have already been inspected. There is simply no justification for tying the hands of law enforcement.)
- (5) **Dealers must prove they carry adequate business liability insurance.**
- B. It would be illegal for any person to sell to one person, or buy, more than one handgun per month.** (The purpose of this provision, now law in Virginia and South Carolina, is to make gunrunning impractical. Currently, federal law contains no restriction on the number of handguns which can be bought or sold in one transaction. The multiple sale of handguns by a federally licensed dealer must be *reported* to ATF pursuant to 18 U.S.C. 923(g)(1)(D)(3). But (a) the reporting occurs after-the-fact, so the gunrunners are long gone before ATF can do anything about them; (b) ATF simply doesn't have the resources to check out a large percentage of the multiple sales reported; and (c) current federal law only applies to transfers by federally licensed dealers, and many multiple handgun sales occur between unlicensed individuals at gun shows. Federal law must be changed in order to stop interstate gunrunning. And the one-handgun-per-month proposal has been proven to work.)
- C. No one could engage in the business of selling ammunition without being a federally licensed dealer. The interstate sales of ammunition to non-FFLs would be banned.** (Currently, one does not have to be licensed to sell ammunition, or buy ammunition across state lines. In fact, there are mail order catalogues which sell unlimited amounts of ammunition through the mail. They don't even ask if the purchaser is an adult! This means there are no controls at all on who has access to ammunition.)
- D. In order to work in a gun store, all employees must pass name-based and fingerprint-based criminal background checks. All employees with access to handguns or handgun ammunition must be at least 21 years old and all employees with access to long guns and long gun ammunition must be at least 18 years old. This does not apply to an employee who has no unsupervised access to firearms or ammunition.** (It is not illegal for felons and children to sell guns, or otherwise have unsupervised access to guns and ammunition by working at a gun store. This must be changed.)

- E. Gun dealers would not be permitted to sell firearms in any location other than the licensed premises. Guns could be exhibited, but not sold, at gun shows. (Current federal law explicitly exempts gun shows from the normal requirement that dealers conduct their business at the premises specified in their license. See 18 U.S.C. §923(j). Gun "shows" are really massive gun sales. They provide the ideal setting for gun traffickers to obtain a lot of guns at one time, and it is just impossible for ATF to properly police compliance with federal law at these events.)**
- F. Dealers would be required to cooperate with criminal investigations by:**
- (1) Responding to ATF's telephone requests for tracing information; and**
 - (2) Reporting all gun thefts and losses to ATF and local police. (ATF reports that some gun dealers refuse to cooperate when requests for gun tracing information is requested over the phone. Incredibly, dealers are not required to cooperate. Similarly, dealers are not required to report thefts from their stores even though a quick investigation makes it much more likely to capture the criminals.)**
- G. Component parts of a handgun would be treated as a handgun, so buyers would need a license, sellers would need an FFL, and interstate sales would be illegal. Component parts mean the frame, barrel, stock, receiver, any part of the action, or ammunition magazine. (Publications such as the Shotgun News regularly advertise gun parts for sale. Since only the lower receiver of a gun, the part containing the serial number, is considered to be a "firearm," all other gun parts can be bought and sold through the mail by unlicensed persons.)**
- H. When delivering firearms, a common carrier must confirm the recipient is an FFL. (Companies which deliver firearms from one licensee to another should double-check that the addressee is an FFL by inspecting the license.)**
- I. If an innocent third party injured with a firearm sues for damages, the marketer of that firearm would be held liable for all injuries caused by a violation of the Gun Control Act, and attorney's fees would be assessed against a seller found to have violated the Act. (This provision is the key to effective enforcement of federal gun laws. Because the damages inflicted by firearms are so severe, this provision would be a powerful incentive to obey the law. No federal bureaucracy will ever have the impact of civil litigation. Federal civil rights and antitrust laws work primarily because of the private statutory remedies.)**

SECTION 4. RESTRICTIONS ON MANUFACTURERS/IMPORTERS

Contrary to popular belief, a whole range of weapons are currently banned or severely restricted under federal law, mostly through the National Firearms Act, 26 U.S.C. §5801 et seq. Such weapons include machineguns, silencers, sawed-off rifles and shotguns, and non-sporting firearms with a barrel diameter in excess of one-half inch. In addition, non-sporting firearms such as assault weapons and Saturday Night Special handguns, are banned from importation under 18 U.S.C. §925(d). The question, then, is not *whether* to draw a line between acceptable and unacceptable guns, but *where* to draw that line.

We propose to add certain types of guns to the prohibited category, specifically: semiautomatic assault weapons, Saturday Night Special handguns, and non-sporting ammunition. All of these are already banned from importation into the United States pursuant to 18 U.S.C. §925(d).

In addition, we propose to ban large-capacity ammunition magazines which are now totally unregulated in America. Since magazines are not defined as "firearms," they can be manufactured, as well as bought and sold across state lines, without any license. Felons can legally purchase and possess large-capacity ammunition magazines.

- A. **A new system would classify types of firearms into three categories: Class A/Prohibited Firearms; Class B/Licensed Firearms; and Class C/Unlicensed Firearms.**
- B. **Class A/Prohibited Firearms would include weapons currently regulated under the National Firearms Act (such as machineguns), as well as semiautomatic assault weapons, the component parts of machineguns or semiautomatic assault weapons, Saturday Night Special handguns, non-sporting ammunition such as the "dragon's breath" shell, and ammunition magazines with a capacity in excess of six rounds. For all such firearms:**
 - (1) **Future manufacture and importation is banned; and**
 - (2) **Future transfers would require registration of the weapon, payment of a transfer tax, and approval of local law enforcement.**

(Once a weapon is designated for prohibition, there is the question of what to do about currently-owned weapons. Experience suggests that retroactive application of a firearms ban is difficult to enforce and highly controversial. We propose to grandfather in all current owners of prohibited firearms.

However, any subsequent *transfer* of such firearm would be treated like the current transfer of a machinegun.)

- C. **Class B/Restricted Firearms would include handguns and handgun ammunition, and all future transfers of such would require a handgun license.**
- D. **Class C/Unlicensed Firearms would include long guns (rifles and shotguns) and long gun ammunition, and all future transfers by FFLs would be subject to the national instant check system, once it is operational under the Brady Bill.**
- E. **The Consumer Product Safety Commission would be authorized to regulate the safety of firearms, but would be forbidden from banning firearms.** (Currently, firearm safety is totally unregulated. It is legal to sell a gun which does not function, or which blows up in the hand of the user. More importantly, it is legal to sell guns without the simplest and cheapest of safety devices. Many preventable accidents result.)
- F. **The 10% federal tax on handguns would be tripled to 30% and the tax on handgun ammunition would be increased from 11% to 30%. All the proceeds from the handgun/ammo tax should fund a law enforcement program to prevent gun violence, and/or a healthcare program to treat the victims of gun violence.**

HANDGUN CONTROL

ONE MILLION STRONG . . . working to
keep handguns out of the wrong hands.

File: ^{CRIME-}
GUNS

cc: JOSE

MEMORANDUM

To: Bruce Reed
From: Richard Aborn
Date: October 19, 1993
Re: **Increasing the federal tax on guns and ammunition**

SUMMARY

☑ Currently, there is a federal excise tax of 10% on handguns and 11% on long guns and ammunition. The tax applies to the first sale of the gun or ammunition by a manufacturer or importer. Subsequent sales, from wholesaler to dealer, or from dealer to purchaser, are not taxed.

☑ The proceeds from the excise tax is currently disbursed to the states through the Pittman-Robertson Program. Those funds are earmarked to benefit hunting and sports shooting.

☑ There is considerable support on the Hill and among the public for increasing this tax in some manner. Other "sin" taxes are being raised. They ask, "why not guns?"

☑ Technically, it is easy to target handguns for taxation. It is somewhat harder to target handgun ammunition. Assault weapons are complicated to define, and assault weapon ammunition is virtually undefinable. Politically, it is easier to justify increased taxation of handguns, assault weapons and their ammunition, than taxation of rifles, shotguns and their ammunition.

☑ Short-term recommendation: The excise tax on handguns and handgun ammunition should be raised to 30%, while the excise tax on long guns and long gun ammunition should remain at 11%. All the proceeds from the handgun/ammo tax should fund either a healthcare program to treat the victims of gun violence, or a law enforcement program to prevent gun violence. The long gun/ammo tax should probably continue to fund the Pittman-Robertson Program, just to avoid political attack from that constituency.

good
as these
things go

BACKGROUND

Seeking general revenues in 1932, the federal government imposed an 11% surtax on long guns (i.e. rifles and shotguns) and ammunition, 26 U.S.C. §4148. The tax applies to the first sale of the gun or ammunition by a manufacturer or importer. Subsequent sales, from wholesaler to dealer, or from dealer to purchaser, are not subject to the tax.

In 1937, Congress enacted the Pittman-Robertson Program which earmarked the proceeds of this excise tax to be disbursed to State fish and game departments for "wildlife restoration projects," that is, for increasing the numbers of game animals for the benefit of hunters, 16 U.S.C §669 et seq. In 1970, at the request of the National Rifle Association, Pittman-Robertson was expanded by the addition of a 10% excise tax on handguns and by allowing the funds to be used for hunter training courses and the construction and operation of public target ranges.

According to the FY 1993 Budget of the United States, it is estimated that the tax on long guns and ammunition will raise \$93 million and the tax on handguns will raise \$43 million this year.

TIME FOR CHANGE

The Pittman-Robertson Program is the product of another era. If it was ever important to subsidize hunting and sports shooting, that time has past. Now, it is obviously more important to use federal funds to stop the gun violence which is devastating our nation.

It is especially absurd for a tax on handguns to be lower than a tax on long guns, and for the proceeds to be earmarked for the promotion of "sports" shooting. Handguns are designed and intended to shoot people. Any handgun tax should be used to fund *relevant* programs to lessen the suffering from handgun violence.

The public strongly supports such legislation. A nationwide Louis Harris poll released in June 1993 found that Americans support a "special tax on guns" by nearly a 2-to-1 margin. A Peter Hart Maryland poll, conducted in September 1993, concluded that a handgun tax was just as popular as a ban on semiautomatic assault weapons.

Just as important, there is considerable sentiment on the Hill for raising taxes on firearms, led by Senators Moynihan, Bradley, Simon and Murray. Since other "sin" taxes are being raised, they ask, "why not guns?"

OPTIONS FOR CHANGE

- (1) Handguns versus long guns. There is a much greater constituency for dealing with handguns rather than long guns. Long guns, especially shotguns, are considered to be sporting firearms. And, in fact, handguns are the problem. In 1992, more than 85% of gun murders were committed with handguns rather than long guns. Since handguns are already defined for tax purposes, it is technically easy to increase that tax.
- (2) Assault weapons. There is plenty of support for legislation dealing with semiautomatic assault weapons. Unfortunately, it requires complicated language to define assault weapons. A special tax on assault weapons is probably not advisable because (a) the gun lobby might fight harder against this than a broader tax because they fear the establishment of an assault weapon definition; and (b) a tax implies that assault weapons should remain in production and that contradicts the goal of banning them. Nevertheless, if the handgun tax is raised, that will cover the most common of assault weapons -- assault pistols such as the TEC-9, MAC-10 and UZI.
- (3) Handgun or assault weapon ammunition. First, it is virtually impossible to define assault weapon ammunition. Assault weapons use several different calibers of rifle and handgun ammunition. Further, some rifle and handgun ammunition is interchangeable, especially .22LR caliber. Nevertheless, it is possible to designate each type of ammunition as primarily used in handguns or primarily used in rifles. It would be a mistake to tax all ammunition which *can* be used in a handgun, because sportsmen will argue that virtually any caliber could conceivably meet that test.
- (4) How much to increase the tax. This is primarily a political question. Based upon discussions on the Hill, one could credibly attempt to increase the handgun tax from 10% to 30%. Although Senator Murray's proposal (S.868) would tax each transaction, from manufacturer to wholesaler to dealer to purchaser, this would create a rather unpopular bureaucracy. It would be much more popular to retain the current method of taxing the first sale by the manufacturer or importer.
- (5) What to do with the funds. It would probably be politically impossible to eliminate the Pittman-Robertson Program. It has developed an entrenched constituency in every state. Still, that program could probably be trimmed by eliminating all funding from handgun taxation. That would cut the program by about 1/3rd.

All the proceeds from the handgun tax should fund a law enforcement program to prevent gun violence, or a healthcare program to treat the victims of gun violence. The proposed law enforcement/healthcare program would have a constituency of its own which could help enact the legislation.

RECOMMENDATION

Propose legislation to increase the excise tax on handguns from 10% to 30%. This should increase revenues by about \$85 million, or about \$30 per manufactured or imported handgun. The whole 30% would fund a program costing about \$130 million per year.

Also attempt to increase the excise tax on handgun ammunition from 11% to 30%. This is more difficult to estimate, but it might increase revenues by about \$30-40 million, and the whole 30% would add perhaps an additional \$50-60 million per year to program funding.

GUNS

Betsy, Bruce
FYI
Bernie

ARTICLE FROM
TIME MAGAZINE
NOT NY TIMES

THE EXPLODING COSTS OF GUNFIRE

WHEN SOMEONE IS SHOT IN NEW York City, the average cost that person incurs in medical treatment is \$9,646. The figure does not include ambulance costs, follow-up care, medication or rehabilitation. It also escalates if intensive care is required, reaching as much as \$150,000 per patient. Much of the financial burden for the injury, moreover, is borne by the public. A study at a San Francisco hospital noted that 86% of the expenses incurred by firearm injuries are paid out of taxes.

Guns and violence have, therefore, become a part of the nation's debate over health-care costs. The President cited guns as a reason for rising medical bills in his address to Congress two weeks ago, and last week Hillary Rodham Clinton endorsed Senator Bill Bradley's call for a 25% sales tax on "the purveyors of violence." The levy would go toward funding health care.

The cost of treating firearm injuries in the U.S. exceeds \$4 billion a year, according to congressional and gun-control-group estimates. One study of spinal-cord injuries in Detroit found that 40% resulted from gunshots. Says New York Congressman Major Owens: "We cannot expect to rein in the costs of our health-care system if emergency rooms are overflowing with victims of gun violence."

While the 500-plus members of the Clinton health-care task force considered everything from defining who is a part-time worker to estimating the number of jobs lost because of reform, little attention was paid to violence. That may soon change. Dr. David Satcher, Clinton's newly appointed director of the Centers for Disease Control and Prevention, has identified violence as a public health problem. Clinton's tool for coming up with new ideas, however, is an old one—a task force composed of senior officials from six different agencies, including Justice, Education and Agriculture. As with health care, all options are being considered, even federal controls on firearms. The panel is due to report early next year.

—Dick Thompson/
Washington, with reporting by Jette Johnson/Washington

Time
MAG.

Health-Violence Tie Prompts Gun Tax Talk

Hillary Clinton Doesn't Object to Suggestion Before Senate Panel, but White House Demurs

By Tom Ivers
Washington Editor

Hillary Clinton said she does not object to a suggestion that the federal government should tax guns to help pay for health care, but the White House demurred.

Clinton said she was asked about the idea by a senator on a Senate panel. She said she did not object to the suggestion, but she did not say whether she would support it.

The White House said it was not in a position to comment on the suggestion. A spokesman said the administration was still studying the issue.

The suggestion was made by Sen. [Name], who is a member of the Senate panel. He said he was talking about a tax on guns that would be used to pay for health care.

Clinton said she was asked about the idea by Sen. [Name]. She said she did not object to the suggestion, but she did not say whether she would support it.

The White House said it was not in a position to comment on the suggestion. A spokesman said the administration was still studying the issue.

Clinton said she was asked about the idea by Sen. [Name]. She said she did not object to the suggestion, but she did not say whether she would support it.

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PRESERVATION PHOTOCOPY

GR
11/11

Obama Seems to Be Here and There

HANDGUN CONTROL

**ONE MILLION STRONG . . . working to
keep handguns out of the wrong hands.**

Richard M. Aborn
President

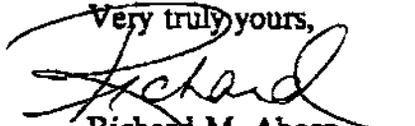
October 7, 1993

**Bruce Reed
Deputy Assistant to the President
for Domestic Policy
Office of Domestic Policy
Executive Office of the President
Washington, D.C. 20500**

Dear Bruce:

I misspoke one thing last night. There are no national restrictions on juveniles carrying guns, either long guns or handguns. This is what the Kohl bill addresses.

Best regards.

Very truly yours,

Richard M. Aborn



CORPORATION
 • F O R •
 ENTERPRISE
 DEVELOPMENT

August 23, 1993

Bruce Reed, Deputy Assistant
 to the President for Domestic Policy
 Old Executive Office Building
 Room 216
 Washington, DC 20500

Dear Bruce:

As you know, for most of the fifteen years of its existence, the Corporation for Enterprise Development has worked to study and design economic development approaches to reducing poverty. I write to ask your help in securing an opportunity to testify before the Working Group on Developmental/Investment Antipoverty Strategy, and in otherwise insuring that this approach is fully considered in the Working Group's deliberations.

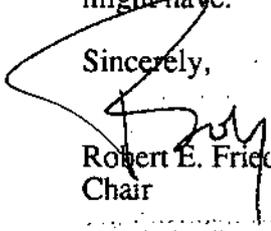
During the campaign, President Clinton endorsed several crucial pieces of this strategy: raising the \$1,000 asset limitation in AFDC; launching a national Individual Development Account Demonstration; the creation of 1,000 microenterprise programs. In conversations since he has indicated they would be considered in the context of welfare reform. These initiatives form the cornerstones of a broader development approach to welfare reform that could be an important complement to the other income maintenance and service reforms being discussed.

A development piece to the overall package has several advantages: it need not be very expensive; it has relatively large symbolic and real impact; and it attracts support across the political spectrum. While developmental approaches are relatively new and underdeveloped, there are an increasing number of promising models at the state, local and international levels.

We will be working over the next several months along with other interested groups to detail a Federal Development Agenda for inclusion in the welfare reform package, and would welcome your help in guiding and utilizing that work.

I would be happy to supply additional information or answer any questions you might have.

Sincerely,


 Robert E. Friedman
 Chair

You secretary Cathy Keys & Jim Hickman were both very helpful.

↑ WAY TO GO, CATY!

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BR

~~GUNS~~

HANDGUN CONTROL

ONE MILLION STRONG . . . working to keep handguns out of the wrong hands.

FAX COVER SHEET

DATE: 10-4

TOTAL PAGES (including this sheet): 35

SENT TO (fax number): 456-7028

PLEASE DELIVER TO: Bruce Reed

ORGANIZATION: _____

From:

[Handwritten signature]
Richard Aborn

Jane Ryan

NOTES/COMMENTS:

*Bruce -
This should get you started -
We will work on the rest +
call soon -*

Richard

but account for two-thirds of all firearm-related deaths.

Centers for Disease Control

6/1/93

Headquarters, 1225 Eye Street, NW, Suite 1100, Washington, DC 20005 • (202) 898-0792

*Miami Herald
7-25-93*

Everyone pays for shootings

Tab for one case: \$661,534 and growing

By **PATRICK MAY**
Herald Staff Writer

Derrick Hanna, 16, would-be car thief, pointed a .357-magnum handgun at a kid in a driver's seat one night. "Get out!" he screamed at Lazaro Gutierrez, 17. Lazaro flinched. Derrick squeezed the trigger — five-eighths of an inch.

The upshot:
For Derrick, 50 years in prison.
For Lazaro, life in a wheelchair.

For the rest of us, \$661,534.83
Forget, for the moment, the wasted lives. Forget the arguments about gun control.

Think about the money.
The bullet that fragmented inside Lazaro's neck the night of Oct. 21, 1988, set off an awesome run of expenses, mostly underwritten by taxpayers with little idea of the medical-legal costs of America's gun culture.

There are costs of rescue: \$638 for the seven-minute helicopter flight to Jackson Memorial Hospital.

Costs of respiration: \$56,966 for pumping oxygen into the victim for 10 weeks.

Costs of rehabilitation: \$82,580.74 for four months of therapy.

There are also the costs of justice.

Near a schoolyard on Southwest 192nd Street, two crime-scene detectives took photographs and lifted fingerprints for



**THE
GUN CULTURE**
HIGH-CALIBER
COSTS
AN OCCASIONAL SERIES

■ Each year in America, gun-fire kills 35,000 people. In Dade, Broward and elsewhere, bullets now claim more lives than motor-vehicle accidents. Counting the dead is easy. Counting the cost is not.

VICTIM'S COSTS

From the moment someone dialed 911 — 11:18 p.m., Oct. 21, 1988 — the costs of keeping shooting victim Lazaro Gutierrez alive have continued to rise. Here are some of the expenses that went into the total below:

A LIFE IS SAVED ...

\$1,822

The call brings Engine 34 (\$111 for 54 minutes) and Rescue 5 (\$73). Seven rescuers use bandages, IV fluids and other equipment (\$1,000) to stabilize Lazaro. Air Rescue 3 flies him to Jackson in 7 minutes (\$638).

...AND THE BILL BEGINS.

Lazaro's 8-month stay at Jackson starts at midnight with a trauma center visit (\$300). His 182-page bill opens with a 2-inch IV adaptor (\$2), and includes oxygen and ventilator (\$56,960), dressings and supplies like a rotating bed (\$38,454) and lots of medicine (\$12,463.54).

As state-of-the-art machines measure his every physiological move, Lazaro spends 39 days in a \$900-a-day bed (\$35,100) in ICU, watched over by his own nurse. As a "total quad," everything must now be done for him.

Total ER, ICU and recovery: **\$224,871.56**

THE EXPENSES NEVER CEASE...

There are months of IV solutions (\$7,150), CAT



JON KRAL / Miami Herald Staff

SHOT IN HOLDUP: With Lazaro Gutierrez, 21, are mother, Terese Chrino; brother, Diury Gutierrez, 20; and sister, Jeanette Gutierrez, 6. Care for a paraplegic can run up to \$100,000 a year.

Shooting's costs a terrible price

GUNS, FROM 1A

four hours: \$120. In a state attorney's office, court stenographers recorded depositions from 46 witnesses:

have closed since 1985, often overwhelmed by the cost of urban violence.

How high are the costs? Researchers at the University of California at Davis Medical Cen-

SHO

The search for Lazaro's shooter was under way before the victim had even reached the hospital. Taxpayers picked up the bills, as well as the costs of the ensuing search for justice.

AT THE SCENE OF 1

Two scene techni four hours each gathe fingerprints and takin (\$120) and another 4 processing what they Officer writes the repo a sergeant (\$80), four (\$288) and a corporal with crowd control an neighborhood canvas.

Total: **\$696**

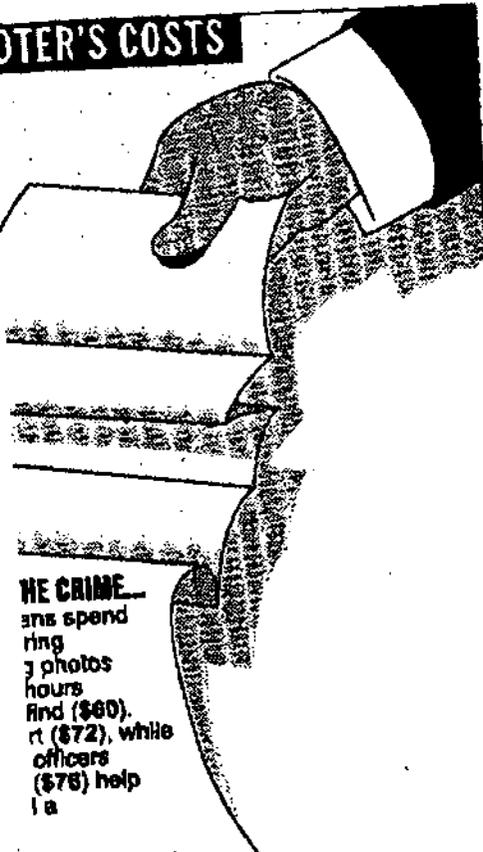
...THE HUNT IS LA

Detective Paul I and puts in 8 hour witnesses. He trie Jackson, but the v the next four days full-time, often on canvases the area (\$152), and works compile a suspect

THERE ARE PLE

Law interviev the shooter (\$1 by another kid the Cuban boy, (\$114). In the fr (\$57), learns th and re-interview

SHOOTER'S COSTS



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Law is called from home
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ictim is in surgery. For
Law works the case
OT (\$228) as he
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with other detectives to
list (\$152).

TTY OF LEADS...
vs a guy who says he can find
14), but then gets sidetracked
who says "he knows who shot
' only to give a bad name
llowing weeks, he visits Lazaro
o shooter's nickname (\$152).

now be done for him.

Total ER, ICU and recovery: **\$224,871.56****THE EXPENSES NEVER CEASE...**

There are months of IV solutions (\$7,150), CAT scans (\$705) and X-ray diagnoses (\$5,225). Anesthesia is used in the operating room (\$2,578). Along the way, Lazaro ingests Maalox (\$3.90 for a 6-oz. bottle), has his urine output monitored in measuring cups (\$9 for 3 cups) and his wounds dabbed with sponges (\$3 a box).

Lazaro and his family get counseling, too. On Oct. 24, for instance, a counselor spends 45 minutes (\$69) with Lazaro and writes: "Pt is beginning to express anger regarding shooting. Pt's mother is experiencing an intense grief reaction."

EVEN ON CHRISTMAS.

Dec. 25, 1988 — a typical day of treatment. It includes things like room and board (\$415), blood tests (\$54), and "chest physio-therapy" to help Lazaro's breathing (\$270 for 6 sessions), where a therapist taps on his back for 15 minutes. There's the daily charge for his roto-bed (\$145), along with an anti-coagulant medicine (\$3.50) and a Tylenol (\$3.50).

Total Christmas costs: **\$1,192.08****REHAB COMES IN TINY STEPS...**

February 1989, the treatment focus shifts. For four months, he receives occupational therapy (\$11,997), including field trips to Bayside to practice wheelchair skills. And physical therapy (\$13,353), such as exercises for strengthening the neck. Eventually, Lazaro is able to bring his hand to his mouth. On June 2, after 107 days in a \$400-a-day room (\$42,800) Lazaro leaves Jackson.

Total rehab: **\$82,580.74****...AND HELP COMES FROM MANY DIRECTIONS.**

Lisa Hardeman, a victim's advocate for the state attorney's office, spends 16 hours helping Lazaro get \$10,000 from the state's crime victim's compensation fund. "I did a lot of research, talking to people in wheelchairs, how to get a good one, what to pay."

Total: **\$192.16****GUNS, FROM 1A**

four hours: \$120.

In a state attorney's office, court stenographers recorded depositions from 46 witnesses: \$3,644.45.

In a 10th-floor juvenile cell at the Dade County Jail, the shooter waited 18 months for trial: \$29,090.21.

Then there is the unresolved lawsuit. Lawyers for the victim claim the Dade School Board failed to provide adequate security near Southridge High the night Lazaro was shot. The two sides' legal costs thus far: \$214,988.

That's by no means all the expenses. Although total current costs already stand over a half-million dollars, there's a lot more where those came from. The shooter isn't going anywhere. His projected release date is April 7, 2027. The projected prison cost: \$839,452.

The victim isn't going anywhere, either. Care for a quadriplegic can run up to \$100,000 a year. The bullet inside Lazaro Gutierrez is just a small piece of what some public-health experts are calling a national emergency. What happened to Lazaro happens again and again, day after day, year after year.

Each year in America, gunfire kills 35,000 people. In Dade, Broward and elsewhere, bullets now claim more lives than motor-vehicle accidents.

Counting the dead is easy. Counting the cost is not.

Only a handful of studies exist on the financial burden of gunshot injuries. The most ambitious, a federally funded survey by University of California San Francisco researchers, offers an incomplete audit at best: \$20.4 billion in 1990 for all firearm deaths and injuries

have closed since 1985, often overwhelmed by the cost of urban violence.

How high are the costs? Researchers at the University of California at Davis Medical Center found gunshot victims ran up an average hospital bill of \$13,200. And a General Accounting Office study found the lifetime bill, including lost wages, to be \$373,520.

Victims often run up a \$20,000 bill in their first hour in the emergency room, says Jeanne Eckes of Jackson's Ryder Trauma Center. "Just the cost of blood alone" — \$140 per pint, or unit — "is incredibly high. The real bleeders can take 40 units."

At the Washington, D.C., Hospital Center, acute care sometimes hits \$300,000 for a single weekend.

That's no surprise, says Dr. Mark Brown, chairman of orthopedics and rehabilitation at Jackson. Consider what bullets do:

"They usually shatter the bone," he says. "Particularly devastating is when the bullet penetrates the bowel, then hits a bone in the spine or hip, causing infection."

Says Eckes, "We also see more multiple shootings, probably because of the semi-automatic weapons. They tend to make a few more holes. The most expensive shooting is probably the multiple chest-and-belly combo."

At Cook County Hospital in Chicago, only 5 percent of persons admitted for gunshot wounds in 1984 had been shot more than once. By 1988, it was 20 percent.

But it is the bullets that hit the spine that carry the biggest price tag, says Barth Green, director of neurosurgery at Jackson and president of the Miami Project to Cure Paralysis

the shooter by another the Cuban (\$114). In (\$57), learn and re-inte

...THAT FINALLY PA...

Late November, L blames the shooting interviews Derrick's ID his shooter's photo prosecutors to prepare

Total detective work

OTHER COSTS

The bill for Derrick broke (\$327.50) and ringing up \$40 depositions (\$1 for deposition

Total: **\$8****...WHILE**

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Self meets his client tries prepares for it depositions (\$ plea bargain (and closing al

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OTH

(\$114), but then gets sidetracked
kid who says "he knows who shot
joy," only to give a bad name
in following weeks, he visits Lazaro
is the shooter's nickname (\$152),
views witnesses (\$456).

OFF.
ew catches up with Derrick, who
on another kid (\$380). He
accomplice (\$152), has Lazaro
to (\$152), then meets with
ire an arrest affidavit (\$228).

*: **\$4,104**

ADD UP...
tes in from the doctor who repaired the ankle
while jumping a fence fleeing the crime scene
Derrick's court-appointed lawyer starts
-an-hour charges, including setting up
40), reading cop reports (\$120) and waiting
subjects who never show (\$220).

24

THE CASE HEADS FOR TRIAL

cutors fly in Lazaro's girlfriend from New Port
x a deposition (\$438), one of dozens they'll set
y're the meat of the case," says prosecutor
ff. "This is our chance to speak to everyone
l to testify and to see the trial laid out months
actually begins." Self also spends six hours
to police tapes (\$186), and visits Lazaro at
ree times (\$186).
onsults with a Jackson doctor (\$15.50) and a
fficial (\$23.25), cajoles young witnesses to
62).

TIATIONS HEAT UP...
again and again with Derrick's lawyer as
to decide what to do (\$124), even as she
at with Detective Law (\$124) rereads all
93), confers with her supervisor about a
31), and roughs out opening statement
guments (\$93).

tion cost: **\$3,408**

COSTS STACK UP
are 24 court hearings with prosecutor (\$31/hr).
court clerk

He moves about in a Quikie 3Rx wheelchair (\$3,400). His water bed cost \$400 and his shower wheelchair goes for \$900 new. Another electric wheelchair costs \$4,000.

With the help of his dad's labor, the family home is transformed with wheelchair ramps and a shower and sink he can use sitting down (\$10,000). His van (\$3,700) is outfitted, too, to accommodate the wheelchair (\$1,750). His carport is paved in concrete to give him more space to move around (\$1,000).

Total: **\$25,150**

AND WAITS AND WAITS.

The costs of the shooting don't stop with the criminal case. In July 1989, attorneys for Lazaro file suit against the Dade School Board, claiming security at Southridge the night of the incident was lacking.

Jackson places a lien on any settlement for unpaid bills charged to Lazaro, whose insurance company goes bankrupt shortly after the shooting.

Lazaro studies for his GED, while the lawsuit winds slowly toward trial, probably sometime in 1994. Both sides have already run up sizable bills for legal fees and costs, including investigators, filing fees, phone calls and expert witnesses.

Total: **\$214,988**

Total to date

\$549,604.46

AND THERE'S NO END IN SIGHT

"Odds are, there's no way he's going to go back to work," says UM economist William Landsea. Since his parents won't live forever, Lazaro must eventually hire either in-home help (\$100,000 a year for two assistants) or move into a institution (\$40,000 a year).

On lost wages: "If he worked steady year-round — and that's a big if — he could be a \$30,000-a-year worker," says Landsea. "You're talking about 40 years of work."

Total (without inflation) **\$1.2 million**

no one truly knows how many people survive. One estimate puts the wounded at 245,000 a year. Secondly, the report considers only victims, not law enforcement costs.

"The victim is often only half the equation," says Jim Mercy, chief of the epidemiology branch at the National Center for Injury Prevention and Control in Atlanta. "We are also paying for the apprehension and incarceration" of the shooter.

The key word there is "we." "The public," says Mercy, "pays in excess of 80 percent of the costs of death and injury by firearm."

Amy Dunathan, an aide to Sen. John Chafee, R-R.I., says that "except for motor-vehicle crashes, no source of injury consumes more public funds" than firearms.

"Hospitals are closing," she says, "because trauma centers can't handle all the indigent getting shot up."

Harry Teter Jr., executive director of the American Trauma Society, says 91 trauma centers

from gunshot wounds, and the average economic impact to society is over \$1 million a case," says Green. "These patients require intensive care, about 10 times as much as routine hospital treatment. One bed sore, for example, can cost \$75,000 to cure."

Lazaro Gutierrez, the kid behind the wheel of an '81 Chevy, needed intensive care for 39 days.

In the moments before a bullet wrecked his life, he picked up his cheerleader girlfriend after a football game. As he pulled out of the parking lot, someone yelled "Yo!" Thinking the guy wanted a ride, Lazaro stopped. That's when Derrick Hanna appeared at the window, pointing a gun and demanding he get out.

"Gutierrez attempted to drive away," says the police report, "and the subject fired one shot striking him in the neck."

Within 40 minutes, the victim began to run up a 182-page hospital bill, which now fills four accordion files and stand two feet high. Total: \$307,452.30

It took Metro-Dade detective Paul Law one month to catch up with the shooter, known on the street as both "Dog" and "Crazy." That was enough time for him to hold up a pizza delivery man who refused to give up his car. Derrick shot him in the face, too.

In the end, Derrick saved the state of Florida a few bucks. He pleaded no contest, avoiding the costs of a trial, and went off to prison. There he sits, another kid with a million-dollar trigger finger.

Lazaro Gutierrez sits, too — in a \$3,400 electric wheelchair.

"That chair," he says, "costs more than the car I was shot for."



THE SHOOTER Derrick Hanna, 24, is in prison.

OCTOBER 1993

Total: **\$4**

Stenographer (\$113.75) and witnesses d all over town
Derrick s the South F last week, 1 Institution (Mary Lou (\$1,560), m gives him \$ (\$1,300), ac subscription

Total: **\$9**

Total to date

\$1

AND THE
With 6 prison As more day costs the inmate, a increase i

Projector from non Derrick get

■ SOURCE: Metro-Dade County Jail; South Florida Corrections; Jackson MI of Miami; victim's family clerk of the court, state attorneys. Compiled by

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hers do subpoenas (\$216), court sessions
1 depos (\$3,644.45) — even when
n't show (\$211.60). Subpoenas are served
(\$560).

563 days in jail (\$29,099.21), 33 days at
pride Reception Center (\$1,980) and, as of
099 days at Charlotte Correctional
13,960).

Hanna drives to see her son once a month
ills him \$20 a month for snacks (\$780),
00 a year for shoes and toothbrushes
cepts his collect calls (\$7,800) and pays his
to Ebony Man (\$64).

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BILL KEEPS CLIMBING

ain time, Demick is scheduled to get out of
ril 7, 2027. He will have spent 12,315
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n \$38.68 a day to house and feed an
nd they predict a 3 percent annual
n those costs due to inflation.

total
until
out:

\$839,452

is police, civil process bureau and fire-rescue; Dade
a Reception Center; Florida Department of
morial Hospital and Ryder Trauma Center; University
members and attorneys; Dade's court administrator,
ttorney's office; Daering Hospital; Dade school board's
staff Writer Petrick May.

DAN CLIFFORD / Miami Herald Staff

CALIFORNIA & CO.
SUSAN MOFFAT

**Everyone Pays
 for the Damage
 Done by Guns**

The medical cost of firearm violence offers one more bottom-line reason why Los Angeles business leaders need to get involved in efforts to eradicate the poverty and the lack of jobs that help to breed violence.

Cost-conscious businesses are focusing on slowing the "medical arms race" in technology that adds to their insurance premiums. But as the recent Los Angeles riots suggest, companies should also look at the costs of the arms race in
 Please see GUNS, D3

LA Times
 5/12/92

GUNS: Businesses Pay Big Cost for Violence

Continued from D1
 ordinary, cheap guns.

Business people could benefit by confronting a paradox that doctors meet daily: It takes expensive, high-tech machines to fix people torn up by low-tech instruments of destruction.

Doctors are using \$2-million machines to repair heads smashed by \$35 guns—heads that often take hundreds of thousands of dollars to put back together again. Researchers are spending millions to create more non-invasive ways of attacking malignancies without scalpels or spilling blood, while the methods of the streets are getting more invasive by the day.

"The irony strikes us all," says Dr. Rob Lufkin, an associate professor of radiology at UCLA, "that we get out of bed in the middle of the night to take care of someone, and it's not a disease or something God did but something one human being did to another intentionally."

Dr. Suzie El-Saden, a resident at UCLA Medical Center, sometimes explains the angiogram, a thousand-dollar procedure, to wounded gang members while she's doing it: threading a catheter from the groin up into the artery in the neck, squirting the dye into the veins, X-raying the area to figure out which artery is spouting blood so a surgeon can tie it up. "Yeah," they say, "I know, I've had it before."

Like it or not, business people are helping to foot the medical bills of the uninsured, well-armed masses. And it's not just through taxes that support the county hospitals.

Private hospitals have to charge

more to patients with insurance to make up for patients who can't pay a cent.

Employers know that if their vice president of marketing ends up in a hospital emergency room, his bill, in effect, will be inflated to pay for the guy in the next ward who wasn't lucky enough to have a Blue Cross policy when his legs got shot off.

Even when some stranger gets shot across town, it's Arco, Wells Fargo, Lockheed—and thousands of smaller businesses already hard-pressed to cover their own employees—that end up paying through their insurance premiums.

It's called cost-shifting, and it's a big concern for businesses paying premiums that are rising 20% a year or more. Last year, U.S. manufacturers spent \$11.5 billion to cover the medical bills of people they don't even know, the National Assn. of Manufacturers estimates.

It cost patients with insurance up to \$380 more per person for their appendectomies or heart surgeries just to make up for uninsured victims of violent crime, the District of Columbia Hospital Assn. says.

"Cost-shifting is a heavy burden on the Los Angeles business community. The costs of caring for the uninsured is taking away from money that should be spent on schools, transportation, the whole economic infrastructure," says Julia Thomas, co-chair of the health issues committee of the Los Angeles Area Chamber of Commerce.

The medical costs citywide haven't been definitively calculat-

ed yet. But Daniel Freeman Memorial Hospital alone lost \$2 million caring for the mostly uninsured victims of the riots—money the already-strapped hospital can ill afford.

And the Centers for Disease Control, which tracks epidemics—firearms as well as AIDS and flu—figured back in 1985 that the average bill for a person hospitalized with a gunshot wound was \$33,000.

However you calculate it, the violence sparked by the Rodney King verdicts will end up costing millions of dollars in medical bills.

Focusing on dollars may be a grim way to look at the problem; medical bills do not reflect the losses to victims' loved ones. But it's one way to demonstrate that the war in the streets affects everyone—including businesses—often in ways they don't always realize.

Guns aren't the only source of injury and illness that send medical bills skyrocketing, but they're easy to single out as a foolish way to drive up health care costs. The Centers for Disease Control estimates that firearm injuries cost the country \$14.4 billion a year in medical costs and lost productivity.

For Los Angeles business owners staggering under mounting health insurance bills, guns go beyond the political and public health issues to an economic one.

Employers and insurers should be scrutinizing not just the high costs of medical technology, but the high cost of urban despair. It offers one more reason why it makes sense for business leaders to invest in the heart of the city.

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INITIAL AND SUBSEQUENT HOSPITAL COSTS OF FIREARM INJURIES

Garen J. Wintemute, MD, MPH, and Mona A. Wright, BS

Objective: To provide economic, epidemiologic, and clinical data on initial and subsequent hospitalizations for firearm injuries. **Design:** Nonconcurrent prospective study; data obtained by medical records review. **Setting:** Public university teaching hospital, designated a level I trauma center. **Subjects:** Two hundred fifty persons first hospitalized for firearm injuries at UC Davis Medical Center, Sacramento, between January 1, 1984, and June 30, 1985, and followed by medical records review to June 30, 1988. **Results:** The aggregate hospital charge for 250 firearm injuries, exclusive of professional fees, was \$3,745,496, of which 80% was borne directly or indirectly by public funds. The charge for initial hospitalizations was \$3,297,506. Mean and median initial charges per case were \$13,190 and \$5,996 respectively; range, \$787-\$494,152. The five patients with charges over \$100,000 accounted for 33% of all charges; 36% of all patient days were attributable to the eight patients with hospitalizations lasting more than 30 days. Thirty-one patients were rehospitalized a total of 71 times; charges for rehospitalization totaled \$447,990. Three fourths of all charges resulted from handgun injuries. **Conclusions:** The costs for hospital treatment of firearm injuries are substantial. Avoiding prolonged hospitalization may be helpful in controlling these costs, but will be difficult to achieve. Primary prevention of firearm injuries may be the most effective cost-control measure.

FIREARMS have become the seventh leading cause of death in the United States¹ and are an important source of morbidity as well.² In 1988, 33,797 persons died of firearm injuries.³ The report to Congress, *Cost of Injury in the United States*, estimated that in 1985 there were 65,000 persons discharged alive from hospitals after treatment of firearm injuries, and other 171,000 persons treated for firearm injuries without hospitalization.⁴

Since that time, the incidence of firearm injuries has increased dramatically in many urban centers. The economic consequences of this development recently led the General Accounting Office (GAO) to conclude that "inner-city trauma centers are victims of violent crime and drug wars."⁵ According to the GAO, approximately 50% of patients who suffer injuries from violence are uninsured or eligible for government medical care cost assistance. In the latter cases, reimbursement may be only 40%-60% of reported hospital costs. The increasing volume of unreimbursed care for such injuries has become an important factor in the decision of many hospitals to end their participation in organized trauma systems.⁵

The aggregate economic burden on the United States from firearm injuries is enormous. The report to Congress cited above estimated a cumulative lifetime cost of \$14.4 billion for firearm injuries sustained in 1985, of

which \$863 million are expenses for direct medical care.⁴ That report noted that our knowledge of the long-term economic, psychological, and physical effects of firearm injuries is sparse, and called for more research in this area.

This report addresses those needs in part, primarily by estimating both the acute and subsequent costs of inpatient medical care of persons injured by firearms. Our results are based on the experience of the 250 persons initially hospitalized for treatment of firearm injuries at the University of California Davis Medical Center (UCDMC) from January 1, 1984 through June 30, 1985. For selected cases, we illustrate the circumstances producing these injuries and the long-term clinical course of these patients. Aggregate epidemiologic and clinical data are also presented.

METHODS

Injury hospitalizations at UCDMC are classified by external cause, under the E code rubrics of the *International Classification of Diseases*. The 250 subjects of this study were identified by a computerized review of all discharges from January 1, 1984 to June 30, 1985, selecting for firearm injury codes E922 (unintentional), E955 (suicidal), E965 (assaultive), E970 (legal intervention), and E985 (undetermined). Medical records for all potential subjects and coroner's records for all fatalities were reviewed to verify eligibility and to abstract additional data. All subsequent hospitalizations through June 30, 1989 at UCDMC for each subject were identified by a second computerized review of the discharge data set. The medical record for

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each of these hospitalizations was reviewed to determine whether it was related to the index injury. Unrelated admissions were excluded. The search for subsequent admissions was not extended to other hospitals.

Hospital charge and reimbursement data were prepared by the Patient Accounts Analysis Department at UCDCM, following their standard procedures. Billing records could not be located for one initial and six subsequent hospitalizations. The data do not include charges for physician fees. Charges were not adjusted to reflect inflation over the 5-year study period.

We have used hospital charges as a proxy measure for the actual costs of resources consumed by medical care for injuries. As a practical matter, the true cost of these resources is generally unavailable. Many institutions report cost data for the care they deliver, however, because of the impact of varying reimbursement methods and other market imperfections, these reported costs may not measure actual resource consumption more accurately than do charges.⁹

It has been argued that direct measurement of resource consumption would lessen the likelihood of error owing to artifact,¹⁰ but few if any institutions routinely compile such information. Absent these direct measurements, the *Cost of Injury* report¹¹ and numerous special studies of injuries in defined populations^{12,13} or of defined types¹⁴⁻²⁰ have relied on reported hospital charges instead. The present study follows that standard practice.

RESULTS

Illustrative Case Histories

Case 1. A 14-year-old boy was shot unintentionally in the right eye by a friend with an airgun which the friend thought was unloaded. On initial examination he had no light perception in the affected eye. He underwent enucleation on day 6 of a 9-day hospitalization. His postoperative course was unremarkable. Hospital charges: \$7,947; reimbursed by private insurance.

Case 2. A 19-year-old man sustained an unintentional self-inflicted wound to the left chest while showing his wife a handgun; the bullet transected his left subclavian artery. He arrested in transport and underwent CPR for 10 minutes before arrival at the hospital. His emergency department resuscitation included thoracotomy, open chest cardiac massage, and tamponade of the severed vessel. Resuscitation continued in the operating room. Postoperatively the patient had minimal response to deep pain; anoxic brain injury was diagnosed. His subsequent course was complicated by *Enterobacter* sepsis and pneumonia and by colonization with methicillin-resistant *Staphylococcus aureus*. The hospitalization lasted 160 days. At the time of his discharge to a skilled nursing facility, the patient had spontaneous eye opening and extremity movement but no response to verbal stimuli. Initial hospital charges: \$181,253; \$100,040 reimbursed by Medicaid; \$81,213 bad debt.

The patient was readmitted to UCDCM on five occasions for pneumonia or urosepsis, for a total of 32 days, and was hospitalized elsewhere for similar problems. As of mid-1989 he remained in a persistent vegetative state and was fed via a gastrostomy tube. He was cared for 24 hours a day by his mother, who described their situation in a recent interview: "It's like having a baby—but worse. Sometimes I hope that he dies before I do, and you know why? Because there's not going to be anybody else to care for him the way that I care."²¹ Subsequent hospital charges: \$82,731; \$43,283 reimbursed by Medicaid; \$39,448 bad debt.

Case 3. An 18-year-old man attempted suicide by shooting himself in the head with a .22-caliber handgun. He underwent local debridement and temporal lobectomy. He was intubated for 4 weeks, and developed a tension pneumothorax and pul-

monary embolus. At discharge he retained a left hemianopsia, left hemiparesis, and "atypical personality disorder with poor impulse control." The patient was discharged home after 54 days. Initial hospital charges: \$103,771; \$103,601 reimbursed by private insurance, \$170 bad debt.

The patient was readmitted 20 times for tracheal dilatation procedures and has had similar procedures performed as an out-patient. The first 10 in-patient readmissions, like the initial hospitalization, were paid for largely by the patient's health insurance. In 1986 he lost his insurance coverage, and the final 10 admissions were paid for entirely by public funds. Subsequent hospital charges (in-patient care only): \$95,000; \$52,338 reimbursed by private insurance, \$8,160 reimbursed by Medicaid, \$34,502 bad debt.

Case 4. A 35-year-old woman sustained two self-inflicted wounds to the chest with a .22 caliber handgun immediately after an argument with her boyfriend, who had told her to "pack up and get out." The patient, who had been drinking alcohol, stated she did not know the gun was loaded. She underwent laparotomy and sternotomy, with repair of lacerations of the lower lobe of the right lung and of the right lobe of the liver. One bullet track passed within a centimeter of the inferior vena cava. During a psychiatric consultation 2 days postoperatively, the patient said she was glad to be alive and denied serious suicidal ideation. After a 6-day hospitalization, she was discharged home to live with her boyfriend. Hospital charges: \$11,812; \$4,140 reimbursed by Medicaid; \$7,672 bad debt.

Case 5. A 45-year-old man received a single through-and-through wound to the left lower chest in a handgun assault. On arrival he was in shock and unarousable. He underwent emergency left nephrectomy, partial resection of the jejunum with primary reanastomosis, splenorrhaphy, and repair of two gastrotomies and an injury to the transverse mesocolon. He developed acute renal failure requiring dialysis. On postoperative day 5 intraperitoneal and upper gastrointestinal bleeding required a second laparotomy. His further course was complicated by recurrent bleeding secondary to gastritis, infection of a hematoma, urinary tract infection, pneumonia, and sepsis. On hospital day 58 the patient arrested; resuscitation was unsuccessful. Hospital charges: \$160,324; \$40,020 reimbursed by Medicaid, \$13,901 reimbursed by county funds, \$106,403 bad debt.

Descriptive Epidemiology

Two hundred fifty persons were hospitalized during the 18-month enrollment period. Their median age was 28 years (range, 8-81 years); other demographic characteristics are presented in Table 1. Most injuries were assaultive, and handguns were by a wide margin the type of firearm most frequently involved (Table 1).

The 250 initial hospitalizations consumed, in total, 2039 in-patient days. The length of hospital stay (LOS) ranged from 1 to 247 days, with mean and median values of 8.2 and 4 days, respectively. Most patients (71%) were discharged within 1 week, and 73 persons (29%) were discharged within 24 hours. The eight patients hospitalized for 30 days or longer accounted for 36% of all in-patient days. Seventeen patients (7%) died during their initial hospitalization. Of the 233 remaining, 210 (89%) were discharged home and 23 (11%) to continuing care facilities.

Thirty-one patients underwent a total of 71 subsequent

Table 1
Demographic and circumstantial data for 250 hospitalizations for treatment of firearm injuries, UC Davis Medical Center, January 1, 1984-June 30, 1985

	Number	Percentage
Gender		
Male	209	84
Female	41	16
Age (years)		
0-14	9	4
15-24	81	32
25-34	92	37
35-64	60	24
65+	8	3
Race/Ethnicity		
Non-Hispanic white	128	50
Black	74	30
Hispanic	41	16
Asian	6	2
Other	3	1
Mode of Shooting		
Assaultive	149	60
Suicidal	32	13
Unintentional	41	16
Undetermined	22	9
Legal intervention	6	2
Firearm Type*		
Handgun	181	78
Shotgun	28	14
Rifle	15	7
Non-powder firearm	3	1

* Data available for 207 shootings.

admissions for sequelae of their injuries by mid-1989. Twenty patients were readmitted only once; seven patients were readmitted three or more times; the patient in Case 3 returned 20 times for esophageal dilatation. While most secondary admissions (54%) occurred within 6 months of the original hospital discharge, 25% occurred more than 2 years later. These rehospitalizations required a total of 304 patient days; the mean and median LOS were 4.7 and 4 days, respectively.

Costs

The aggregate hospital charge attributable to these 250 shootings was \$3,745,496, an average of \$14,982 per case, of which 88% was accrued during initial hospitalizations and 12% thereafter. Eighty percent of this amount (\$3,010,213) was reimbursed directly by public payors, or borne indirectly by the public as a hospital write-off.

The initial hospitalizations generated charges of \$3,297,506, excluding physician and other professional fees (Table 2). The five cases with charges above \$100,000 accounted for 33% of this amount. California's Medicaid program was the largest identifiable source of reimbursement; charges to Medicaid ranged from \$0 to \$340,042 and the total Medicaid reimbursement was \$861,951. A slightly higher amount was written off as bad debt. Public funding sources in aggregate bore 81%

Table 2
Charges and reimbursement for 250 initial hospitalizations for firearm injuries, UC Davis Medical Center, January 1, 1984-June 30, 1985

Payment Source	Payment	Percentage of Total
Public		
Medically indigent Adult Program	\$ 522,549	15.9
Medicaid	861,951	26.1
Medicare	134,930	4.1
Other state, county funds	270,904	8.2
Written off by hospital	866,389	26.3
Total	\$2,656,703	80.6
Private		
Insurers	\$ 632,918	19.2
Patient	7,885	0.2
Total	\$640,803	19.4
Total Charges	\$3,297,506	100.0

Mean charge per hospitalization: \$13,190; median charge per hospitalization: \$5,998; range: \$787-\$494,152.

Table 3
Charges and reimbursement for 71 subsequent hospitalizations, as of June 30, 1989, for sequelae of 250 firearm injuries first treated at UC Davis Medical Center, January 1, 1984-June 30, 1985

Payment Source	Payment	Percentage of Total
Public		
Medically indigent Adult Program	\$ 65,223	14.6
Medicaid	85,630	19.1
Medicare	13,808	3.1
Other state, county funds	49,228	11.0
Written off by hospital	139,621	31.2
Total	\$353,510	79.0
Private		
Insurers	\$ 86,515	19.3
Patient	7,965	1.7
Total	\$ 94,480	21.0
Total Charges	\$447,990	100.0

Mean charge per hospitalization: \$6,310; median charge per hospitalization: \$5,571; range: \$780-\$32,818.

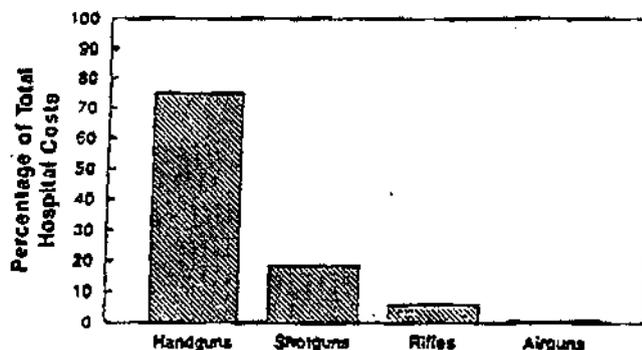


Figure 1. Charges for hospital treatment of firearm injuries by firearm type. UC Davis Medical Center, 207 patients first hospitalized January 1, 1984-June 30, 1985 after injury by firearm of known type, followed to June 30, 1989.

of these initial expenses: less than 1% of charges were reimbursed by the patients themselves.

The charge for the secondary hospitalizations was \$447,990, of which 79% was reimbursed directly by public

funds or written off by the hospital (Table 3).

Seventy-five percent of the total hospital charges resulted from handgun injuries (Fig. 1). The average charges per case by firearm type were shotguns, \$19,314; handguns, \$13,620; rifles, \$11,784; non-powder firearms, \$7,352.

DISCUSSION

The costs of firearm injuries treated at major trauma centers are substantial. In this study, the initial hospitalizations for persons suffering firearm injuries led to hospital charges of nearly \$3.3 million at a single institution over 18 months.

Moreover, acute hospital costs represent only a portion of the lifetime costs of in-patient medical care for firearm injuries. For the subjects in this study, secondary hospitalizations at UCDMC alone added 12% to hospital costs, and several patients were known to be hospitalized elsewhere. Subsequent hospitalizations add an estimated 26% to hospital costs for care of firearm injuries nationwide.⁴ Physician and other professional fees are estimated to add still another 25% to institutional charges of the type reported here.⁴

Rice and colleagues⁴ estimated the national aggregate cost of initial hospitalization for treatment of firearm injuries in 1985, including physician fees, to be \$455 million; the total lifetime cost of medical care for these injuries will be an estimated \$863 million.

The estimated cost of medical care for each year's firearm injuries is rising rapidly. In 1988 there were 33,791 firearm deaths in the United States,³ a 7% increase from 1985, and the cost of medical care had increased by 22%.²² Following the methods used by Rice et al., we estimate that the cost for acute hospital care of firearm injuries sustained in 1988 had risen to \$595 million nationwide—an increase of 30% in 3 years. The lifetime medical care cost of these injuries will be an estimated \$1.13 billion.

These costs are largely borne by the public. Both the present report and an earlier study from San Francisco General Hospital¹⁷ have determined that at least 80% of hospital charges for treatment of firearm injuries are reimbursed by government entitlement programs or written off as bad debt. The public pays a far lower share of the cost of other injuries. For all types of injury taken together, 68% of costs are reimbursed by private insurers or patients themselves and only 32% by public funds.⁴

National data may well underestimate the importance of these developments for major urban trauma centers, where the incidence of firearm injuries has risen most rapidly since the mid-1980s. For example, the Washington, D.C. Hospital Center recently reported a threefold increase in admissions for gunshot wounds from 1987 to 1988, from 180 to 551, with average per patient charges in 1988 of \$16,700. Hospital charges of \$200,000 to

\$300,000 for acute care of gunshot wounds were generated in a single weekend.²³

While some of the increase in cost per case results from inflation, there is a widespread conviction among trauma surgeons that the severity of firearm injuries has increased as well. At Cook County Hospital in Chicago for example, only 5% of persons admitted for treatment of gunshot wounds in 1984 has been shot more than once. By 1988 that proportion had risen to 20%.⁵ Many trauma surgeons attribute this trend to the increased criminal use of paramilitary "assault" weapons and other semiautomatic, high-capacity firearms.^{5,24}

Surgical residents in the armed forces are now urged by their faculty to work for 3 to 6 months in urban trauma centers, "to take advantage of the experience of civilian trauma centers dealing with war-type pathology."²⁵ Four trauma centers: Washington Hospital Center, Washington, D.C.; University of Maryland Hospital, Baltimore; Ben Taub General Hospital, Houston; and King-Drew Medical Center, Los Angeles—where 82% of all trauma deaths result from gunshot wounds—now provide this training for future combat surgeons.^{26,27}

Hospitals themselves have few opportunities to control the costs of firearm injuries. Prolonged hospitalization should be avoided if the patient's condition permits. Of the five most costly UCDMC hospitalizations, four also ranked in the top 5% for length of stay. Each of these included a substantial period during which chiefly custodial care was provided. However, clinicians are already well aware of the difficulty of discharging patients with serious chronic illness or disability.

These data suggest that the primary prevention of firearm injuries is the most effective available cost-reduction strategy. Firearms rank second only to motor vehicles among all consumer products in their ability to consume public funds for health care. Policymakers should consider the public costs of firearm injury in formulating firearm policy.

Acknowledgments

The authors are grateful to the following UC Davis Medical Center staff: Ingrid Roberts, for computerized searches of the medical records data base; Anice Burton, Diane Emberlin, Kathy Lawrence, Terry Sherb, MHS, and Nancy Wagner, for compiling cost data; and Barbara Claire and Joanne Evans for manuscript preparation.

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DISCOVERIES

Barley black. A compound found in barley leaves may prove useful against skin cancers, skin rashes and wrinkles caused by sun exposure.

Research by Makoto Ishikawa, professor of chemistry at the University of California, San Diego, and his colleagues is published in the journal *Journal of Natural Products*.



...of the compound, which is found in the leaves of barley, is a flavonoid called xanthoxanthin. It is a natural antioxidant and has been shown to have anti-inflammatory and anti-carcinogenic properties. The researchers found that xanthoxanthin can protect skin cells from damage caused by ultraviolet radiation. They also found that it can inhibit the growth of skin cancer cells in laboratory tests.

Public funds. Eighty percent of the public charges for graduate counseling times at UC Davis, the state's center for public health research on winter illness, and other research at the UC Davis Medical Center, Garden Whittrop, associate professor of computer and internal health, and staff research associates. A single found that 250 gunshots were administered in UC Davis from Jan. 15, 1984 through June 30, 1985.

...of the state's total population. The study found that the state's total population is 27 million, not counting professional staff from their salaries. Public funds paid nearly \$2 million of the total bill, while UC Davis, at the \$500,000, paid the rest.

Barley black. People who tend to have favorable beliefs about driving and engage in vengeful behavior are more likely to be involved in motor vehicle accidents and predisposed to dwell on sights and traumatic events, according to a study by Robert A. Emmons, associate professor of psychol-

ogy. Emmons' subjects completed a questionnaire about their past vengeful behavior and wishes, and answered questions designed to measure different aspects of their personality. He found that those with vengeful attitudes are more likely to have health problems, especially those related to stress and anger.

...of the study, Emmons found that people with vengeful attitudes are more likely to have health problems, especially those related to stress and anger. He also found that these individuals are more likely to engage in risky behaviors, such as drinking and driving, and are more likely to be involved in accidents. The study suggests that vengeful attitudes can have a negative impact on a person's overall health and well-being.

High risk. Truck drivers more than double their risk of leaving an accident when they push the limits of federal regulations by adding up to 11 consecutive hours in a study examining the factors involved in truck accidents. Consecutive driving hours are more important than experience, age, night driving and hours off duty, plus, in the study, Paul Jovanis, professor of engineering, and his colleagues found that the likelihood of an accident during the first hour of driving is 10 percent after five consecutive hours of driving and up to 20 percent in the eighth hour. By the ninth hour of driving the accident risk rises 30 percent over the first few hours of driving.



Musicians are conducting a fund-raising effort to raise \$500,000 for an endowment to support the UCD Symphony Orchestra. Co-chair of the campaign is oboist Mary Smith Cabral '84 (left), seen here at a symphony rehearsal with two other campaign committee members, flutist Tomiko Katsuzono and violist Stephen Abraham '81.

SYMPHONY
A campaign set to music

The first movement of a fund-raising campaign to establish an endowment for the UCD Symphony Orchestra has swelled to a stirring crescendo. Within two months of the launch of the campaign in February, \$100,000 in pledges from concert patrons, faculty, alumni, parents and orchestra members themselves.

The UCD Symphony Endowment is intended to help the 34-year-old ensemble survive the dissonance of the statewide fiscal crisis. A total of \$500,000 will be required to properly fund the endowment, according to music professor D. Kern Holoman, the symphony's conductor and honorary chair of the fund-raising campaign.

The endowment will provide perpetual support by keeping the principal intact and using only income from the fund to support the symphony. Income from the endowment will be used initially for music purchase and rental, engagement of soloists and coaching expenses. As the fund grows, it may also be used to help

underwrite off-campus touring appearances and merit-based scholarships for prospective students.

The symphony's concertmaster, Cynthia Bates '76, M.A. '79—director of Subject A English studies at UC Davis—is co-director of the endowment campaign with oboist Mary Smith Cabral '84, a health-care professional.

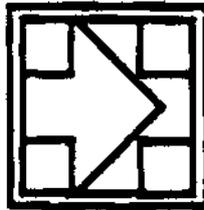
"Financially, the symphony has operated from the first on a wing and a prayer," said Bates. "The monetary disaster in California has hit us especially hard, just as we were achieving our stride. We'll manage to maintain a basic season, come what may. But it's time to guarantee that the joys of live symphonic music will not be lost to the generations of Californians who will lead our next century."

Over the years, more than 1,000 musicians have played in the UCD symphony. But the Department of Music has lost touch with many of the symphony alumni.

"We hope they hear about us through *UC Davis Magazine* and other sources and join us in securing the future of the UCD Symphony Orchestra," said Holoman. For information, phone him at (916) 752-9041.

Good Article in Economic Cost of Crime

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FOR IMMEDIATE RELEASE
October 23, 1991

VIOLENCE COSTS TO HOSPITALS STUDIED

The costs of criminal violence in hospitals in the District of Columbia totalled \$20.4 million in 1989, according to a study released this week by the District of Columbia Hospital Association (DCHA). Costs per individual patient averaged \$7319, with charges ranging from under \$1000 to as much as \$261,000 for one patient.

"Criminal violence has been an increasing source of concern for hospitals in the District," said DCHA President Howard Jessamy. "For a number of years, we have experienced the over-crowding in emergency rooms during peak periods of violent behavior, but until now, we had only speculated about the high costs."

"We learned that 68 percent of all victims of violence were uninsured, and another 10 percent whose insurance remained uncertain," explained John Billings, principal researcher. "Costs to the hospitals of these uninsured patients were \$17.8 million, or nearly 10 percent of the total uncompensated care costs. These costs were partially covered either through tax revenues (such as at D.C. General), or by cost-shifting expenses to insured patients," he added.

The study, which was sponsored by DCHA and conducted by Mr. Billings and Nina Teicholz, involved a review of medical records over a two-month period (January - February) in 1989 at the eleven District acute care hospitals with emergency rooms. Over 600 patients were identified as being victims of violence. Patient demographics were collected, including sex, age, race, and type of health insurance (if any). In addition, information was gathered about the type of weapon involved, as well as the cost of care for each patient.

The study showed that young black males were a significant majority of hospitalized victims of violence. Almost 90 percent of victims were male, and 88.5 percent were black, reflecting the overall higher rates of crime against blacks as documented in other studies.

80%

"Firearms were involved in over 42 percent of the 611 cases, and in over 54 percent of hospital expenses," Mr. Billings explained. "While the type of firearm was not always identifiable from the medical record, in an overwhelming majority of the cases where it was identified, a handgun was specifically documented as the cause of injury.

"In nearly 23 percent of cases, a knife or other blade was the weapon which caused the injury, and in 8 percent of cases, weapons such as bats, bricks, pipes, rocks, bottles, brass knuckles and other blunt instruments were identified as the weapon used."

Length of hospital stay for the victims averaged 7.2 days, with stays ranging from one day to 141 days. The length of stay for firearm victims averaged 9.2 days.

"More than half of the 611 cases had charges under \$5000, but these made up only 13 percent of total charges for violent injuries. Sixteen cases (2.6 percent of cases), ten of which involved firearms, had charges of about \$50,000, and these admissions accounted for nearly 27 percent of total charges.

The study explains that the costs to hospitals of criminal violence is typically only about half the total health costs associated with such injuries. Follow-up care, such as physician fees, outpatient visits and rehabilitation, add to the costs. Thus, the total costs to the health care system of violent injuries in 1989 in the District may exceed \$40 million.

Finally, the study estimates the total health care costs of criminal violence for the nation in 1989 at \$3.5 billion, with \$1.5 billion resulting from firearms.

The District of Columbia Hospital Association is a not-for-profit organization which represents the 17 hospitals in the District of Columbia, and works with them to improve the health of the community.

THE COSTS OF CRIMINAL VIOLENCE
IN DISTRICT OF COLUMBIA HOSPITALS

SUMMARY OF KEY FINDINGS

- Hospital costs for D.C. residents for injuries due to criminal violence were \$20.4 million in 1989, with total health costs estimated to exceed \$40 million.
 - Hospital expenses per case for violent crimes ranged from less than \$1000 to more than \$250,000
- 55% of these costs were due to crimes involving a firearm.
- 68% of the victims of violent crimes in the District were uninsured.
- These uninsured victims of crimes accounted for almost 10% of all uncompensated care in District hospitals in 1989.
- The costs of care provided to uninsured crime victims is partially paid for from tax revenues (e.g. support to D.C. General Hospital) or by "shifting" these expenses to insured patients who use District hospitals.
 - This "cost shift" may result in an increase in charges to privately insured patients ranging from \$25 in some hospitals to as much as \$380 in another hospital.
- On a national basis, total health care costs due to criminal violence are estimated to be more than \$3.5 billion in 1989, with \$1.5 billion resulting from firearms.

xxviii Cost of Injury in the United States

billion, because of the short life expectancy and low earnings of the population at greatest risk. The morbidity cost, \$21 billion, is high because falls result in long-term disability, accounting for 57 percent of the total cost.

Per Person Cost: The average lifetime cost per person for a fall injury is \$3,033. The average cost per fatal fall is \$99,669, the lowest of all causes of injury, reflecting the short life expectancy and low earning power of the elderly population at greatest risk. The average per person cost for hospitalization for a fall injury is \$38,174 and for a person injured but not hospitalized, \$499.

Firearms



Incidence: Injuries resulting from the use of firearms are the second leading cause of injury death in the United States. In 1985, 31,556 people were shot to death; 39 percent of the deaths were homicide, 56 percent were suicide, and 5 percent were unintentional. The risk of firearm death is highest for the 15-44 age group. Males over age 75, however, have the highest rate of any other age group, due primarily to suicide by firearm. There are an estimated 65,000 hospitalizations for treatment of firearm injuries, and 171,000 persons injured by firearms who did not require hospitalization.

Lifetime Cost: Firearms rank third in the economic toll on society, amounting to \$14.4 billion, or 9 percent of the total cost. Firearm injuries account for 5 percent of total injuries, but fatalities at young ages result in a high mortality cost and males are responsible for 86 percent of the cost. Firearm injuries account for \$1.4 billion in morbidity cost and 12 billion in mortality cost.

Per Person Cost: The average per person cost of a firearm injury is very high, \$53,831, because of the large number of fatal firearm injuries. The average per person cost for a fatality, \$373,520, is the highest of any cause of injury. The average cost for hospitalization due to firearm injury is \$33,159 and for a person injured but not hospitalized, \$458.

Poisonings



Incidence: Poisonings account for 11,894 deaths, 218,500 injured persons hospitalized, and 1.5 million injured persons not requiring

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Patterns of injury by age are considerably different for less severe injuries not resulting in hospitalization. The elderly aged 75 and older are at a comparatively low risk of minor injury (14,593 per 100,000). Children aged 5-14 and adolescents and young adults aged 15-24 are at the highest risk of minor injury (29,420 and 31,619 per 100,000, respectively).

The risk of injury also varies by sex within each class of injury. In every age group except the very young, aged 0-4, the injury death rate for males is more than twice as high as the rate for females. In contrast, males are only 1.4 times as likely as females to sustain a nonfatal injury. Furthermore, among older adults, the risk to females of nonfatal injuries actually exceeds the risk to males. Among adults aged 65 and over, females are one and one-half to two times as likely as males to suffer a nonfatal injury.

Cause of Injury

The distributions by cause vary for deaths, hospitalizations, and nonhospitalizations as shown in Table 2 and Figure 4. The number of injuries and rates for each cause of injury are shown in Appendix Tables C-2-C-8. The two leading causes of injury death are related to motor vehicles and firearms. They account for 45,923 and 31,556 deaths, respectively (19.4 and 13.3 per 100,000, respectively). Together, these two leading causes of injury death comprise more than half of the injury deaths. In contrast, the leading cause of nonfatal injury is falls, accounting for 783,357 hospitalizations (331 per 100,000) and 11.5 million nonhospitalized injured persons (4,848 per 100,000). Motor vehicle injuries comprise the second leading cause of nonfatal injury, resulting in 223,028 hospitalizations (221 per 100,000) and 4.8 million nonhospitalized injured persons (2,026 per 100,000). Firearms, on the other hand, account for less than 1 percent of nonfatal injuries. These differences in distribution by cause and class underscore the lethality of injuries involving firearms and motor vehicles.

Injuries categorized as 'other' include a variety of causes. For deaths, other causes primarily include stabbings, suffocations from foreign bodies, and hangings and represent 20 percent of all injury deaths. Nonfatal injuries resulting from other causes are primarily those related to being stabbed, hit by an object or person, or injured by a cutting or piercing instrument. Thirty percent of hospitalized injuries are in this category. For less severe nonhospitalized injuries, additional common causes categorized as 'other' include animal and insect bites, one-time lifting or exertion, and twisting or stumbling, and they comprise 64 percent of nonhospitalized injuries.

Injury, 1985

Male
Female

of Injury, 1985

- 75+
- 65-74
- 45-64
- 25-44
- 15-24
- 5-14
- 0-4

1985

Table 2
Number and Rate of Injured Persons by Cause
and Class of Injury, 1985

Cause	Total		Fatalities*		Hospitalized		Nonhospitalized	
	Number (000's)	Rate per 100,000 Persons	Number	Rate per 100,000 Persons	Number	Rate per 100,000 Persons	Number (000's)	Rate per 100,000 Persons
Total	56,899	23,985	142,548	60.1	2,346,735	990.0	34,369	21,933
Motor Vehicles	5,372	2,266	45,923	19.4	523,028	220.6	4,803	2,026
Falls	12,289	5,184	12,866	5.4	783,357	330.5	11,480	4,648
Fires	268 **	113	31,556	13.3	45,129	27.5	171 **	72
Poisonings	1,702	719	11,894	5.0	218,554	92.2	1,472	621
Fires/Burns	1,463	617	5,671	2.4	54,397	22.9	1,403	592
Drownings†	38 **	16	6,171	2.6	5,564	2.3	26 **	11
Other	38,726	15,071	28,487	12.0	696,707	293.9	35,001	14,785
Male	32,116	28,018	102,804	89.7	1,321,573	1,152.9	30,692	26,776
Motor Vehicles	2,459	2,148	32,454	28.3	311,496	271.7	2,115	1,845
Falls	5,633	4,914	7,002	6.1	317,980	277.4	5,308	4,631
Fires	216 **	189	24,366	21.0	36,718	49.5	133 **	116
Poisonings	688	601	7,621	6.6	97,754	85.3	583	509
Fires/Burns	777	696	3,438	3.0	38,946	34.0	753	659
Drownings†	38 **	30	4,051	4.3	3,928	3.4	26 **	23
Other	22,288	19,444	20,972	18.3	494,752	431.6	21,772	18,994
Female	24,783	20,209	39,744	32.6	1,025,162	837.3	23,677	19,339
Motor Vehicles	2,913	2,379	13,469	11.0	211,532	172.8	2,688	2,196
Falls	6,656	5,437	5,864	4.8	465,377	380.1	6,185	5,052
Fires	52 **	42	5,190	4.2	8,411	6.9	38 **	31
Poisonings	1,016	828	4,273	3.5	128,800	98.7	889	716
Fires/Burns	666	544	2,233	1.8	15,451	12.6	648	529
Drownings†	3 **	2	1,220	1.0	1,436 **	1.3	-	-
Other	13,438	10,976	7,515	6.1	201,965	165.0	13,229	10,805

* Excludes 13,097 deaths occurring in later years due to injuries incurred in 1985

** Figure has low statistical reliability or precision (relative standard error exceeds 30 percent)

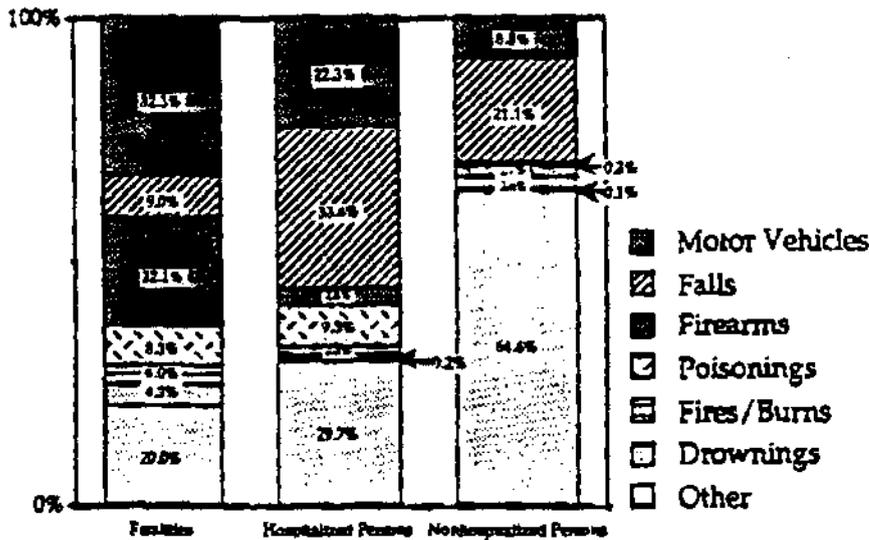
† Includes Near Drownings

Intent of Injury

Slightly more than one-third of all injury deaths involve intentional injuries (Table 3 and Figure 5). Of 49,276 intentional injury deaths, 40 percent are homicides (19,830) and 60 percent are suicides (29,446). The remaining two-thirds of the deaths are due to unintentional causes - 51 percent to motor vehicles, 13 percent to falls, and 36 percent to other causes.

Males
 Females

Figure 4
Distribution of Injured Persons by Cause and Class of Injury, 1985



Information regarding intent of injuries resulting in hospitalization is less complete than for injury deaths. Intent is not uniformly recorded in the medical record, and if it is, this information often represents conjecture on the part of the physician or nurse completing the narrative description of the injury. To arrive at a rough estimate of the numbers of intentional and unintentional hospitalized injuries, it is assumed that all injuries resulting from motor vehicles, falls, fires, and near drownings are unintentional. The remaining injuries are categorized by intent as reflected in the International Classification of Disease (ICD-9) E-code (Commission on Professional and Hospital Activities, 1980). Using this approach, 84 percent of all hospitalized injuries are classified as the result of unintentional injury, and 11 percent the result of intentional injury, including poisonings (31%), firearms (11%), and other assaultive injuries (58%). The remaining 5 percent can not be classified. Approximately one-half of the hospitalized injuries recorded as intentional are self-inflicted. Sufficient data are unavailable to categorize nonhospitalized injuries by intent.

Num

Intent

Total

Unintentional

Intentional

Intent Unknown

Male

Unintentional

Intentional

Intent Unknown

Female

Unintentional

Intentional

Intent Unknown

* Excludes 13, incurred in i

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Sex, 1985

result of a fall (62 per 100,000 and 2,259 per 100,000, respectively) (Figure 7 and Appendix Table C-3). The death rate due to falls among the elderly aged 75 and older is nearly 12 times as great as the rate for all ages combined and the risk of hospitalization nearly 7 times as great. The risk of death or hospitalization related to falls among children and young adults less than 45 years of age, on the other hand, is very small (less than 1 per 100,000 for deaths and less than 200 per 100,000 for hospitalizations).

A different age pattern is observed for falls resulting in minor, nonhospitalized injuries. The elderly aged 75 and over remain the age group at highest risk; they account for 993,000 injuries or 8,610 per 100,000. However, children less than 15 years of age are also at high risk; they comprise the second and third highest age groups at risk of minor injury due to falls. Falls represent over one-quarter of all minor injuries in this age group.

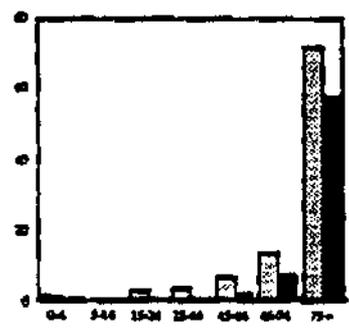
Males at all ages are at higher risk of fall-related deaths than females, although the male to female ratio is considerably less (1.3) than for other causes. Elderly females, however, are at considerably higher risk of nonfatal fall-related injuries than males. Females aged 65 and over are more than twice as likely as males in the same age group to sustain a nonfatal injury resulting from a fall.

Falls among the elderly tend to involve a trip or fall on a level plane. The high risk of death and serious injury resulting from falls among the elderly is due to several factors, including higher rates of osteoporosis and other medical conditions, as well as increased impairment of vision, gait, and balance. The use of medications is also correlated with falls among the elderly (Ray, Griffin, Schaffner, et al., 1987). Elders have a greater risk of complications, even with minor injuries. Falls resulting in hip fractures frequently signal the end of independent living for elderly persons. Falls are a significant risk among residents of nursing homes and chronic care facilities (Baker, O'Neill, and Karpf, 1984). Among younger people, most fatal falls are from a height (e.g., down stairs, out windows) (Gallagher, Guyer, Kotelchuck, et al., 1982). A classic program to install window bars in New York City reduced fall deaths among children (Speigel and Lindeman, 1977), although a more recent study questions whether the effect has been sustained (Bergner, 1982).

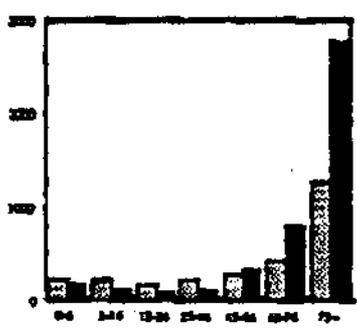
Firearms

Injuries resulting from either the unintentional or intentional use of firearms constitute the second leading cause of death due to injury in the United States. In 1985, 31,556 people died from firearm injuries (13 per 100,000). For all ages, 39 percent of firearm deaths are homicides and 56 percent are suicides. An additional 5 percent of firearm deaths are

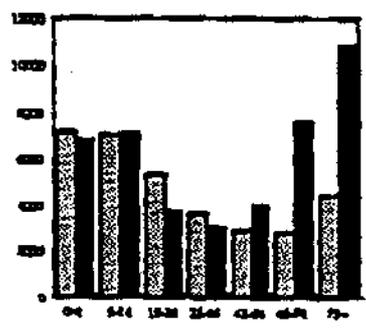
Figure 7
Falls: Injury Rate by Age and Sex, 1985
(rate per 100,000 population)



Fatalities



Hospitalized Persons



Nonhospitalized Persons

□ Males
■ Females

unintentional. The young adults aged 15-24 and elderly aged 75 and over are the population (42 percent) with the highest injury rate is 1.8 times as high as for males aged 15-44. Females are largely displaced by males 75 and older among younger males.

Patterns of injury are nonfatal as opposed to fatal, nonhospitalized in relatively few injuries.

Handguns accounted for 15 percent of all gun injuries (U.S. DOJ, 1986), and the adoption of assault rifle patterns of firearm use is uniquely American. In a study of 1000 gun deaths (American Medical Association autopsy in 45 percent of cases, Loya, et al., 1986), 75 percent of firearm availability was attributed to firearm retailers in the home store, unintentionally or acquaintances (Kel...

Poisonings

In 1985, poisonings accounted for 1.5 percent of hospitalizations (Table C-5). Almost 80 percent of poisonings are ruled suicidal. Young adults aged 15-24 have the highest death rate (8 per 100,000). Nearly 50 percent of poisonings are ruled suicidal, nevertheless undetected because deaths are not immediately obvious.

Patterns of poisoning are different from those resulting from falls. Poisonings are associated with products (per 100,000), very young...

of injury deaths is underestimated, especially among the elderly for whom an injury may only be coded as a contributing rather than the underlying cause of death. The number of hospitalized injuries is also likely to represent an undercount since admissions to Veterans Administration and other state or federal hospitals are not included in the NHDS sample. Finally, injuries occurring in institutions such as mental institutions and prisons and not resulting in hospitalization are omitted from the totals since the NHIS collects information only on household members who are not institutionalized at the time of the interview. The NHIS is based on self-reporting, unlike the National Mortality Detail File and the NHDS, which are based on medical records. Therefore, there may be overcounting of injuries to survey respondents and undercounting of injuries to other household members.

Due to limitations of the mapping from ICD-9CM codes to AIS severity scores, the distribution of traumatic injuries by severity is also likely to be conservative - that is, the number of severe injuries (ICD/AIS 5) is underestimated. Comparison with more comprehensive sources on specific types of injury such as head injuries and spinal cord injuries, however, indicates that the bias is not great (Kraus, 1985; Frankowski et al., 1985).

In comparing these estimates to those derived from other studies or surveillance systems, the following potential sources of difference may be observed. First, classification by cause is without regard to intent. Also, definitions of specific cause categories may differ from one study to another. Second, estimates of hospitalized injuries exclude inpatient deaths. Thus, for example, the number of severe (ICD/AIS 5) head injuries in Table 4 includes only persons who survive to discharge although studies have shown that an equal number of people are admitted to a hospital with a severe head injury and subsequently die prior to discharge (MacKenzie et al., 1989; Kraus, Black, Hessol, et al., 1984). These hospital deaths are included in the mortality figures. Finally, in comparisons of these estimates to those developed using more accurate information about the incidence of specific types or causes of injury, rates of injury may vary over time and across geographic regions. (Baker et al., 1987; U.S. CDC, 1988)

Conclusion

Incidence data are essential for estimating the cost of injury in the United States. About 56.9 million persons, one in four persons in the nation, are estimated to have been injured in 1985. Of this total number of injured persons, 142,568 died, 2.3 million were hospitalized, and 54.4 million were less severely injured, not requiring hospitalization. Injury occurs across the age range and to both genders, but younger persons

and males are more persons under age Motor vehicles a accounting for m leading cause of r The injury contribution to t States. This is th injuries by sex, a believed to be magnitude of a s

and males are most affected. Four of five injuries occur annually among persons under age 45 and three in ten males sustain injuries in a year. Motor vehicles and firearms are the leading causes of injury death, accounting for more than half of all injury deaths. Falls, however, are the leading cause of nonfatal injury.

The injury incidence data in this chapter represent a major contribution to understanding the full burden of injury in the United States. This is the first attempt to present a comprehensive picture of all injuries by sex, age, severity class, cause, and intent. The estimates are believed to be conservative, undoubtedly understating the overall magnitude of a serious public health problem facing the nation today.

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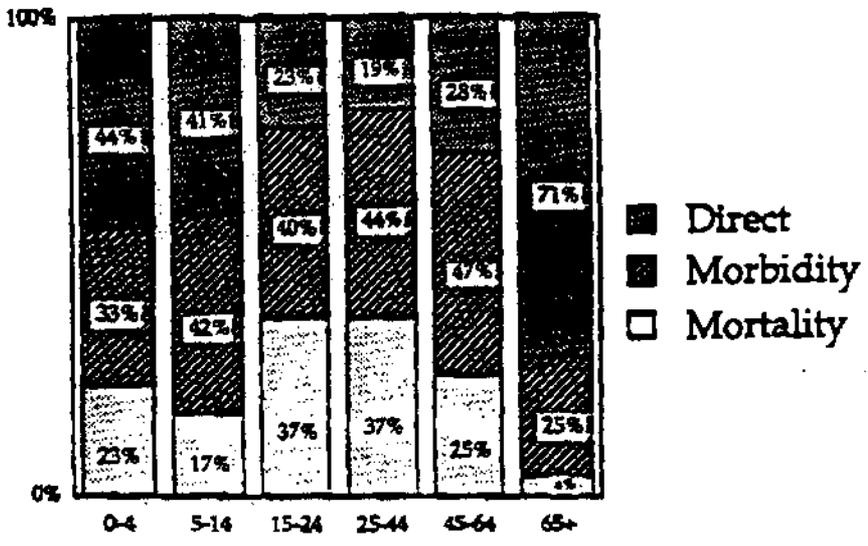
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morbidity, 25 percent; and mortality, 4 percent (Figure 14). By contrast, for injured persons aged 15-24, direct cost comprises 23 percent of total lifetime cost; morbidity and mortality costs represent 40 and 37 percent, respectively. The high indirect cost for the younger age group again reflects their high injury fatality rate, the large number of years lost to productivity, high labor force participation rate, and high lifetime earnings.

Figure 14
Distribution of Lifetime Cost of Injury
by Age and Type of Cost, 1985



Cause of Injury

The distribution of total lifetime cost by cause shows that the greatest losses are caused by motor vehicles and falls, accounting for \$49 billion and \$37 billion, respectively (Table 6). Although the incidence rate for falls is higher than for motor vehicle crashes, the significantly larger number of motor vehicle fatalities among young persons results in higher lifetime costs. Motor vehicle injuries account for 9 percent of total injuries and 31 percent of the total economic cost (Figure 15).

Firearms rank third in economic toll, amounting to \$14.4 billion, or 9 percent of the total cost. Injuries from firearms account for one-half of one percent of total injuries, but fatalities at young ages are high for this cause of injury, resulting in high costs.

44 Cost of Injury in the United States

Injuries due to other causes number 36 million, 63 percent of all injuries, and the total lifetime cost amounts to \$42 billion or 27 percent of the total injury cost. Included in this category is a variety of injuries such as those due to cutting and piercing instruments; hangings; water, air, railway, and space transport accidents; and suffocation. For a complete list of the causes of injury included in the 'other' category, see Appendix A.

Table 6
Lifetime Cost of Injury by Cause and Type of Cost, 1985

Cause of Injury	Cost* (millions)				Cost* per Injured Person			
	Total	Direct	Indirect		Total	Direct	Indirect	
			Morbidity	Mortality			Morbidity	Mortality**
Total	\$157,615	\$44,807	\$64,920	\$47,888	\$2,772	\$790	\$1,143	\$207,636
Motor Vehicles	48,683	12,270	19,085	17,328	9,062	2,304	3,583	230,843
Falls	37,279	14,689	21,049	1,941	3,033	1,197	1,715	93,354
Firearms	14,410	911	1,418	12,080	53,831	3,860	6,006	370,706
Poisonings	8,537	1,703	2,441	4,394	5,015	1,037	1,444	369,402
Fires/Burns	3,832	929	1,548	1,364	2,619	631	1,062	238,841
Drownings†	2,453	78	107	2,268	64,993	2,466	3,389	340,707
Other	42,421	14,235	19,272	8,914	1,187	399	540	293,817
Male	107,995	23,907	48,043	39,045	3,363	767	1,407	349,030
Motor Vehicles	33,328	6,765	12,912	13,652	13,534	2,788	5,321	370,618
Falls	21,041	5,445	14,335	1,261	3,735	968	2,548	138,042
Firearms	12,328	784	1,054	10,491	57,853	4,132	5,354	384,424
Poisonings	5,589	726	1,599	3,265	8,119	1,066	2,349	428,358
Fires/Burns	2,801	608	1,238	935	3,513	766	1,859	274,804
Drownings†	2,117	56	76	1,986	60,704	1,873	2,526	391,884
Other	30,790	9,524	13,631	7,435	1,381	428	621	331,368
Female	49,620	20,900	19,877	8,843	2,008	846	805	201,910
Motor Vehicles	15,355	5,506	6,173	3,676	5,271	1,899	2,129	236,553
Falls	16,239	9,245	6,714	280	2,440	1,390	1,010	38,136
Firearms	2,081	128	365	1,589	40,338	2,749	7,855	308,035
Poisonings	2,948	977	842	1,129	2,907	968	834	264,252
Fires/Burns	1,030	312	310	408	1,548	470	468	182,844
Drownings†	335	22	31	282	117,372	13,302	19,171	231,220
Other	11,631	4,711	5,441	1,479	866	351	405	187,187

* Discounted at 6 percent

** Based on 153,465 deaths, including 13,097 deaths in later years due to injuries sustained in 1985

† Includes Near Drownings

Distribution of

63%

Injuries due to total injur

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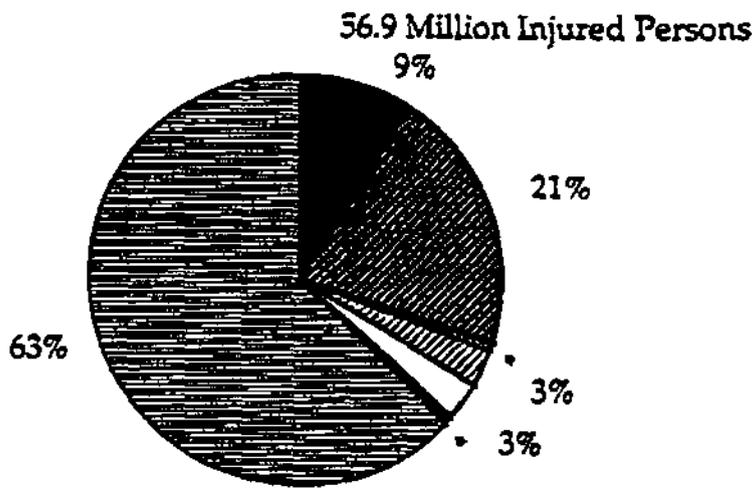
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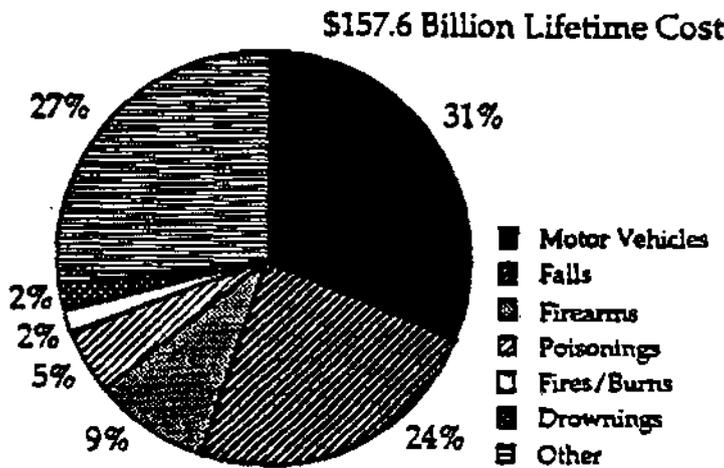
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Figure 15

Distribution of Injured Persons and Lifetime Cost by Cause, 1985



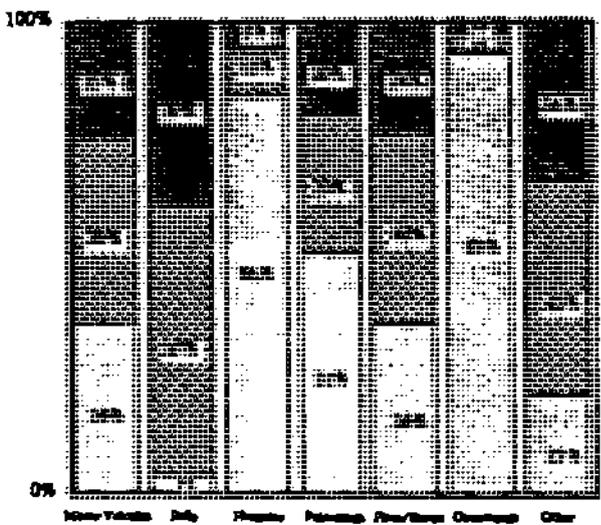
• Injuries due to firearms and drownings each comprise less than 5% of total injuries



Distribution by cause of injury varies among the three cost components (i.e., direct, morbidity, and mortality costs), reflecting

differing age, sex, medical care use, morbidity, and mortality patterns. Figure 16 shows the distribution of each cost component by cause of injury. As expected, for injuries with high fatality rates, the mortality cost represents a larger proportion of the total than do direct and morbidity costs. For example, 93 percent of the total economic cost of drownings and near drownings is lost lifetime earnings resulting from deaths. For falls, which result in high disability, the morbidity cost comprises the largest proportion of the total at 57 percent. The direct cost for falls is also relatively high at 39 percent.

Figure 16
Distribution of Lifetime Cost of Injury by Cause and Type of Cost, 1985



Lifetime cost per injured person varies for the different causes. Drownings and near drownings are highest, amounting to about \$65,000 per person. Next highest is firearms, at \$54,000 per person (Table 6). Fatality due to both of these causes is high, especially for young age groups, accounting for the high cost per person.

Table 7 presents the aggregate cost of injury by cause, age, and sex. For each cause of injury, the 25-44 age group has the highest total cost. The second costliest for each cause is the 15-24 age group, except for falls, for which the cost for persons aged 65 and over is second. The cost per injured person by cause, age, and sex shown in Table 8 presents a different picture. Because drownings are almost always fatal, their total cost per person is very high. The cost per person drowned for the 15-24 age group is highest, at about \$351,000, followed closely by the 25-44 age

group at \$340,000. The total cost for the 15-24 age group is second and the highest cost is \$149,000. Motor vehicle injuries are the most common cause of injury per person, estimated at about 25-44.

Lifetime Cost of Injury by Age and Sex

Age and Sex	Total	Motor Vehicles
Total	\$157,615	\$48,683
0-4	4,127	1,004
5-14	9,699	3,107
15-24	39,142	16,107
25-44	65,822	20,652
45-64	23,971	5,939
65+	14,853	1,874
Male	107,995	33,328
0-4	2,531	628
5-14	6,775	2,145
15-24	29,137	11,379
25-44	50,307	14,987
45-64	15,428	3,511
65+	3,817	679
Female	49,620	15,355
0-4	1,596	377
5-14	2,924	962
15-24	10,005	4,728
25-44	15,514	5,665
45-64	8,544	2,429
65+	11,036	1,195

* Discounted at 6 percent
 - Includes Near Drownings

Economic Cost of Injury 47

group at \$340,000. The total cost per person injured by firearms ranks second and the highest cost is for persons aged 45-64, amounting to \$149,000. Motor vehicle injuries rank third in total cost per injured person, estimated at about \$9,000 with the highest cost for persons aged 25-44.

Table 7

Lifetime Cost of Injury by Age, Sex, and Cause, 1985

Age and Sex	Cost* (millions)							
	Total	Motor Vehicles	Falls	Fire-arms	Poison-ings	Fires/ Burns	Drown-ings**	Other
Total	\$157,615	\$48,683	\$37,279	\$14,410	\$8,537	\$3,832	\$2,453	\$42,421
0-4	4,127	1,004	1,161	33	168	326	183	1,252
5-14	9,699	3,107	2,626	293	108	267	201	3,097
15-24	39,142	16,107	6,456	4,204	1,484	785	767	9,340
25-44	65,822	20,652	10,994	7,838	4,761	1,607	1,039	18,931
45-64	23,971	5,939	6,243	1,848	1,429	642	236	7,634
65+	14,853	1,874	9,799	193	588	205	27	2,167
Male	107,995	33,328	21,041	12,328	5,589	2,801	2,117	30,790
0-4	2,531	628	690	20	96	188	122	788
5-14	6,775	2,145	1,820	241	52	176	163	2,178
15-24	29,137	11,379	4,792	3,669	942	630	700	7,025
25-44	50,307	14,987	8,224	6,740	3,452	1,233	928	14,744
45-64	15,428	3,511	3,539	1,535	870	489	191	5,294
65+	3,817	679	1,976	125	177	86	13	761
Female	49,620	15,355	16,239	2,081	2,948	1,030	335	11,631
0-4	1,596	377	471	13	72	138	61	464
5-14	2,924	962	806	53	56	91	38	919
15-24	10,005	4,728	1,663	535	542	155	67	2,315
25-44	15,514	5,665	2,770	1,098	1,309	374	111	4,187
45-64	8,544	2,429	2,705	314	558	153	45	2,340
65+	11,036	1,195	7,823	68	411	120	14	1,406

* Discounted at 6 percent
 ** Includes Near Drownings

48 Cost of Injury in the United States

For each cause of injury, except drownings and near drownings, the cost per injured male is higher than for the average female. Relatively few women (3,000) compared with men (35,000) are injured in this manner. The cost per injured female is higher, however, because the few females included in the sample had high medical costs.

Appendix Tables C-9-C-15 show the total lifetime cost and the amount per injured person by age, sex, and type of cost for each cause of injury. Appendix Table C-16 shows the number of deaths, including deaths in later years, by which the mortality cost per injured person is calculated.

Lifetime Cost of Injury

The lifetime cost of injury in the United States takes into account the cost incurred in the first year in which the injury occurs as well as the cost incurred in later years. Since many injuries result in long-term disability and premature death, the economic cost incurred in later years is high. Of the total lifetime cost of \$157.6 billion, almost three-fourths, \$116.4 billion, is for the first year cost and the remaining \$41.2 billion is estimated to be incurred in later years (Table 9). The estimating procedure is described at the end of this chapter.

The distribution of first and later year costs varies by cause of injury. For injuries resulting in a relatively large number of deaths, the first year cost comprises 94 to 98 percent of the total lifetime cost. This is because productivity losses due to premature death are considered to be a first year cost. For example, for drownings and near drownings, fatalities comprise 16 percent of the persons injured due to this cause, and the first year cost comprises 98 percent of the total. Likewise, 12 percent of firearm injuries are fatal and the first year cost accounts for 94 percent of the lifetime cost. By contrast, only one-tenth of one percent of falls result in death, and long-term disability often results from falls. For this cause of injury, 55 percent of lifetime cost is incurred in the first year and the remaining 45 percent in later years.

The distribution by type of cost of first and later year costs varies: 87 percent of the direct cost and 99.7 percent of the mortality cost occur in the first year. However, fully 54 percent of the morbidity cost occurs in later years.

Class of Injury

There are three classes of injury reflecting severity: 155,665 deaths (142,568 deaths occurring in 1985 plus 13,097 deaths occurring in later years due to injury sustained in 1985), 2.3 million hospitalized injured

Age and Sex	Lifetime	
	Total	Mortality
Total	\$2,772	\$9,06
0-4	1,014	8.9
5-14	952	9.4
15-24	3,070	9.1
25-44	3,644	10.0
45-64	3,252	7.4
65+	3,364	6.0
Male	3,363	13.5
0-4	1,030	8.9
5-14	1,132	11.3
15-24	3,630	14.9
25-44	4,597	14.4
45-64	4,455	13.8
65+	3,077	4.6
Female	2,005	5.2
0-4	989	8.5
5-14	695	6.9
15-24	2,118	4.7
25-44	2,179	5.2
45-64	2,187	4.2
65+	3,476	7.2

* Discounted at 6
 ** Includes Near D

Table 8
Lifetime Cost of Injury per Injured Person
by Age, Sex, and Cause, 1985

Age and Sex	Cost* per Injured Person							
	Total	Motor Vehicles	Falls	Fire-arms	Poison-ings	Fires/ Burns	Drown-ings**	Other
Total	\$2,772	\$9,062	\$3,033	\$53,831	\$5,015	\$2,619	\$64,993	\$1,187
0-4	1,014	8,963	882	108,386	495	2,253	6,376	588
5-14	952	9,485	1,057	12,087	408	1,583	159,021	448
15-24	3,070	9,135	3,538	69,720	10,839	2,118	351,406	1,087
25-44	3,644	10,005	4,244	47,746	8,706	3,252	340,247	1,552
45-64	3,252	7,485	3,558	148,516	5,582	4,977	155,285	1,726
65+	3,364	6,017	4,226	31,123	3,734	1,313	26,516	1,480
Male	3,363	13,554	3,735	57,053	8,119	3,513	60,704	1,381
0-4	1,030	8,993	996	148,146	608	3,173	4,434	543
5-14	1,132	11,336	1,437	12,242	398	3,816	153,160	503
15-24	3,630	14,912	4,476	70,078	22,973	3,509	379,937	1,187
25-44	4,597	14,472	5,852	52,450	15,728	3,371	359,571	1,893
45-64	4,453	13,801	4,943	150,637	9,523	4,541	159,460	2,319
65+	3,077	4,622	4,096	23,732	3,583	2,187	21,788	1,473
Female	2,005	5,271	2,440	40,338	2,907	1,548	117,372	866
0-4	989	8,913	755	77,694	398	1,615	54,257	683
5-14	695	6,952	662	11,430	411	741	190,483	355
15-24	2,118	4,727	2,205	67,363	5,652	811	196,748	866
25-44	2,179	5,507	2,337	30,791	3,998	2,914	234,848	949
45-64	2,187	4,505	2,603	138,946	3,394	7,182	139,839	1,093
65+	3,076	7,263	4,260	72,358	3,804	1,021	33,584	1,484

* Discounted at 6 percent

** Includes Near Drownings

Potential Savings from Injury Prevention 129

Case of injury	Case of intervention	Intervention	Effect (% reduction)	Table 2B (Cont.) Percent Unavoidable*	Severity Distribution	Case of Injuries	Case of Intervention
Need updated figures	Need updated figures	Population growth and bridge ends (Geddes and et al. 1977)	55% total of such crashes	Unknown	Unknown	Unknown	Varies by type
Unknown	Unknown	Tricycle endorsement program (Geddes et al. 1977)	15% total of such crashes	Unknown	Unknown	Unknown	Varies by type
Unknown	Unknown	Concrete median barrier (Geddes et al. 1977)	85-90% total of crashes	Unknown	Derivable from NASS	Unknown	Need updated figures
Unknown	Unknown	Widen bridges (Geddes et al. 1977)	87% total of such crashes	Unknown	Unknown	Unknown	Varies by type
Unknown	Unknown	Engine curve (Geddes et al. 1977)	16% total of such crashes	Unknown	Unknown	Unknown	Need updated figures
Unknown	Unknown	Channel left turns (Geddes et al. 1977)	43% total of such crashes	Unknown	Unknown	Unknown	Need updated figures
Need updated figures per pole	Need updated figures per pole	Leading frequency (Geddes et al. 1977)	59% total of such crashes	Unknown	Derivable from NASS	Unknown	Need updated figures
Need updated figures per pole	Need updated figures per pole	Flashing lights and guns at mid-high-way crossings (Geddes et al. 1982)	60-80% total of such crashes	Unknown	Unknown	Unknown	Unknown
Need updated figures per pole	Need updated figures per pole	Vertical signs to delineate on rural roads (Geddes et al. 1982)	57% total of appropriate sites	Unknown	Unknown	Unknown	Unknown
Need updated figures per pole	Need updated figures per pole	Over-ey urban signs (Geddes et al. 1982)	10-60% production injuries	Unknown	Unknown	Unknown	Unknown

* Percent of population for which interventions have not been implemented

for DWI in the states without it would save \$342-\$906 million, but the unknown cost of administration and keeping prisoners would substantially offset those savings. Mandatory belt use in the states without it would save \$700-\$1,858 million, less the cost of enforcement and administration.

The lack of data on administrative and enforcement costs, as well as arguments over the effectiveness of laws such as gun control laws, also impedes savings analysis. More than half the suicides and homicides in

Varies by type
Varies by type
Varies by type
Varies by type

the United States are committed with firearms. Controlling for age, income, religion, region, and occupational status, laws that require a license or waiting period for purchase of a firearm are associated with a reduction in suicides of 3 per 100,000 population (Medoff and Magaddino, 1983).

Such laws have generally been found more effective than laws that prohibit carrying concealed weapons, presumably because they are more enforceable (Lester and Murrell, 1982). Another study estimated that if New Jersey's law had been applied in all states in the 1960s, some 4,200-6,400 fewer deaths would have occurred annually from suicide, homicide, and unintentional firearm injuries (Geisel, Roll, and Wettick, 1969). The New Jersey law included licensure of dealers and purchasers; delay between purchase and acquisition; maintenance of records of sales; restrictions on sales to felons, drug addicts, alcoholics, mentally ill persons, and minors; and restrictions on carrying handguns in motor vehicles or as concealed weapons. The results of that study have been questioned because the correlation was reduced when controls for region of the country were introduced in the analysis (Magaddino and Medoff, 1984).

Recent research compared assaults and homicides in Seattle and Vancouver, the latter with stricter rules regarding gun ownership. Gun ownership is not allowed for 'self-protection' in Vancouver but is allowed in Seattle. The two cities, 140 miles apart, have similar weather, unemployment, education, household income, and burglary and robbery rates. Although aggravated assaults and homicide rates, excluding those in which guns were involved, were similar in the two cities, the firearm assault rate in Seattle was 7.7 times that in Vancouver and the firearm homicide rate was 5.1 times higher (Sloan, Kellerman, Reay, et al., 1988).

Since the lack of uniformly strict state laws regarding gun licensure and waiting periods allows for interstate transportation of guns by unqualified owners from less to more strict states, it is likely that a uniform policy would have more effect than has thus far been demonstrated by comparing the experience of states with different laws.

Research on the effect of allowing drivers to turn right on red at signalized intersections indicates an overall 57 percent increase in pedestrian collisions in states where the law allowed right turns compared to states with no change in the law during the same period. Studies of all intersection crashes attribute only about 1 percent to right-turn-on-red (Hagenauer, Upchurch, Warren, and Rosenbaum, 1982), but the studies include dubious assumptions regarding the validity of police reports on the color of lights at the time of the crashes before the officer arrived. If the right-turn-on-red laws were repealed, the number of intersections where the signs would have to be changed and the cost of such changes is unknown.

Comparison of a county with a requirement is associated with a 67 percent reduction in housefires. About 67 percent of the 1982 (U.S. Fire Administration) smoke-detector legislation. Fatal falls of children from buildings were reduced 90 percent by programs promoting the use of such barriers. The cost of such barriers is unknown.

Motor Vehicle Environment

The length of the yellow light interval at signalized intersections is associated with crash rates, the degree of delay. Stein, Shapiro, and Tarnoff (1982) found a 90 percent reduction in crash rates in before-after studies (Hagenauer et al., 1982). The length of the yellow light interval at signalized intersections without light is associated with crash rates that would be reduced 90 percent if an all-red interval after a green light had been associated with red light. The distribution of the timing of crashes is not known, nor is there any information on the effect of such changes.

Use of flashing lights at signalized intersections is associated with a 51 percent reduction in deaths at intersections. This study found a 51 percent reduction in deaths at intersections. This is a controlled research and a savings potential of the order of 50 percent.

Comparison of injury rates in England suggests that a 50 percent reduction in fatalities could be achieved by changes in energy exchanges from the kinematics of the event. The use of materials, such as energy absorbing materials, of several large American cars, and at least some vehicles as well as changes needed in U.S. vehicle design. The cost of such changes is sufficient detail for savings.

Firearm Injury Data

Firearms are the second leading cause of injury death in the United States. In the past, firearm injuries were considered the sole responsibility of the police, with no role allocated to public health departments. Although the National Crime Survey collects information on firearms involved in crimes, no existing source provides the necessary information on all firearm deaths: homicide, suicide, and unintentional death. The Fatal Accident Reporting System (FARS) data base, administered by the NHTSA, provides an excellent model of such a system. The FARS collects information on fatal motor vehicle crashes categorized by the characteristics of the accident, the vehicle/driver, and the persons involved. The FARS uses some or all of the following data sources: police, hospital, medical examiner/coroner, and EMS reports; state vehicle registration, driver licensing, and highway department files; and vital statistics documents and death certificates (U.S. National Highway Traffic Safety Administration, 1988a). A system on firearm fatalities, comparable to FARS, would become a primary resource for documenting the firearm problem, and for designing prevention strategies.

RECOMMENDATION: *Require that firearm injuries, in addition to being reportable to the police, be reportable to health departments. Place greater emphasis on coding the type of firearm on the death certificate. Develop a national fatal firearm injury reporting system, comparable to FARS, with sufficient data for documenting the firearm problem and designing prevention strategies.*

Treatment and Rehabilitation

Medical care provided to injured persons places a financial strain on the health care system. To relieve the enormous economic burden of disability on the society and on individuals and families, treatment and rehabilitation research and program development are essential.

Trauma Care

Communications systems are needed for medical management at the site of injury and for rapid delivery of the patient to the hospital for prompt medical care. When a severely injured person arrives at the hospital or trauma center, an experienced team of specialists with necessary back-up facilities, such as a blood bank, is required to avoid unnecessary morbidity, mortality, and residual disability. Since the 1970s, trauma care has become increasingly specialized. Guidelines for

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210 Cost of Injury in the United States

Table C-4

Firearms: Number and Rate of Injured Persons by Sex, Age, and Class of Injury, 1985

Age and Sex	Total		Fatalities**		Hospitalized		Nonhospitalized	
	Number (thousands)	Rate per 100,000 Persons	Number	Rate per 100,000 Persons	Number	Rate per 100,000 Persons	Number (thousands)	Rate per 100,000 Persons
Total	268 *	112.9	31,856	13.3	65,129	27.5	171 *	72.1
0-4	0 *	1.7	104	0.6	199 *	1.1	0 *	0.0
5-14	24 *	71.6	590	1.7	2,684 *	7.9	21 *	61.9
15-24	60 *	158.6	6,879	17.7	28,420	73.3	25 *	64.5
25-44	164 *	225.1	13,140	18.0	26,018	35.7	125 *	171.4
45-64	12 *	27.7	6,398	14.3	6,007	13.5	0 *	0.0
65-74	4 *	20.9	2,547	15.0	1,010 *	5.9	0 *	0.0
75+	3 *	23.0	1,898	16.5	749 *	6.5	0 *	0.0
Male	216 *	188.5	26,366	23.0	56,718	49.5	133 *	116.0
0-4	0 *	1.4	61	0.7	71 *	0.8	0 *	0
5-14	20 *	113.1	464	2.7	2,186 *	12.6	17 *	97.9
15-24	52 *	271.9	5,894	30.6	25,466	132.2	21 *	109.1
25-44	129 *	353.7	10,891	30.2	22,672	63.3	95 *	265.2
45-64	10 *	67.6	5,217	24.4	4,970	23.2	0 *	0
65-74	3 *	40.9	2,202	29.5	862 *	11.5	0 *	0
75+	2 *	54.1	1,677	41.8	500 *	12.3	0 *	0
Female	52 *	42.1	5,190	4.2	8,411	6.9	38 *	31.0
0-4	0 *	1.9	43	0.5	128 *	1.5	0 *	0
5-14	5 *	27.9	126	0.8	498 *	3	4 *	24.2
15-24	8 *	40.7	985	5	2,964 *	15.2	4 *	20.5
25-44	36 *	96.1	2,309	6.2	3,366 *	9	30 *	80.9
45-64	2 *	9.6	1,181	5	1,077 *	4.6	0 *	0
65-74	0 *	5.2	348	3.6	148 *	1.6	0 *	0
75+	0 *	6.0	291	2.7	249 *	2.3	0 *	0

Poisonings: Number

Age and Sex	Total	
	Number (thousands)	Rate per 100,000 Persons
Total	1,702	718.2
0-4	330	1,894.3
5-14	264 *	784.9
15-24	137 *	153.2
25-44	547	749.9
45-64	256 *	570.1
65-74	100 *	585.2
75+	58 *	901.2
Male	688	600.8
0-4	157 *	1,706.9
5-14	130 *	747.4
15-24	41 *	212.9
25-44	220 *	612.7
45-64	91 *	426.5
65-74	43 *	573.2
75+	7 *	162.5
Female	1,014	828.3
0-4	182 *	2,089.9
5-14	136 *	824.2
15-24	96 *	491.5
25-44	327 *	882.4
45-64	168 *	701.2
65-74	57 *	594.6
75+	51 *	685.5

* Figure has low statistical reliability or precision (relative standard error exceeds 30 percent)
 ** Excludes 1,030 deaths occurring in later years due to injuries incurred in 1985

* Figure has low statistical r

CENTER TO PREVENT HANDGUN VIOLENCE

FAX COVER SHEET

DATE: 10-4

TOTAL PAGES (including this sheet): 21

SENT TO (fax number): 456-7028

PLEASE DELIVER TO: Bruce Reed

ORGANIZATION: _____

From:

Richard Aborn

Jane Ryan

NOTES/COMMENTS:

Bruce,
Here is NJ + NC. Remember, both states
have relatively good gun control laws
(permit-to-purchase) but are flooded by
guns from states w/ weak laws -
Also remember - M. Jordan's father was
shot in NC -

Mitchell

Son gets 60 years for ambushing parents

SOMERVILLE, N.J. — A 22-year-old man convicted of murdering his adoptive parents with shotgun shells police said were inscribed with the words "Mom" and "Dad" was sentenced Thursday to 60 years in prison without parole. Matthew Heikkila argued with Superior Court Judge Michael Imbriani, who lectured him as he delivered the sentence. Richard and Dawn Heikkila "wanted you to cease acting like a spoiled child, to stop mooching off of their hard-earned money and to start standing on your own two feet as an adult," the judge said. "You showed your appreciation by murdering them." Heikkila ambushed his adoptive parents as they returned to their Bernards Township home Jan. 29, 1991. Defense lawyers claimed Heikkila suffered from "adopted child syndrome."

Richard Imbriani

2-27-93

Houston Chronicle
June 1993

Clerk linked to gunman in court killing

Reuters News Service

NEWARK, N.J. — A clerk in the Essex County Courthouse was charged Friday with smuggling in the handgun used to kill a city detective outside a courtroom minutes before he was to testify in a drug case.

Essex County prosecutors said Tinesha James, a clerk in the probation department, smuggled a .357-caliber Magnum pistol past metal detectors to Al Damanay Kamau,



James

who is being held in the shooting of Detective John Sczyrek.

Kamau, 25, identified Thursday as Eddie Lee Oliver Philson, was captured outside the courthouse. He was

charged with shooting Sczyrek once in the head and wounding a courtroom attendant while shooting his way out of the courthouse.

The Newark prosecutor's office said Sczyrek died instantly as he was about to take the stand.

James, 22, will be formally charged with murder and weapon offenses, said Essex County prosecutor Clifford Minor.

He said more arrests are expected.

Minor said James switched jackets with Kamau outside the courthouse with the pistol inside it. By using the employees' entrance, she did not have to pass through metal detectors, Minor said.

Sheriff's Officer Ralph Rizzolo, 24, shot while trying to help Sczyrek, was listed in critical condition Friday after surgery at University Hospital.

Kamau was attempting to disrupt the drug trial of his cousins, Daryl Hill and Charles Oliver, investigators said.

Minor identified James as Oliver's girlfriend and Kamau as the "enforcer of a small drug operation that extended to North Carolina."

Philo. Inquirer 2/2/93

S. Jersey student held after guns are found

By Jayne Feld
INQUIRER CORRESPONDENT

An 18-year-old Monroe Township high school senior is being held in Gloucester County jail after he was caught carrying two loaded handguns and a pager at school, authorities said.

Franz K. Szawronski of New Brooklyn Road in Williamstown was charged with possession of handguns in an educational institution and possession of a paging device by a student, said Monroe Township Detective Lt. Michael Schwartz.

Szawronski was sent to the county jail when he failed to post \$10,000 cash bail after his arrest Friday.

Williamstown High principal James Greczek found a .357 magnum revolver and a Walther P-38 semiautomatic handgun in Szawronski's book bag Friday morning. A student had told school administrators that Szawronski was carrying the guns, Schwartz said.

Police found the beeper when they arrested Szawronski, Schwartz added.

Assistant Superintendent Vince Tarantino said Szawronski has been automatically suspended for 10 days.

"At this point, that's the maximum we can give him until the board meets," Tarantino said yesterday. "The board can vote to extend the suspension based on the superintendent's recommendations."

Robert LaPorta, superintendent of schools, could not be reached for comment. Police and other school officials are calling the arrest an isolated incident.

Said Schwartz: "This is the first time in the 21 years of my career that I'm aware of a situation like this happening. We've taken things like homemade clubs and pen knives, but never anything as serious as this. I imagine it's a common thing in the city, but we don't really deal with this on our end."

James Agnesino, the school board president, said the board would address the issue at its meeting tonight.

"I don't think this one incident indicates that we have to take drastic (security) measures," Agnesino said yesterday. "We will definitely be looking into it thoroughly to try to ascertain why this happened."

The origin of the guns is unknown, Schwartz said, though police suspect they were stolen.

NJ

6-4-93

AROUND THE NATION

Detective Drug Witness Fatally Shot at Court

NEWARK, N.J.—John Sczyrek, a plainclothes detective waiting to testify against two men in a drug trial, was gunned down in a courthouse hallway yesterday, and the defendants' cousin was arrested.

Sczyrek, 30, was shot in the head after being approached by Eddie Lee Oliver Philson outside a courtroom at Essex County Courthouse, authorities said.

A sheriff's officer who heard the gunfire rushed from a nearby courtroom and was shot and wounded in the chest. The gunman fired twice more as he fled, throwing a .357-caliber Magnum in bushes near the courthouse.

Philson was arrested nearby and charged with murder and attempted murder, prosecutor Clifford Minor said. Philson allegedly told acquaintances last weekend that he planned to kill Sczyrek and Serena Perretti, the Superior Court judge in his cousins' case, Minor said.

N.J. trooper wounded; 3 arrested

EAST GREENWICH (AP) — A 25-year-old state trooper was shot five times and critically injured yesterday along the New Jersey Turnpike, apparently by three Maryland men he had pulled over, state police said.

The trooper, Anthony V. DiSalvatore, was in critical but stable condition after surgery at Cooper Medical Center in Camden, a hospital operator said.

Shortly after the 4:40 p.m. shooting, three men were taken into custody and were being held at the state police barracks in Moorestown, said Col. Clinton L. Pagano, state police superintendent. He said two of the men drove off in the trooper's car, leaving DiSalvatore bleeding by the side of the road in this Gloucester County community.

None of the three had been charged by last night, Pagano said.

Dr. Anthony Mure, a surgeon at the trauma unit at Cooper Medical Center, said "his life is in danger, but the prognosis is he will survive."

Soon after the shooting, police captured one man, Daniel Rogers of Annapolis, Md., who had run from the scene of the shooting, Pagano said.

Two others, Daniel Roger's nephew Stanley Rogers, 18, and James Arrington, also of Annapolis, drove off in the trooper's cruiser, ran through a turnpike exit toll barrier in East Greenwich and abandoned the car, Pagano said. The two then commandeered a pickup truck at gunpoint and drove eastward on Route 323 in Gloucester County.

Pagano said a toll collector alerted state police and the two were captured shortly after the pickup rammed another vehicle in Gloucester County's Franklin Township, about 10 miles away. The township is about five miles southeast of Philadelphia.

Pagano said DiSalvatore shot his 9mm semiautomatic handgun at the suspects but did not hit anyone.

DiSalvatore, a resident of Atco in Camden County, has been on the force since 1987, according to state police Capt. Thomas Gallagher.

The doctor said the trooper had been shot once in the upper chest and once in the abdomen. He said doctors had controlled the bleeding but that the trooper's colon and liver had been pierced.

Pagano said DiSalvatore was found unconscious by a motorist and an off-duty Nassau County, N.Y., police sergeant.

Pagano said Stanley Rogers was wanted on a outstanding warrant in Annapolis on attempted murder charges. He said all three men moved to the Maryland capital a year ago and were suspected for running a cocaine distribution ring. Police suspect the group may have been

Cooper - Daily 8-23-94

Asbury Park
8-18-

Victim's gun was powerful weapon

Police say it's no sports pistol

By W.L. HAACKER
Press Coastal Monmouth Bureau

NEPTUNE — The MAC-11 9mm semiautomatic pistol is one of the weapons favored by "paramilitary-types" and members of the nation's underworld — particularly drug dealers — because it can "fill a room with death," according to law enforcement officials.

Felton Hill, 27, Ocean Grove, was fatally shot by police yesterday as he attempted to enter a car with two 20-year-old Ocean County women inside. Hill was holding such a weapon when he was killed.

The investigation on how Hill obtained a MAC-11 or why he needed it is ongoing, and law enforcement officials would not comment on the case.

The weapon is a pistol stuffed with a magazine containing up to 32 rounds. An earlier version was manufactured during the Vietnam War. It was used by the Green Berets and was known as the "Ingram Mini-MAC," named after its inventor Gordon B. Ingram, according to a weapons text. It is now manufactured by the Florida-based Cobray company, officials said.

The reason the weapon is favored by crime figures is that it is small, inexpensive (costing about \$175), can be fitted with a silencer and remain easily concealed, and can be modified to fire fully automatic, authorities said. The main selling point, however, is its firepower — capable of firing 1,300 rounds per minute, said Lawrence A.

"It has very limited target shooting and hunting applications," said one law enforcement official, who asked not to be identified. "Its only purpose is it is capable of filling a room with death."

Woryer, who is a weapons expert and supervises the bureau's seven southern counties of New Jersey, agreed the MAC-11 is not found among sport shooters but is "predominantly favored by the criminal element."

In almost all cases the bureau had come across the weapon, Woryer said, it was converted to fully-automatic use.

Anthony J. Mellet Jr., an assistant Monmouth County prosecutor, said it was unknown yesterday whether Hill's MAC-11 was so modified. The weapon has been sent to state police for ballistics testing and to see if it was modified to fire fully automatic.

Margaret Moore, assistant special agent-in-charge of the Alcohol, Tobacco and Firearms Philadelphia District office, said because of New Jersey's tough gun control laws, the weapon Hill had probably was obtained in Florida where it is manufactured and where Florida laws make it relatively easy to purchase such a weapon.

Woryer noted that New Jersey's gun control law served as the model for the federal Gun Control Act of 1968. He said a modified weapon is rarely found in crime in New Jersey because of the state's staunch gun control laws, but it is more prevalent in crimes committed in Florida.

Glen Meyer, investigator with the Monmouth County prosecutor's office, said finding such a weapon was the "exception rather than the rule" in cases he has investigated in Monmouth County.

"In fact," he said, "I really don't recall the last time I ran across one."

Meyer called the gun "scary-looking" but said it was favored by criminals who had watched too many Miami Vice television shows.

"A guy who is in a combat stance firing away a single shot at a time is more dangerous because he knows what he is doing compared to a guy who is blasting away from the hip with a MAC-11," he said.

worrier, supervisor for the federal Bureau of Alcohol, Tobacco and Firearms, Philadelphia.

Other law enforcement officials noted that because of its simplicity, the gun could be put together with a \$134 parts kit and a \$15 receiver, the steel frame that holds the gun together. Both can be purchased through the mail.

Semi-automatic means a pistol or rifle is only capable of firing one round with one pull of the trigger. Fully automatic means the weapon could empty its entire magazine with a single pull of the trigger.

Asbury Park

P-1

FATAL SHOOTOUT

Chase, shooting called proper

Press Coastal Monmouth-Garrett

NEPTUNE — Preliminary findings indicate police involved in yesterday's chase and fatal shooting of a township man acted in accordance with state and county guidelines on the use of deadly force and high-speed pursuit, according to an official in the Monmouth County prosecutor's office.

Assistant Prosecutor Anthony J. Mellicci Jr., director of the prosecutor's Major Crimes Unit, said the review was automatic after Felton Hill, 27, Scavron Avenue, Ocean Grove, was shot to death by police early yesterday morning.

Mellicci said it would take some time to interview the officers involved in the chase and the shooting. He said part of the investigation will include collecting and reviewing the communications tapes of all police departments, the county communication

Guidelines govern police

center and state police.

By state law, a report on the shooting and chase must be filed to the state Division of Criminal Justice.

The chase guidelines include prohibitions on shooting at a fleeing vehicle, firing of warning shots and limiting the number of cars used in a chase — all designed to prevent injuries to innocent bystanders or motorists.

Mellicci said police departments up and down the chase route — roads from Asbury Park to the Manasquan Circle back to Neptune — were in constant communication with one another, advising each other of what was happening.

As Hill approached one municipal-ity, pursuit vehicles "pedaled or fell

off," allowing another department to take up pursuit. State police were involved in parts of the chase because they have "jurisdiction throughout the state," Mellicci said.

He said the procedure was meant to minimize danger to uninvolved civilians by limiting the number of police cruisers involved in a chase.

"There were no shots fired at Mr. Hill's vehicle nor warning shots fired at any time during the chase," Mellicci said, explaining that both are prohibited by the state and county. "Nor was his car rammed — Mr. Hill stopped on his own volition."

The police departments, by listening to the radio traffic between pursuing officers, knew the route involved and had time to coordinate off interactions.

The roadblocks, he said, were designed to prevent civilian casualties, not to stop Hill. He said roadblocks are not to be used to stop a fleeing suspect under both sets of guidelines.

In the use of deadly force, Mellicci said those guidelines also appear to have been followed.

"According to both policies, the use of deadly force is allowed when an officer has a reasonable belief that he or another officer or a member of the general public would be killed," he said.

"From what I have seen, heard and read up to this moment (yesterday afternoon), the drawing and use of the weapons appears justified for their own safety and that of three civilians," he said. "No one knew what was going on inside his head at the gas station; he exited his vehicle with his weapons and tried to commandeer a car with potential hostages inside... the officers had

THE MAC-11

**It has very
limited
target shooting
and hunting
applications. Its
only purpose is it
is capable of
filling a room
with death."**

**Law enforcement
officials**

to ensure he would see the weapon.

"The fact that no one was seriously injured speaks to how the situation was handled," Mabecci said.

— **W.A. Riederer**

Sunday, July 29, 1990

The Philadelphia Inquirer

7-B

Gunmen posing as mourners shoot seven at funeral

By Herb Jackson

Associated Press

LINDEN, N.J. — Gunmen posing as flower-bearing mourners at the funeral of a New York City gang member opened fire on about 100 people at a cemetery yesterday, wounding seven, officials said.

The gunmen dropped their bouquets and began shooting as they passed the casket, police said. Some panicked mourners leaped into the grave to get out of the way.

At least seven other people were trampled in the shooting and were treated for cuts and bruises.

One 20-year-old man was flown by helicopter to University Hospital in Newark, where he was in stable condition. The injuries to the others were not life-threatening, hospital officials said.

Linden Police Capt. Raymond Beckman said the funeral in Rosedale Memorial Park in Linden was for an Asian man whom he identified only as a member of a New York City gang called Born to Kill.

About 100 people were attending the funeral when two or three gunmen opened fire around 2:30 p.m. and then fled, Beckman said.

"While the people were gathered around the gravesite, the shooters walked up calmly [with] flowers in their hands. They dropped the flowers and opened fire just randomly spraying the crowd," Beckman said.

Police said the gunmen used an automatic Uzi submachine gun and a shotgun.

A 9mm Beretta that had been fired was found nearby. Beckman said police believe it was dropped by a mourner who returned fire.

New York City police said the funeral to bury Vinh Vuv, 21, of Brooklyn, N.Y., began on Mulberry Street in Chinatown in Manhattan and was watched by police until the procession left the city.

Police Sgt. Tina Mohrmann said Vuv was shot four times in the chest early Wednesday in a drive-by shooting in Chinatown.

"Apparently Mr. Vuv was a member of the Born to Kill gang that is based in Chinatown," she said, describing him as one of the gang leaders.

Published reports last year said the Vietnamese gang had used terror tactics to break into the underworld power structure in Chinatown. Authorities last year said the gang operated out of the Canal Street area and was responsible for robberies, assaults and murders, and heroin trafficking.

One woman and five men with gunshot wounds, between the ages of 17 and 21, were taken to Elizabeth General Hospital, where they were listed in stable condition, said nursing supervisor Bobbie Fairchild. Another 22-year-old man was treated for a twisted ankle, she said.



2 Rockingham shooting deaths being probed

ROCKINGHAM — The Richmond County sheriff's office Friday was probing the slayings of two people found shot to death near Rockingham.

The bodies of Ora Lee Brewington and Donnie McDonald were found at midday outside a house off U.S. 1, about 3 miles from Rockingham.

One victim was found in a car, the other on the ground, said Sheriff R.W. Goodman. Both had been shot in the head. No weapon was found.

Goodman declined to speculate on a motive but said investigators hoped to make an arrest by today.

■ CHARLOTTE

Police try to identify woman's body

Charlotte Police are trying to identify a woman whose body was discovered by officers chasing a theft suspect.

Officers found the body of the black woman at about 8 p.m. Thursday in woods near the 3700 block of North Tryon Street. Investigators said Friday they didn't know who the woman was, how she died, or when.

Police were investigating whether the woman was one of several who had been reported missing during the past year.

■ NORTH CAROLINA

School board decries strip search

ALBEMARLE — The Albemarle City School Board voted Thursday night to reprimand a principal for her role in the strip search of several elementary school students last month.

North Albemarle Elementary Principal Ginny Owens was reprimanded for the Dec. 11 search of students in an unsuccessful attempt to find \$7 reported stolen from another student. Owens had approved the search, in which students were taken to restrooms and asked to take off their clothes.

Albemarle City Schools Supt. Bryce Cummings, who recommended the reprimand, said no further action will be taken in the case.

Girl, 11, takes pistol to school

SYLVA — An 11-year-old girl has been suspended from school in Jackson County after carrying an unloaded gun in her book bag, an incident authorities say may have stemmed from

students making derogatory remarks to her.

The fifth-grade student attends Camp Laboratory School in Cullowhee, a 500-student K-through-8th-grade school.

Davis said the gun was an older model Colt pocket .32-caliber pistol that the girl had taken from her grandparents' dresser drawer.

SUNDAY, JANUARY 3, 1993
Joseph R. Shattley, 22, committed suicide in Lexington, N.C., in November by shooting himself in the head, but the bullet passed through him and also killed a female friend who had been trying to talk him out of it.

The Houston Post/Friday, April 2, 1993/ A-9

Bystander, shooter dead after gunman opens fire in supermarket

ASSOCIATED PRESS

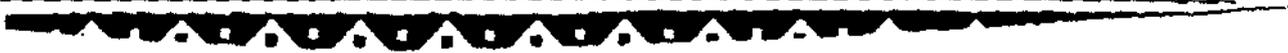
BURLINGTON, N.C. — A disgruntled supermarket employee entered the store Thursday with a gun, opened fire and killed one person and wounded another before being fatally shot, police said.

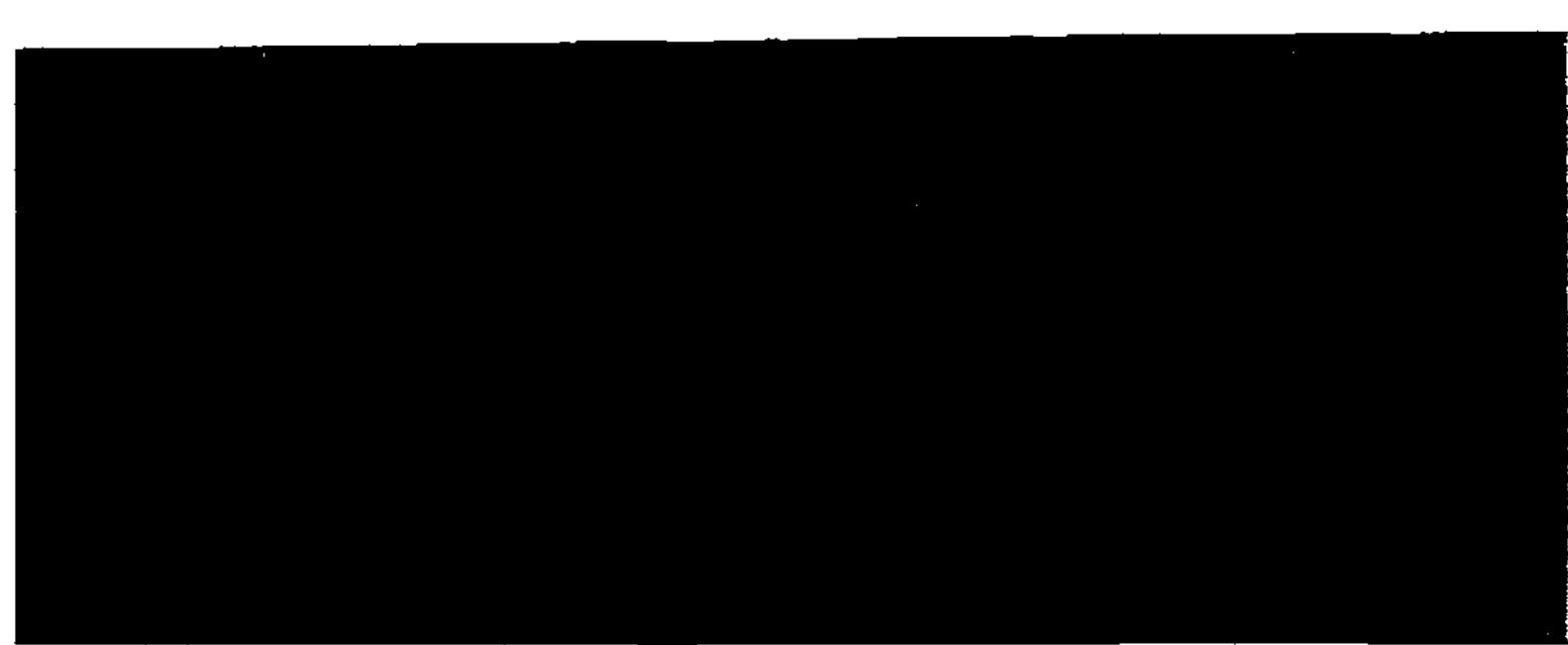
After the man went inside, he approached employees in the store office near the front of the Winn-Dixie.

"It looks like a war zone," said John Armshaw, manager of a pet store in the shopping mall where the afternoon shooting occurred.

Police were on the scene within minutes. When they emerged several minutes later, the gunman was dead.

Lt. Sparky Jones said the gunman's wounds were not self-inflicted but would not say whether police shot the man.





7

Friday
April 30, 1993

WINSTON-SALEM JOURNAL

Cousin Charged In Man's Death

■ Jerry Ridgill, who died on his 19th birthday, 'just liked to enjoy life,' his sister says.

By Christopher Quinn
JOURNAL REPORTER

Police charged a Winston-Salem man with killing his cousin yesterday on the cousin's 19th birthday.

Assistant Police Chief E.L. Yokely said that Larry Lamont Hatcher, 20, of 1007 E. 29th St. got into an argument over a woman with his cousin Jerry E. Ridgill about midnight at a grassy area in the 800 block of Willow Street.

Hatcher pulled out a pistol and began shooting, then ran to a car and drove away with another man, he said.

One man said he heard about eight shots fired in quick succession. Witnesses told police that several people ran from the scene.

One woman was crying hysterically at the scene.

"I tried to save his life," she said.

RIDGILL, WHO LIVED on Manty Street, was pronounced dead at Baptist Hospital at 12:48

...according to a hospital spokesman.
Dr. Gregory J. Davis, a forensic pathologist,
said that Ridgill died from gunshot wounds to the
head, chest and stomach.

Ridgill's sister, Felicia R. Ridgill, 20, who lives
on Willow Street, held back tears yesterday as
she described what happened.

"What happened was between them two," she
said.

"But my brother wasn't a bad person. He was
just a young man who liked to enjoy life."

The family was planning to have a cookout for
Ridgill today on his birthday, she said.

"He had a whole lot of friends coming that
cared about him," she said.

Police charged Hatcher with murder.
They were still looking for him last night.

Houston Post + 4/11/93

Urban violence hits small town

5-year-old killed on playground during men's fight over woman

By PAUL NOWELL
ASSOCIATED PRESS

MONROE, N.C. — Sam Nixon looks like a typical 5-year-old, dressed in an NBA T-shirt and Teenage Mutant Ninja Turtles sneakers.

But Sam is learning a hard lesson about life: His 5-year-old cousin was shot to death this week in a playground gun battle.

"It's too dangerous down there," Sam said of Sutton Park Recreation Center, a park where cousin Daryl McDonald was caught Monday evening in the crossfire of men fighting over a woman.

Daryl, nicknamed Shorty, was playing ball with his 7-year-old brother. Dozens of other children were climbing on playground equipment or involved

in games on the baseball field or basketball courts. Then the shooting began, and children scrambled. Daryl tried to run but was shot in the head.

He died Tuesday at a hospital.

Monroe is a far cry from the major urban centers where such violence is more commonplace. This is an agricultural and working class community of about 19,000, 30 miles southeast of Charlotte.

Monroe police arrested five men in connection with the shooting and searched for two others.

"A lot of people are really upset because their kids can't go to the playground without being shot," said police Capt. Reid Reidhelms. "But these people don't care. They came by looking for Damien Bruce and they didn't care who was in the way when they opened fire."

Bruce, 19, of Monroe, was at the park when several men shot at him from inside a van. Police said Bruce returned fire. The little boy was the only person hit.

Bruce and four other men were being held without bail on murder charges, Reidhelms said.

Tuesday, June 8, 1993 • 3A

The State Columbia, S.C.

Three murdered in N.C. grocery

Killer said he had 'nothing to lose'

The Associated Press

WINDSOR, N.C.

A man who said he was a former cop with nothing to lose herded six people to the back of a grocery store, stacked them by twos, then began shooting and stabbing.

Three people were killed and two were in critical condition after Sunday's apparent robbery at the Be-Lo grocery store in this small town in northeastern North Carolina. The sixth person was unhurt.

"He was lucky," Bertie County Sheriff Wallace Perry said Monday. "He was on the bottom. He felt the trauma when the man on top of him was shot."

Police were searching for a black male, 20 to 30, between 5 feet 10 and 6 feet tall. Perry said the assailant was using a .45-caliber pistol.

"He is a dangerous man," Perry said. "I don't feel it was aimed at anybody. He could do it again. This ranks among the worst I've seen in my 25 years in law enforcement."

The gunman told his captives "that he had nothing to lose, he was a former police officer, he had been fired," Perry said.

An all-points bulletin prompted calls from police departments around the nation with information about re-

cent firings, Perry said, adding that he has ruled out former local officers.

Police were pursuing other leads, including a report that a small white car with Maryland plates was seen speeding north on U.S. 17 Sunday between 7 p.m. and 7:15 p.m., Perry said.

Residents of the town of 2,400 were apprehensive, and some requested permits to carry concealed weapons, Perry said.

"I wasn't too happy thinking about walking into an empty building today with the money box," restaurant owner J.W. Russell said Monday.

Windsor, about 90 miles east of Raleigh, is the county seat and a center of commerce for the surrounding farm community.

Jasper Hardy Jr., 50, of Edenton was unhurt. He told the assailant he couldn't identify him, and the gunman said, "I'm going to let you live, big man," Perry said. "It suggests he was short on ammunition."

According to police, the gunman entered the store after it closed at 6 p.m. Sunday, forced the six to the rear of the store and made one tie up the others using duct tape and dog leashes taken from the store.

After the shootings, the gunman laid the six people back on the floor "face-down in a puddle of blood," the sheriff said.

Police said robbery was the apparent motive but declined to say what was taken from the store.

The Charlotte Observer

CAROLINAS

SECTION **C**
Classified

y shoots self accidentally at school

BRIEN

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High classroom on
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dgun went off acci-
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tudent to be caught
rearm onto school
g the school year.
lose call was the

latest in a spate of teen gun
tragedies. Increasingly, the victims
are young.
Many aren't old enough to drive.
On Feb. 11, a 15-year-old was
accused of shooting and killing
Travis Runyan, an 11th-grade Gar-
inger High student, during an off-
campus argument over a girl.
On Friday, Robert Pearce, 14, a
middle school student from States-
ville, was shot while apparently
playing with a loaded gun with two
other teens.
Vongsakoun told his father he
found the gun over the weekend

near his home off I-85 and N.C. 16.
The gun was wrapped in newspa-
per in some bushes, the boy said.
Vongsakoun brought the gun to
school "because he was afraid to
let me know he had it," said his
father, Vongmany Vongsakoun.
The boy was treated and re-
leased from Presbyterian Hospital.
Although the shooting caused
commotion, no one else was in-
jured.
The shooting took place at
about 8:30 a.m. in an English class,
school officials said. A teacher and
seven other students were in the

classroom at the time.
The bullet lodged in the boy's
right thigh.
Vongsakoun was described as a
good student and "fine young
man" by West Mecklenburg Assis-
tant Principal Bob Graham.
"We've never had any problem
with him," Graham said. "This was
a real surprise."
Vongsakoun was suspended
from school for 10 days and will
likely be expelled for the remain-
der of the school year under the
district's policy that prohibits fire-
arms on school campuses, school

officials say.
Vongmany Vongsakoun said he
feared the expulsion may derail his
son's chances of going to college.
His son, a ninth-grader, would
be the first in his family to attend
college.
The family moved from Laos to
the United States in 1981, and to
Charlotte in 1989.
"I'm really upset that this hap-
pened and that he found a loaded
gun in our neighborhood," said
Vongmany Vongsakoun. "I believe
everybody makes mistakes. I just
hope he has learned his lesson."

4C THE CHARLOTTE OBSERVER Sat

Student with gun suspended

Loaded revolver in girl's pocketbook

By HELEN ARTHUR
Concord Bureau

CONCORD — A 14-year-old Concord High School freshman told school officials it was by mistake that she took a loaded .38-caliber revolver to school.

The girl, summoned out of a classroom about midday Thursday, has been suspended from school for 10 days, Assistant Principal D.M. "Sonny" Pruette said Friday.

"But the matter isn't closed," Pruette said, and the student may be suspended for longer.

The incident — the second involving a gun in the Cabarrus County school system this school year — apparently hasn't caused much worry among school officials or students.

"I don't want to belittle the incident, but we're not alarmed over the number," said Dan Freeman, superintendent of Cabarrus County Schools. "But even two is too many."

"We do want to send out the word that anyone bringing dangerous weapons to school will be dealt with severely, even though they do nothing with it," Freeman said.

In neither of the incidents this year was a gun used, Freeman said, and neither student showed or wielded a gun.

School system policy allows a principal to suspend a student who is found with a dangerous weapon for 10 days, and then to recommend additional suspension time to the superintendent and school board, Freeman said. The girl and her family can appeal the suspension.

Pruette said that he and Principal Bert Thomas, acting on a tip, brought the girl out of the classroom and asked her about the gun. "She had it in her pocketbook," Pruette said. "It was fully loaded. She was very cooperative and turned it right over to us."

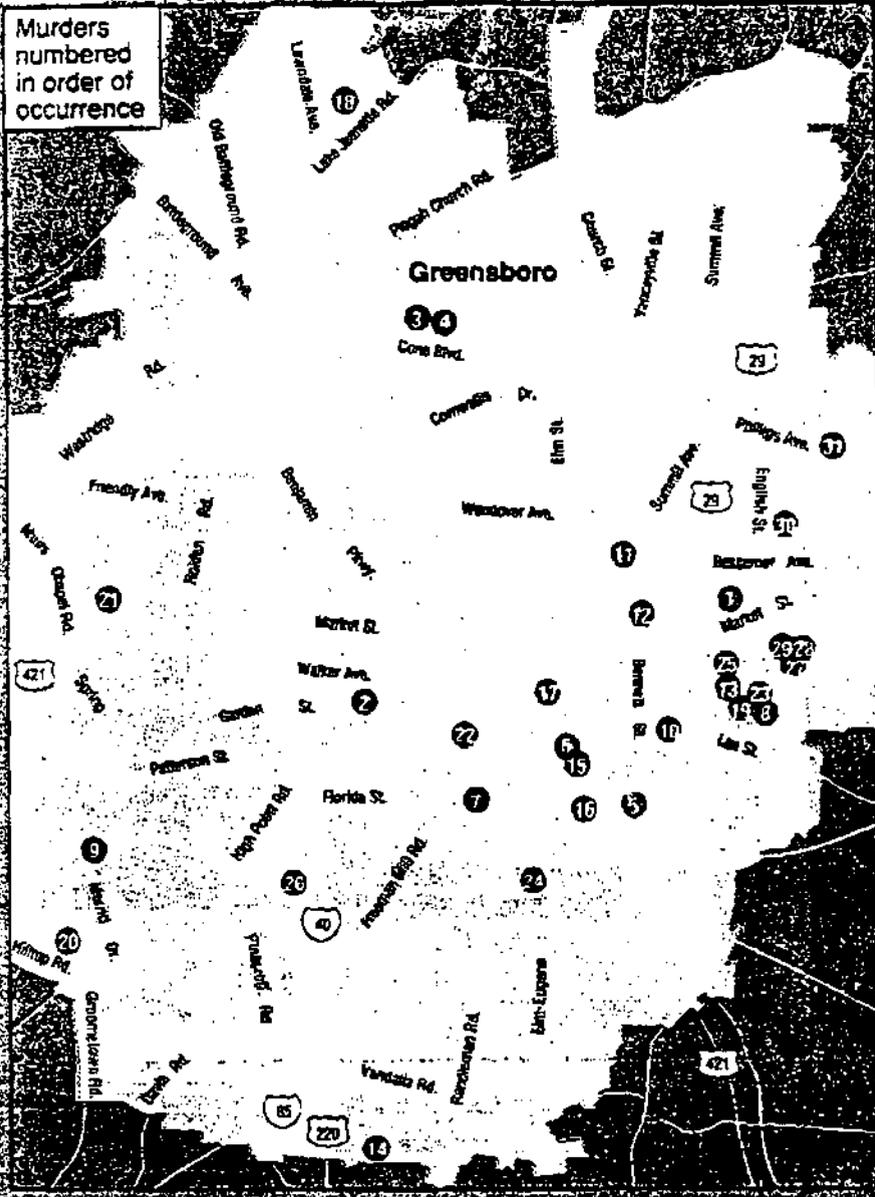
"She indicated to us that bringing it to school was by mistake," Pruette said.

The Concord Police Department was notified, and officers took the girl to headquarters, where her family was called, Pruette said.

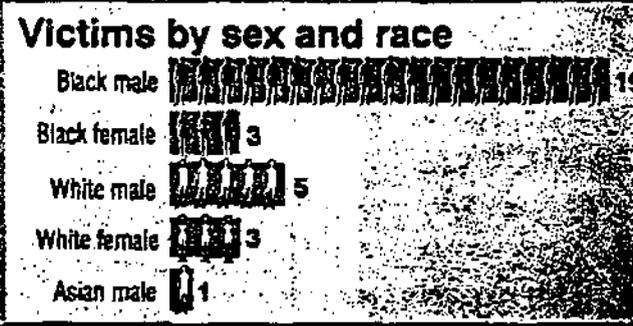
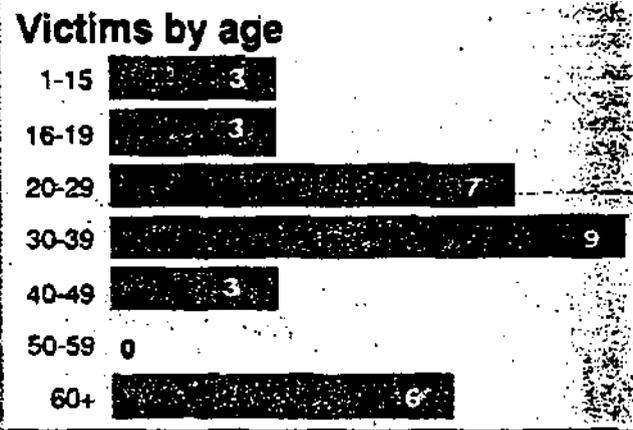
"We then informed the student body of the incident, that procedure had been followed and that the student's punishment had been suspension. Their main reaction was trying to guess who it was," Pruette said. "But our students reacted responsibly."

Pruette said he believed the incident was the first of its kind at Concord High.

Breakdown of 31 murders in Greensboro



As of Oct. 5, 1993



Taking aim against guns in schools

By **KELLY SIMMONS**
Staff Writer

When Gillespie Park School officials called Alvis Fewell and told him his son had been suspended because he was caught with a weapon, Fewell was shocked.

"I didn't even know he had a gun," Fewell said.

But Fewell was more upset that schools — experiencing a rash of weapons on campus — no longer are a safe place to send his children.

Since school opened in August, 10 area students have been expelled after being caught with

guns on school property.

School officials can't explain it.

"I don't have any theories about why it's happening," said Mike Booher, lead psychologist for the Greensboro City Schools. "Frankly, I too am surprised by the number of situations that have occurred."

But the "situation" could be worse than Booher and others realize. As many as one-in-five high-school-age students may carry weapons, according to a recent study.

The national Youth Risk Behavior Survey, conducted by the Cen-

ters for Disease Control in Atlanta, showed that almost 20 percent of all students in grades nine-12 said they had carried a weapon at least once during the month preceding the survey. Further, one of every five of the students carrying weapons said they had carried a gun, the CDC reported.

John Eberhart, Greensboro schools superintendent, offered several reasons students may be bringing guns to school.

"I definitely think the degree of violence and the use of firearms on TV has an impact on our young people," Eberhart said. "And I

just don't think it has a positive impact.

"I understand that guns can be purchased on the street for a small amount of money," he said. "A many children have access to guns that are owned by their parents."

Also, Eberhart said he believes a lot of youths are growing up in areas where drugs and violence are common. Some students, he said, may feel as Fewell's son Alvin said he does: that they need a weapon to protect themselves.

"I think there's a small percent

■ More about GUNS. I

More guns show up at school

Continued from page 1B

thin air."

He said a very small percentage of the weapons are taken to school for protection. Only a couple were loaded, and only one was involved in a dispute between students, he said.

School officials say problems in society are spilling over into the school system. Officials also cite movies and television shows that glamorize violence and weapons.

"Most of the time it's not something that's done viciously," said Samuel Greene, assistant

principal at Millbrook High. "The kids just happen to bring it to school and start showing it to someone."

Mr. Greene said the latest incident at Millbrook High involved "just a normal ninth grader" who is a "pretty good student."

"He brought it in to satisfy a dare," Mr. Greene said. "I assumed it belonged to the family. He brought it from home."

"It's a status thing, trying to look big in a big system."

Steve Stone, assistant principal at East Wake High, concurs.

"It's unfortunate and it's scary," he said. "It's like adults would buy a sports car or a big house. It tends to be glorified in the movies."

Some say that it's part of a nationwide trend and that the numbers should come as no surprise. According to an anonymous survey conducted by the Centers for Disease Control in 1990, one in five high school students — and

nearly one in three boys — sometimes carries a gun, a knife or some other weapon.

Although the study did not ask about weapons on school property, 20 percent of the students said they had carried a weapon at least once in the preceding month for protection, and 43 percent said they had been armed four or more times in the previous month.

School officials say they plan to meet with law enforcement authorities and talk to parents, many of whom own the weapons, to see what they can do about the problem.

"We take very swift action," Dr. Wentz said. "Kids are arrested and there are some very strict consequences. We just can't allow it."

In many cases, police are called in and a petition is filed with juvenile authorities. And in some cases, the student is suspended or expelled for the rest of the school year.

Raleigh, NC
NEWS & OBSERVER
Raleigh-Durham Met Area

Wednesday OCT 23, 1991 D 141,800

PAGE

More weapons turning up in Wake schools

by PAMELA BABCOCK
staff writer

It's show-and-tell with a new twist: School officials say an alarming number of students are bringing guns and weapons to Wake County schools.

They may be doing it for a gag or to show off for their friends. But school officials aren't laughing.

In the past week, a loaded

revolver, a pistol and a large survival knife have been confiscated from students at Wake schools. Just days earlier, East Wake Middle School Principal Harry L. Stanfield resigned after a parent said he drew a gun on her children on campus.

Since the start of the school year, 35 weapons have been confiscated from students in elementary through high schools, Superintendent Robert E. Wentz said.

Of those, 15 were real or fake

guns, including pistols, revolvers, pellet and BB guns. Authorities also seized pocket knives and firecrackers.

"The majority are not loaded guns," Dr. Wentz said. "I think only a couple of those guns actually had some bullets in a clip."

The latest report came Monday when Raleigh police were called to Millbrook High in North Raleigh. Students reported that a 14-year-old had displayed a .38-caliber pistol from his book bag in

a lunchroom on Friday.

Later Monday, police seized a hunting knife from a 13-year-old at East Millbrook Middle School in the Mini City area after the boy took the knife out in a bathroom, said police Lt. John Knox.

On Thursday, a Sanderson High student came to school toting a loaded .38-caliber revolver in his hook bag and wearing a shoulder holster. The boy told school officials he found the gun under a tree.

Dr. Wentz said school officials haven't kept records on the number of weapons confiscated previous years. But he said administrators are worried by what they see as an escalating problem.

"All the feedback from principals at schools is that there is an increase, and they are concerned about it," Dr. Wentz said. "Clearly these weapons, whether they're knives or guns, don't come out

See MORE GUNS, page 2B

Editorials

Young targets

■ There is a national epidemic of gunshot deaths among teenagers. And it's not just people "up to no good" who are dying.

The recent Observer headline told the horrifying story:
Teens die at record rate as result of guns.

A government study, the story said, found that in 1990, gunshots killed 4,173 Americans age 15-19 — about 11 a day. That's an increase of 67% over 1985. Only vehicle accidents take more lives in this age group. The same is true of youngsters age 10-14.

The death rate from gunshots for young blacks is even more alarming. For black males age 15-19 it's now 105 deaths per 100,000, up from 37 per 100,000 in 1985. Among white males that age, the rate doubled in that period, from five to almost 10 deaths per 100,000.

There's no single explanation. Some of the reasons are obvious to anyone who follows news reports of the carnage in our cities. Easy accessibility of guns. Drug traffic. Glorification of violence in the media. The breakdown of the family. The culture of violence that grips some parts of the community.

Paul Blackman, research coordinator for the National Rifle Association, looked at the numbers and said, "There may have been a tiny increase in the number of innocents killed, but for the most part the dramatic rise over the past five years has been among persons who are up to no good who are killed by other persons who are up to no good."

Perhaps. But three recent killings stick in our minds.

■ **Travis Runyan, 17.** He was shot to death here Feb. 11. Josh Gibson, 15, was charged with his murder. Travis Runyan, an artist and skilled auto mechanic who loved tinkering with his yellow pickup truck, was an 11th-grader at Garinger High School. Josh Gibson, a church-league basketball player and former honor-roll student, was in the 10th grade at Garinger. The shooting apparently stemmed from an argument over a girl.

"This is kids with guns settling their disputes with violence rather than slugging it out like they used to," said Investigator David Graham of the Mecklenburg County Police Department.

■ **Latoya Wells, 14.** She was the step-daughter of Tyon Caldwell. After years of living in foster homes and a stretch in prison, Mr. Caldwell had put his life together. He was to receive a degree in history from UNC



Ortega/Gaines/Staff

Cedric Blackwell, a seventh-grader at J.T. Williams Middle School, with his poem.

The Hunter

*People today just goin' insane;
 they all got murder on the brain.
 Can't mind your own business walkin'
 down the street,
 Without someone crazy lookin' at me.*

*I could ask this question: "I wonder if
 in the heart of every man lies
 the soul of a hunter."
 Kill one man and you think you're good,
 'cause you think you're a so-called hood.*

*I prefer life over death, but it's up
 to my hunter.
 No more smiles, just a frown,
 this is another attempt to keep a fellow
 brother down. All this in the past
 of a hunter.*

*He's just here to take my soul.
 You can forget all of that gun
 comm' thanks to THE HUNTER*

Charlotte in May. But in mid-March, he took seven people hostage in his estranged wife's house in Lowell, in Gaston County. After a nine-hour siege he shot Latoya Wells to death, and then himself.

■ **Jarmel Denard Morton, 15.** Latoya Wells had been a student at J.T. Williams Middle School in Charlotte. The same week she was killed, another J.T. Williams student died of a gunshot wound: Jarmel Morton. He was killed in a drive-by shooting in the late afternoon on White Plains Road in north Charlotte. Friends say the shot was intended for another teenager standing nearby.

After Jarmel Morton's death, teacher Syndie Fleener asked her seventh-grade communications class at J.T. Williams to write about guns. Cedric Blackwell, 14, a friend of Jarmel Morton, wrote this poem:

There's no single cure for the epidemic of gun violence in American society. The remedy must involve the education of our young to find peaceful ways of resolving disputes. It must involve stepped-up policing of violent areas, and serious penalties for criminals who use guns. It must include efforts to reduce the torrents of violence that flow from TV and movie screens. And it must involve a national effort to end the mad and deadly proliferation of guns.

Yes, people kill. But they are more likely to kill if a powerful, compact killing tool is at hand. No killing tool is more popular, more exciting, more deadly and simpler to use than a gun.

Paul Blackman, meet Cedric Blackwell. He can teach you something.

10A THE CHARLOTTE OBSERVER Friday, February 5, 1993 ••••

The Charlotte Observer

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For the record: Gov. Jim Hunt

School violence victimizes all

■ From Gov. Jim Hunt's remarks Wednesday announcing a task force on school violence.

We must build a brighter future for our youngsters, and we must keep them safe. We must keep our children safe in our streets, and safe in our schools.

Every week, news reports tell another tragic story of school violence, and another tragic story of a child in danger. Just yesterday, a 17-year-old was sentenced

to life in prison for murdering a young girl as she sat in a Randolph County classroom last year.

Last Monday, a star football player was shot in the corridors of a Richmond County high school. On Thursday, students were assaulted and robbed in the schoolyard of Sanderson High School, and a Raleigh police officer was wounded after a subsequent shoot-out.

Just as frightening are the reports of guns, knives and other weapons in the schools. In this school year alone, more than 100 Mecklenburg County students



Hunt

Our public schools cannot thrive surrounded by violence.

have been caught bringing weapons into school.

As governor — and as a parent and grandparent — I say enough is enough.

Our children cannot learn surrounded by violence. Our teachers cannot teach in classrooms surrounded by violence. Our public schools cannot thrive surrounded by violence. And our state cannot realize its potential in an environment of violence. In short, school violence victimizes all of us.

And we must all band together to fight it. All of us — elected officials, law enforcement officers, educators, parents, religious and community leaders — must join hands to stem the tide of school violence. It is our responsibility to make our schools safe. . . .

No state agency is now devoting its efforts and resources to fighting school violence. Today, that's changing.

We must develop a comprehensive approach to preventing violence in our classrooms and

we must put the resources of state government squarely behind this effort.

I've asked my new secretary of crime control, Thurman Hampton, to make school violence his No. 1 priority. I've asked him to identify federal and state money in his department to target school violence, and to make school violence a fundamental part of the crime prevention plan he's drawing up. . . .

I'm looking to North Carolina's leading law enforcement officers and our top education officials to bring their unique perspectives and expertise to this critical task.

It's my hope that this task force will conduct hearings across North Carolina in the next 60 days — in places like Rockingham, Durham, Charlotte, Greensboro and Raleigh.

We must hear from local law enforcement officials, parents, students, teachers, school administrators, judges, legislators and others involved in the fight against school violence.

We must find out what local school systems are doing to fight violence in their classrooms. We must find out what works, and what doesn't.

We must develop a statewide approach to prevent school violence, and to make our classrooms safe again.

✓ *xxx for Law Enf
Comm.*

■ **NORTH CAROLINA**

2 are shot with AK47

Two men were injured with an AK47 when a fight broke out early Saturday morning at the Styx club near Wingate.

Union County sheriff's deputies arrested Lawrence Lamont Sanders, 27, of 1811 Walkup Ave. in Monroe, and charged him with assault with a deadly weapon with intent to kill both men. Sanders is in the Union County Jail under \$100,000 bond.

Hoyle Allen, 24, of 404 Turner St. in Monroe, who was shot in the head, was taken

to Carolinas Medical Center in Charlotte. He was in critical condition late Saturday.

William Eugene Webb, 19, of 312A Windsor St. in Monroe, was taken to Union Memorial Hospital in Monroe. He was in critical condition late Saturday.

File
Guns

While the Brooks-Biden crime bill only includes those gun provisions that were included in last year's bill -- Brady and enhanced criminal penalties -- we have drafted two gun-related executive orders (actually, presidential memoranda) for you to sign when the crime bill is introduced. These gun orders are not overly ambitious. One closes a loophole and the other directs the Treasury Department to make some basic -- but long overdue -- reforms.

Specifically, these orders would do the following:

Assault Pistols -- In 1968, ATF developed criteria to ban the importation of small, cheap handguns ("Saturday Night Specials") that did not meet the sporting purposes test. And, in 1989, ATF developed another set of criteria to ban the importation of semiautomatic "assault rifles" not meeting the sporting purposes test. But assault pistols are handguns and, thus, not required to meet the importation criteria for rifles, which they would not necessarily pass, but the criteria for handguns, which they easily pass.

The draft Executive Order/Presidential Memorandum would suspend the importation of assault pistols and close the current loophole by directing ATF to reassess the appropriateness of importation of these weapons under the sporting purposes test.

It is important to note, however, that the number of assault pistols imported into this country is relatively small. Taking this action will provide Presidential leadership on this issue, but will not solve the problem by itself because it does not affect the more popular, domestically-produced assault pistols. That would require legislation.

Gun Dealer Licensing: There are approximately 284,000 gun dealers licensed by ATF. One estimate puts the number of new applications at approximately 60,000 a year. A gun dealer's license essentially waives certain legal restrictions on the buying and selling of guns -- such as federal laws restricting interstate gun transactions -- that would normally apply.

We have a draft Executive Order/Presidential Memorandum that generally calls for tougher enforcement of compliance requirements under present law -- such as by improving background checks on prospective dealers, requiring dealers to obtain more reliable identification from purchasers, and scrutinizing multiple handgun sales reports.

As previously stated, these reforms are long overdue. There seems to be consensus for further improvements -- such as increasing the \$10 fee for federal firearms licenses -- but these would require legislation. Still, the system could be further improved by amending the legislation.

Signing these orders will allow you to move the gun control agenda beyond the Brady Bill and to identify two other issues of importance that have been overshadowed by Brady. You can then turn to Congress and say, "I've done what I can under existing law to address

these problems, so pass an assault weapons ban and federal firearms licensing reform that will let me do more."

As for the Attorney General's memorandum recommending that you support the Metzenbaum assault weapons ban, we think you should carefully consider all of your options, substantive as well as political, before doing so. Here are our thoughts on the various proposals to ban assault weapons:

1. Senator Metzenbaum's Bill

Senator Metzenbaum's legislation is the most stringent of all the proposed bans. It prohibits the importation, domestic manufacture and future transfer of more than twenty types of assault weapons -- and, more importantly, it gives the Secretary of the Treasury the authority to add more assault weapons to the list of banned weapons. No one would question your commitment to a ban on assault weapons if you supported the Metzenbaum bill.

Chairman Brooks has outright rejected the inclusion of an assault weapons ban in a Joint House-Senate crime bill, and Justice has known this for some time. Both you and the Attorney General would have to approach Chairman Brooks in order for an assault weapons ban to be included at this late point.

Senator Biden has also expressed concern about supporting the Metzenbaum bill, but for very different reasons. Senator Biden has committed to Senator DeConcini as a matter of principle. When Sarah Brady and the police groups were searching for a prominent Senator to sponsor the first assault weapons bill, Senator DeConcini -- whose NRA rating was an "A" at the time -- introduced an assault weapons ban for them. Now Senator DeConcini faces a tough re-election bid, and Chairman Biden and the police groups have made a conscious decision to stick by his legislation.

2. Senator DeConcini's Bill

DeConcini's legislation bans the nine most popular assault weapons on the market. It also gives the Secretary of the Treasury the authority to recommend to Congress additions or deletions to the list of banned weapons, but requires a separate act of Congress before any such additions or deletions could be made.

Gun manufacturers could easily circumvent this ban, however, and the Treasury Secretary would be dependent on Congress to update the list of banned weapons. We have little faith that Congress will be willing to enact subsequent legislation on assault weapons.

But if you want to try and pass an assault weapons ban as part of the crime bill or any soon thereafter, DeConcini's bill -- having passed the Senate once before by a one-vote margin -- is the only assault weapons ban that stands any chance of passing.

During the previous congress, Representative Schumer introduced an assault weapons ban similar to Senator Metzenbaum's. The ban was stripped from the crime bill by a more

than 70-vote margin -- the day after the Killeen, Texas shootings -- winning over only one pro-gun member of Congress, the representative from Killeen, Texas. This year, hoping to gain more support for an assault weapons ban, Representative Schumer introduced DeConcini's version of the bill.

3. Develop Your Own Legislation

If you chose not to introduce an assault weapons ban in the Biden-Brooks crime bill, you can announce that you are tasking the Attorney General and Secretary Bentsen to develop a broader gun control package that includes assault weapons and federal firearms licenses. You could also ask the Attorney General and Secretary Bentsen to develop recommendations on how to deal with two new gun-related issues that need to be addressed -- prohibiting a new class of armor piercing bullets and addressing the recent influx of surplus military weapons into the country.

Guns

JULY ,1993

MEMORANDUM FOR THE SECRETARY OF THE DEPARTMENT OF THE TREASURY

SUBJECT: IMPORTATION OF ASSAULT PISTOLS

A category of pistols commonly referred to as assault pistols has increasingly become the weapon of choice for drug dealers, street gang members, and other violent criminals. These pistols, generally characterized by their bulky military-style appearance and large magazine capacity, include domestically manufactured TEC-9's and MAC-10's as well as imported models like the Uzi pistol and the H&K MP-86. Their popularity appears to stem from their intimidating appearance and their considerable firepower.

These weapons have been used to harm and terrorize more Americans, particularly our children, in recent years. As a result, it is no longer possible to stand by and witness the deadly proliferation of these weapons without acting to protect our communities.

Although addressing the domestic production of these weapons requires a change in the statute, which I support, existing law already bans the importation of firearms unless they are determined to be particularly suitable for or readily adaptable for sporting purposes. I am informed that shortly after enactment of the Gun Control Act of 1968, the Treasury Department adopted a factoring system to determine whether handguns were importable pursuant to this standard. The system entails the examination of the firearm against a set of criteria with points being awarded for various features. A minimum score is required before importation is approved. The criteria and weighted point system were designed to address the crime gun of the day, the cheap, easily concealable "Saturday Night Special." Under this 25-year old system, higher caliber, easily concealable handguns score few points and are banned from importation. However, assault-type pistols -- the new crime gun of the day -- because of their large size, weight and caliber, easily score the necessary points to qualify for importation even though none of these pistols appear to have any legitimate sporting purpose. Accordingly, it is time to reassess how the present regulatory approach can be made more effective in achieving the legislative directive to preclude importation of firearms that are not particularly suitable for or readily adaptable for sporting purposes.

I hereby direct you to take the necessary steps to reexamine the current importation factoring system to determine whether the system should be modified to ensure that all non-sporting handguns are properly denied importation. You have advised me that the Bureau of Alcohol, Tobacco and Firearms (ATF) will issue a notice of proposed rulemaking within the near future that will propose changes to the factoring system to address the assault pistol problem.

Nothing herein shall be construed to require actions contrary to applicable provisions of law. You are hereby authorized and directed to publish this memorandum in the Federal Register.

WILLIAM J. CLINTON

JULY ,1993

MEMORANDUM FOR THE SECRETARY OF THE DEPARTMENT OF THE TREASURY

SUBJECT: GUN DEALER LICENSING

A major problem facing the nation today is the ease with which criminals, the mentally deranged, and even children can acquire firearms. The gruesome consequences of this ready availability of guns is found in the senseless violence occurring throughout the country with numbing regularity. While there is not one solution to the plague of gun-related violence, there is more than sufficient evidence indicating that a major part of the problem involves the present system of gun dealer licensing which encourages a flourishing criminal market in guns.

The Gun Control Act of 1968 established a licensing system for persons engaged in businesses of manufacturing, importing, and dealing in firearms. These licensees are allowed to ship firearms in interstate commerce among themselves, and are required to abide by State laws and local ordinances in their sale of firearms to non-licensees. They are also prohibited from selling firearms to felons, certain other classes of persons, and generally to out of state persons. This Act also established a comprehensive recordkeeping system, and authorized the Secretary to conduct inspections to ensure compliance with the Act. The statutory qualifications for a licensee are that the applicant is at least 21 years of age, is not a felon or other person prohibited from possessing firearms, has not willfully violated the Gun Control Act, and has premises from which he intends to conduct business. The license fee for a dealer's license is only \$10 a year.

The minimal qualification standards of the statute, coupled with policies of neglect and opposition to legitimate regulatory efforts by past Administrations, leave us with a situation where in some ways we have made it easier to get a license to sell guns than it is to get and keep a driver's license. Today there are in excess of 287,000 Federal firearms licensees, and a great number of these persons probably should not be licensed. The Bureau of Alcohol, Tobacco and Firearms (ATF) estimates that only about 30 percent of these are bona fide storefront gun dealers. ATF estimates that probably 40 percent of the licensees conduct no business at all, and are simply persons who use the license to obtain the benefits of trading interstate and buying guns at wholesale. The remaining 30 percent represent a group of licensees that engage in a limited level of business, typically out of private residences. While the Federal statute creates no minimum level of business activity to qualify for a license, many of the licensees in this category operate in violation of State and local licensing, taxing, and other business-related laws. Since the overall purpose of the Gun Control Act was to assist State and local gun control efforts, at the very least we need to coordinate the Federal licensing process with the appropriate State and local agencies.

This Administration is committed to doing more to prevent this criminal market in illegal guns from continuing to flourish. Since all new firearms used in crime have at some point passed through the legitimate distribution system, Federal firearms licenses represent the first line of defense in our efforts to keep guns out of the hands of criminals.

Accordingly, you have informed me that you will direct the Department of Treasury and ATF to take whatever steps are necessary, to the extent permitted by law, to ensure compliance with present licensing requirements, such as:

- (a) improving the thoroughness and effectiveness of background checks in screening dealer license applicants;
- (b) revising the application process to require the applicant to supply all information relevant to establishing qualification for a license, and to require more reliable forms of identification of the applicant, such as fingerprinting, to assist in identifying an applicant's criminal or other disqualifying history;
- (c) making the "premises" requirement of the statute more meaningful by increasing field checks and the use of other procedures to verify compliance;
- (d) increasing the scrutiny of licensees' multiple handgun sales reports and providing automated access to multiple sales report information by serial number for firearms trace purposes;
- (e) requiring dealers to obtain more reliable identification from purchasers;
- (f) reviewing sanctioning policies to determine the feasibility and desirability of adding the option of license suspension for certain violations;
- (g) expanding the use of cooperative agreements with State and local law enforcement agencies to address licensing and trafficking problems;
- (h) expanding ATF's capabilities to effectively utilize the firearms transaction records of out-of-business licensees for tracing purposes through the use of automation and other technology.

Acting pursuant to your statutory authority, you shall make such determinations, issue orders, regulations, rulings, appropriate to achieve the objectives stated in this memorandum.

I further direct that you initiate these actions as soon as possible and to report your progress implementing these and other measures consistent with the foregoing to me within 90 days and annually thereafter.

All executive agencies shall, to the extent permitted by law cooperate with and assist you in carrying out the objectives of this memorandum. You shall consult with the Attorney General, the Director of the Office of National Drug Control Policy, and other Executive agencies necessary to coordinate and implement the objective of this memorandum. To the maximum extent possible, the Attorney General, through the Office of Justice Programs, Bureau of Justice Assistance, will expand projects relating to licensing and trafficking in firearms. Nothing in this memorandum shall be construed to require actions contrary to applicable provisions of the law. You are hereby authorized and directed to publish this memorandum in the Federal Register.

WILLIAM J. CLINTON