

Child access prevention laws spare gun deaths in children

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U.S. states with laws regulating the storage of firearms in households with minors had a 13 percent reduction in firearm fatalities in children under 15 compared to states with no such regulations, finds a study from Boston Children's Hospital. States with the most restrictive laws had the greatest reduction: 59 percent reduction as compared to states with no laws. Results of this analysis, spanning 26 years, were published in a paper on March 2, 2020 in *JAMA Pediatrics*.

Child access prevention (CAP) laws are on the books in half of U.S. states. They are meant to protect [children](#) from accessing firearms by holding a parent or guardian responsible for the actions or potential actions a child takes with a [firearm](#).

There are many types of CAP laws ranging from simple recklessness laws to at least three levels of negligence laws. In this analysis, the researchers ranked the laws from least to most restrictive based upon the obligations imposed on the gun owner/parent:

- Recklessness laws criminalize providing firearms to children.

- The least restrictive negligence "Child Uses" laws, holds the parent responsible if a child accesses and uses an improperly stored firearm.
- The second most stringent negligence law, "Child Accesses" law, applies to cases where a child accesses an improperly stored firearm but does not use it.
- The third, and most stringent negligence law or "Child Could Access" law, applies if a child could potentially access an improperly-stored firearm.

With all four categories of laws, the gun owner, parent, or guardian is subject to legal consequences should a child be provided with, use, gain access, or even possibly access a firearm.

4,000 pediatric deaths could have been prevented

The researchers reviewed 13,967 deaths from firearms in children ages 0 to 14 from 1991-2017 after most CAP laws were enacted. Researchers then paired that information with the type of CAP law in place in each U.S. state during that time.

"Looking at all these laws, the negligence laws seem to have the best effect," says senior investigator Eric Fleegler, MD, MPH, a pediatric emergency physician and health services researcher at Boston Children's Hospital. "And as the negligence laws get more stringent in terms of holding a gun owner legally responsible for a child actually accessing a gun, or even potentially accessing a gun, the [death rates](#) in children decrease."

The authors estimate that 4,000 deaths—or 29 percent of all pediatric firearm deaths in children between ages 0 and 14—could have been prevented if all 50 states had passed the strongest type of negligence laws during the time period covering the analysis. "The message is clear," he

adds, "Had all of the states had some types of negligence law we would have expected thousands of children not to have died."

Nearly 30 years of firearm fatality history

The first CAP law was passed in Florida in 1989. Over the next decade, most of the CAP laws that are on the books were enacted, mostly in the early 1990s. Currently, 25 states have CAP laws, including nine with recklessness laws, the lowest level of legislation.

In 2013, Dr. Fleegler and colleagues published a paper in *JAMA Internal Medicine* showing that states with the highest number of firearm laws have the lowest rate of firearm fatalities overall and for suicides and homicides individually.

In this study, they wanted to dig deeper into the role CAP laws have on reducing firearm fatalities in the vulnerable pediatric population. They reviewed a national database of CAP laws, the State Firearm Laws Database, an online resource of all firearm-related laws by state and by year. They also assessed whether the pediatric deaths in the study time period were a result of homicide, suicide, or were unintentional.

Recklessness laws did not reduce pediatric firearm fatality rates.

However, the most stringent "Child Could Access" laws were associated with a 29% reduction in all-intent firearm deaths and a 59% reduction in unintentional firearm deaths.

"The reduction in firearm fatalities is greater in those states with stronger negligence laws compared with states with weaker laws," says first author Hooman Azad, a second-year medical student at Northwestern University. "While it does not absolutely mean causation, there are very strong associations between the type of CAP law and the number of firearm fatalities in children."

Largest Study to Show CAP Laws Reduce Homicides

Of 13,967 [pediatric deaths](#) from firearms during the

study period, 56 percent were homicides, 22 percent were suicides, 19 percent were unintentional, and 3 percent were due to legal intervention or unknown intent.

The authors determined that along with the overall 13 % reduction in firearm fatalities regardless of intent (homicide, suicide, unintentional), negligence-specific CAP laws reduced deaths from gun homicide by 15 percent, from firearm suicides by 12 percent, and unintentional firearm fatalities by 13 percent among children 0 to 14 years old.

Previous studies have not been able to establish a link between CAP laws and reductions in homicide, making this the first study to show a strong association. "This finding is critically important, as 56 percent of firearm-related deaths in children 0 to 14 years old were due to homicide during the study period," says Fleegler.

While this study is focused exclusively on fatalities, the authors comment that for every [fatality](#) there is somewhere on the order of 3 to 5 injuries.

"So hopefully we are not just seeing reductions in fatalities; we are seeing reductions in injury," adds Fleegler.

Safe gun storage is the guiding principle of CAP laws. Proper safe storage of a firearm includes securing the gun unloaded in a locked container with the ammunition locked separately in a different container.

"We know proper storage happens in a very small percentage of households with a firearm," says Fleegler, "but this analysis shows that the passage of negligence CAP laws has the potential to reduce firearm fatalities in children."

More information: *JAMA Pediatrics* (2020). [DOI: 10.1001/jamapediatrics.2019.6227](https://doi.org/10.1001/jamapediatrics.2019.6227)

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