**Keeping Children Safe from Gun Violence: Talking Points**

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As a {*insert district/state}* constituent, a {*medical student/pediatric resident/pediatrician}* and as a member of the American Academy of Pediatrics, I am here today to discuss our priorities for keeping children safe from gun violence. Specifically, I will discuss the need for strong gun safety legislation, gun safety research and mental health access for children and teens.

**I am here today as a pediatrician because gun violence is a public health issue that profoundly affects children.**

* Gun violence is not a new public health threat to my patients. In fact, firearm injuries are one of the top three causes of death among youth, causing twice as many deaths as cancer, five times as many as heart disease and 15 times as many as infections.
* *{Insert anecdote or personal experience on firearm safety. For example, on the topic of counseling parents about guns in the home, treating patients who have been victims of gun violence, or accidental shootings between children, adolescent suicide, etc.).*
* I will continue to work with my patients and their families to counsel them about gun safety, but strong federal policies are needed for children to be and feel safe in their homes, schools and communities.
* Please find a way forward on gun safety legislation, including: reinstating an assault weapons ban, improving background checks, strengthening anti-trafficking laws and promoting safe firearm storage.
* Research shows that strong gun policies are effective at reducing injuries, suicides and homicides by keeping guns out of the hands of those most at risk for harming themselves and others. In 2010 alone, firearms contributed to 11,569 injuries, 1,249 homicides and 720 suicides in children under age 18. There could not be a more urgent time to enact strong gun safety policies.

**In addition to stronger laws, increased federal research funding is essential to understand the causes of gun violence and the most effective prevention strategies.**

* Please renew efforts to apply science to gun safety and prioritize evidence-based research to reduce firearm injuries and deaths.
* The American Academy of Pediatrics supports the Senate Appropriation Committee’s recommendation of $18.5 million—$15 million in new funds in addition to its current level of $3.5 million—to expand the Center for Disease Control and Prevention’s (CDC) National Violent Death Reporting System from 18 states to all 50 states, DC and the territories. This expansion will provide detailed data, such as age group, race and method of injury, for examining gun violence incidents.
* In addition, the American Academy of Pediatrics supports the Senate Appropriation Committee’s recommendation to allocate $10 million for the CDC to expand gun violence research and within its National Center for Injury Prevention and Control to conduct research into the causes of and interventions for gun violence.
* While these investments are a step in the right direction, we need broad, sustained, long-term federal funding for research on the causes and prevention strategies needed to reduce gun violence in this country.

**The Newtown, Connecticut tragedy was an unfortunate reminder that exposure to gun violence harms children’s health and development, highlighting a need for children to have access to mental health services.**

* More than 60% of children and adolescents are exposed to violence each year, contributing to toxic stress and increasing the risk for developing depression and other mental health ailments throughout their lives.
* Our current health care system does not meet the needs of these children. Although 1 in 5 children in the United States suffers from a diagnosable mental health disorder, only 21% of affected children actually receive needed treatment. Mental illness is like any other disease; the earlier it is identified and treated, the better the health outcomes.
* The American Academy of Pediatrics has endorsed S. 689, the *Mental Health Awareness and Improvement Act,* a bipartisan bill that reauthorizes and strengthens mental health, child trauma and suicide prevention programs and seeks to integrate mental health and substance use disorder treatment in primary care. The bill passed with overwhelming bipartisan support in the Senate last spring but did not advance because it was tied to failed gun safety legislation. We urge the Senate to renew efforts to move this bill forward.
* To address the severe shortage of pediatric mental health care providers across the country, the American Academy of Pediatrics is seeking $5 million for the Pediatric Subspecialty Loan Repayment Program within the Health Resources and Services Administration. For the first time, the Senate Appropriations Committee recommended $5 million in its health spending bill for Fiscal Year 2014.
* According to a 2012 survey by the Children’s Hospital Association, the average wait time for families to see a developmental pediatric specialist is 14.5 weeks, 8.9 weeks for neurology, and 7.5 weeks for child and adolescent psychiatry. Children seeking access to these specialists can’t afford to wait that long for treatment; we need a strong pediatric workforce to meet their needs.
* Even in this tough fiscal environment, it is vital that Congress maintain and expand funding for federal agencies that provide early intervention, treatment and research to support children with mental illness, specifically, the Substance Abuse and Mental Health Services Administration and the National Institute of Mental Health.

Thank you for taking the time to discuss these priorities for keeping children safe from gun violence.

I look forward to working with you as you consider gun safety legislation, funding for gun safety research and mental health access for children.