THE U.S. SHOULD ACT PROACTIVELY TO PROMOTE AND PROTECT HUMAN RIGHTS BY IMPLEMENTING A SYSTEM OF LAWS WHICH WORK ADEQUATELY TO RESTRICT ACCESS TO FIREARMS TO THOSE MOST AT RISK OF ABUSING THEM AND BY TAKING EFFECTIVE STEPS TO PUT IN PLACE AND IMPLEMENT VIOLENCE OR REDUCITION MEASURES WHERE GUN VIOLENCE PERSISTS.

THE PROBLEM

Gun violence in the U.S. is a human rights crisis. The sheer volume of people killed or injured each year by gun violence is staggering. Killing an average of 109 people each day, gun violence is the second leading cause of death among children and disproportionately affects communities of color nationwide. In 2019, nearly 40,000 people died as a result of gun violence, including in over 400 mass shootings.¹ In fact, the U.S. has both the highest absolute and highest per capita rates of gun ownership in the world, with guns easily accessible by those most likely to misuse them.

Unfortunately, the U.S. has failed to implement even a basic system for the regulation of firearms, nor has the U.S. provided communities with the sustained funding they need to address gun violence in their communities both in the short and long term. Even in normal times, these programs suffer from a lack of sustained funding. But the situation is even more dire in the wake of COVID-19: local organizations are strapped for resources at a time when they are not only combatting gun violence, but also acting as first responders and conveyors of information.
and support for members of their communities.

Tackling entrenched community-wide firearm violence is a complex problem. Communities of color have been forced to endure a long and complicated history of disadvantage and marginalization in the U.S., which contributes to the disparate impact of firearm homicides. Community-level firearm violence in the U.S. disproportionately impacts communities of color, particularly young Black men. Firearm homicide was the leading cause of death for Black men and boys aged 15-34 in 2018 and the third-leading cause of death for Latino men and boys in the same age range. Urban centers are largely populated by communities whose neighborhoods frequently lack economic opportunity and access to services and where young people can feel the need to protect themselves by carrying a firearm due to the persistent and unaddressed presence of gun violence.

Patterns of persistent firearm violence in communities can result in decreased access to basic services - such as health care, housing, and education - leading to entrenched deprivation. At the same time, firearm violence also causes a range of health problems throughout the affected community. Victims of firearm violence and their families often lack access to adequate psychological and physical care and proper follow up to address these issues, which the government should be providing. This could range from long-term medical and financial support for those with physical and psychological disabilities caused by firearm violence, to the provision of counseling for those traumatized by the effects of firearm violence on themselves, their friends, family and wider community.

THE HUMAN RIGHTS ARGUMENT

Persistent gun violence in the United States is denying people their civil and political rights including their right to live, the right to security of person, and the right to be free from discrimination. The Committee on the Elimination of All Forms of Racial Discrimination highlighted the issue of gun violence in their reports on U.S. human rights compliance. They remain concerned at the increasing numbers of gun-related deaths and injuries in the U.S. and the disparate impact on racial and ethnic minorities. Both committees noted that the U.S. government’s failure to curb gun violence constitutes a violation of the rights to life and to non-discrimination under international law. Gun violence also undermines the enjoyment of economic, social and cultural rights, including the right to health and the right to education.

The full enjoyment of all human rights requires a holistic approach which looks not just at individual violations but at patterns of violations embedded in specific socio-economic realities. The U.S. has a duty to ensure that it does not discriminate on any of the grounds protected by international law and that it takes measures to remedy the legacy of discrimination and ensure that rights are enjoyed equally by everyone. This includes actively prioritizing marginalized communities in order to remove obstacles to their realizing the full spectrum of rights.

Thus, the failure to establish a comprehensive, meaningful and working system of firearm regulations is a breach of the U.S.’ obligations under international human rights law. The consequences of this breach are both obvious and catastrophic, but they are not irreversible.

THE SOLUTION

Communities require increased support for gun violence intervention and prevention programs, focused on interrupting cycles of violence, and increased funding for direct services including mentorship to individuals at high risk of engaging in gun violence. These types of cost-effective programs have proven to be highly effective at reducing gun violence and saving lives. Further, taking these critical steps to reduce and prevent
firearm homicides is not only good for our communities, it will also decrease the economic burden on our health care and criminal justice systems, quickly paying dividends for taxpayers and communities alike. With sustained investment into these programs, combined with a national comprehensive strategy aimed at reducing gun violence, particularly in communities of color, the U.S. can make inroads to reducing gun violence in all communities.

Research indicates that sustained funding for evidence-based projects, tailored for specific local contexts, and working in partnership with the affected communities, can achieve significant and long-lasting reductions in firearm violence. A number of federal and state-funded violence intervention and reduction programs, and accompanying strategies, have proven effective in decreasing gun violence in communities. That is why Amnesty International USA is calling for Congress to authorize at least $150 million in annual investment to effective violence intervention programs that provide group violence and hospital-based interventions along with evidence-based street outreach programs, all of which have all proved integral to reducing gun violence in communities. By focusing efforts on a concentrated group and engaging community members in providing direct services and mentorship to individuals at higher risk of engaging in gun violence, many cities have made significant progress to reducing violence and creating safe communities. Importantly, the design and implementation of these programs must include human rights safeguards including the right to freedom from discrimination, the right to privacy, and the right to due process.

Unfortunately, despite the significant success of these programs, both a lack of funding and political will have prevented the kind of long-term, consistent implementation these programs need to thrive. Even in cases where the models have drastically reduced gun violence, community leaders face challenges in maintaining them, sometimes leading to a devastating reversal of the program’s gains, and a return to previous higher levels of gun violence.

There are a number of Federal and state-funded evidence-based violence intervention and reduction strategies that have proven effective in decreasing gun violence. It is important to note that community advocates, street outreach workers, violence interrupters, program managers, directors and participants indicated that violence reduction initiatives are most effective when members from impacted communities, many of whom have been perpetrators and/or victims of gun violence themselves, are involved in the development and implementation of programs.
EXAMPLES OF COMMUNITY-BASED VIOLENCE INTERVENTION PROGRAMS

1. Operation Ceasefire Model: Works with community members, local officials, law enforcement and direct service providers to identify a small group of individuals most at risk of being involved in gun violence. They are invited to in-person meetings where specific benefits and direct services are offered in return for agreeing not to engage further in gun-related activity.

2. Cure Violence Model: Uses a public health framework to assess gun violence – treating gun violence like an epidemic – by focusing on the way violence is spread from person to person and interrupting cycles of violence proactively, including offering rehabilitation opportunities.

3. Hospital-Based Intervention: Based on the premise that patients admitted to the hospital for gunshot wounds – particularly those who are repeat admissions – may be at high risk of being victims or perpetrators of future gun violence and are likely to be open to modifying their behaviors. With adequate support, connection to direct services, and counseling, these patients leave the hospital with a tailored plan for alternatives to gun violence.

4. Richmond Fellowship Model: Created the Office of Neighborhood Safety, which is independent from the police department, but works collaboratively with the police in the initial phases of identifying high risk individuals for targeted outreach and support. Participants are offered the opportunity to enroll in a program known as Operation Peacemaker, which provides a comprehensive plan for connection with social services, treatment, counseling, educational and professional development training and financial incentives.

WHAT IS AIUSA ASKING CONGRESS TO DO?

Amnesty International USA believes that the U.S. has a duty to take positive action to address gun violence, especially where models exist that could reduce it while making a long term and life-changing impact on systemically disenfranchised communities.

To do this Congress should:

1. Authorize $150 million annually, for at least 10 years, to community gun violence prevention and intervention programs that have proven effective in decreasing gun violence in communities where there are persistently high levels of firearm violence.

   - This funding should include funding for competitive grant programs to cities that develop effective, prevention-oriented violence reduction initiatives focused on young people at highest risk for violence and funding for grants that support the creation or expansion of hospital-based violence reduction initiatives with a focus on young people at highest risk for violence.

2. Pass legislation which supports the funding and implementation of evidence-based violence prevention and intervention programs, including passing the Break the Cycle of Violence Act (S. 2671, H.R. 4836).
WHAT DOES THE BREAK THE CYCLE OF VIOLENCE ACT DO?

The Break the Cycle of Violence Act\(^2\) (S. 2671, H.R. 4836) would provide federal grants to communities that experience 20 or more homicides per year and have a homicide rate at least twice the national average, or communities that demonstrate a unique and compelling need for additional resources to address gun and group-related violence. Each grant awarded would be renewable over five years and funds will be commensurate with the scope of the proposal and the demonstrated need.

Specifically, the Act proposes to authorize $90 million in annual investment in effective violence intervention programs. $65 million would go each year for 10 years to a competitive grant program for to cities that develop effective, prevention-oriented violence reduction initiatives focused on young people at highest risk for violence, and $25 million each year for 10 years for grants that support the creation or expansion of Hospital-based Violence Intervention Programs (HVIPs) in hospitals that treat at least 200 patients annually for gunshot or stabbing injuries.

The grants would be used to implement the following violence reduction initiatives:

- **Hospital-based violence intervention programs (HVIP)** that provide intensive counseling, peer support, case management, mediation, and social services to patients recovering from gunshot wounds and other violent injuries. Research has shown that violently injured patients are at high risk of retaliating with violence themselves and being revictimized by violence in the near future. Evaluations of HVIPs have found that patients who received HVIP services were four times less likely to be convicted of a violent crime and roughly four times less likely to be subsequently reinjured by violence than patients who did not receive HVIP services.

- **Evidence-based street outreach programs** that treat gun violence as a communicable disease and work to interrupt its transmission among community members. These public health-centered initiatives use street outreach workers to build relationships with high-risk individuals in their communities and connect them with intensive counseling, mediation, peer support, and social services in order to reduce their risk of violence. Evaluations have found that these programs are associated with significant reductions in gun violence, with some sites reporting up to 70 percent reductions in homicides or assaults.

- **Group violence intervention strategies**, which are a form of problem-oriented policing that provides targeted social services and support to individuals at highest risk for involvement in community violence, and a process for community members to voice a clear demand for the violence to stop. This strategy also communicates that there will be swift accountability for those who continue to perpetrate violence. This approach coordinates law enforcement, service providers, and community engagement efforts to reduce violence among a small, identifiable segment of the population that is responsible for the vast majority of gun violence in most cities.

\(^2\) Information about this legislation comes from the primary authors of this legislation, Senator Cory Booker (D-NJ) and Rep. Steven Horsford (D-NV).
POSSIBLE CHALLENGES IN IMPLEMENTING GROUP VIOLENCE INTERVENTION MODELS AND RECOMMENDATIONS:

Despite the success and numerous available models for these programs, lack of funding and lack of political will have prevented the kind of long-term consistent implementation these programs need. Even in cases where the models have drastically reduced gun violence, community leaders face challenges in maintaining them, sometimes leading to a devastating reversal of the program’s gains, and a return to previous higher levels of gun violence.

It should be noted that greater research and more detailed evaluations of existing group-violence intervention models are critical in assessing potential challenges and gauging success. While the implementation of evidence-based group violence intervention models has decreased gun violence in certain cities such as Oakland, California; New Haven, Connecticut; and New York, New York, they have not always been successful. In Baltimore, Maryland, for example, the implementation of Ceasefire in 2014, proved unsuccessful in reducing gun violence. The failures were attributed to a lack of adequate resources for program participants, staff turnover and tensions between community and law enforcement officials.

By focusing efforts on a concentrated group of perpetrators and victims – engaging community members, offering support, direct services and mentorship to individuals at high risk for engaging in gun violence – several cities have provided alternatives to violence. Most importantly, they have been able to combat and reduce gun violence while simultaneously providing life-altering opportunities for individuals living in high-crime neighborhoods.

It is critical that states and localities implementing violence intervention programs do so with an eye toward reducing rates of incarceration for communities of color. Implementing evidence-based violence reduction programs in communities where there is a persistently high level of firearm violence should include active engagement and partnership with all relevant stakeholders – such as local authorities, including those providing health and education services, law enforcement, civil society, local businesses and community leaders – regular evaluation of impact, and a commitment to consistent, stable funding for firearm violence reduction/prevention.

Although widely supported, some advocates fear that data gathered through these types of programs that target individuals most at-risk of being involved with gun violence could also be used by law enforcement officials to target these individuals through data-driven policing, and for other types of law enforcement, including involvement in gangs. As such, the design and implementation of these programs must include human rights safeguards including the right to freedom from discrimination, the right to privacy and the right to due process.

CONGRESSIONAL TARGETS

We are calling for every member of Congress to support the Break the Cycle of Violence Act. In addition to this, we are focusing on members of the House and Senate Appropriations Committees, and the Judiciary Committees, which have jurisdiction over these polices and future funding levels.
ADDITIONAL READING:

- Amnesty International USA’ Presidential Candidate Briefs on Gun Violence, available at https://2020electionscovid.amnestyusa.org/


