

CONTENTS

PART I. THE STAKES

Introduction: Life After Death 3

1 Survivor Nation 13

PART II. THE EVIDENCE

2 In Darkness and Despair 41

3 Under the Skin 71

4 The Habits of Everyday Life 106

PART III. THE SOLUTIONS

5 Strengthening Our Structures 137

6 Statutes and Strategies 161

Epilogue 196

Acknowledgments 201

Notes 203

Bibliography 245

Index 277

Introduction

LIFE AFTER DEATH

In 2012 Camden was the most dangerous city in the country. Dubbed the “Murder Capital of America” by the press, the small city of seventy-five thousand in southern New Jersey was ravaged by sixty-seven homicides that year, marking an increase of 85 percent from the year before.¹ At the time, Camden’s homicide numbers eclipsed rates in some of the most violent countries in the world, like El Salvador, Colombia, and Venezuela, all beleaguered by extraordinary levels of killing precipitated by brutal drug wars and political unrest.² In July alone, thirteen people were killed in Camden, mostly as a result of infighting and shooting between rival sets from the Bloods street gang.³ Just steps from the city’s waterfront on Jasper Street, a black wall painted with sixty-seven white crosses served as a makeshift memorial to commemorate those who had been slain.⁴

Yet the crosses marked only the most visible toll of violence in the city. For every person killed in Camden that year, several more survived gunshot wounds, and many others lived on with the psychological and physiological aftershocks. Although deaths make headlines, the quieter fallout for those who remain rarely does. The consequences reverberate far beyond those struck by a bullet, reshaping the health and well-being of entire communities. In cities like Camden, gun violence is not only a criminal justice problem but also an insidious threat to public health.

As violence smoldered in the streets, an investigation into the Camden Police Department for budgetary mismanagement and officer corruption was heating

4 INTRODUCTION

up.⁵ In response to the drastic rise in homicides, entrenched corruption, and a rapidly escalating fiscal crisis, the city of Camden made the unprecedented decision to disband its 141-year-old police force and replace it with a new department run by surrounding Camden County.⁶ City leaders like Mayor Dana Redd and Police Chief Scott Thompson promised a more cost-effective and community-oriented policing approach that would reshape public safety, guided by a shift in police officer identity from “warrior to guardian.”⁷ Yet residents were skeptical. Efforts to revitalize the city had stalled for decades and many were suspicious of the promises made by a new police force with the catchy, feel-good slogan “Service Before Self.” It seemed unlikely that even a total overhaul of Camden’s police force could turn around the city after so much heartbreak.⁸ But then something remarkable happened: The violence began to abate.

The new police force emphasized de-escalation training, the use of cutting-edge technologies, and integration of data-driven policing tactics.⁹ Officer Tyrrell Bagby told *The New York Times*, “The old police mantra was make it home safely. Now we’re being taught not only should we make it home safely, but so should the victim and the suspect.”¹⁰ By 2019 the number of homicides in Camden had decreased by more than half. In 2025 Camden recorded just twelve homicides, marking its first murder-free summer in more than fifty years and the lowest overall crime levels in a generation.¹¹ Chief Gabriel Rodriquez spoke openly about working toward a year with zero homicides, an ambition that would have been dismissed as fantasy a decade prior.¹²

Camden has since become a model for reducing violence through institutional reform. Yet measuring public safety solely by declining homicide rates risks obscuring what violence leaves behind. Even as homicides fall, exposure to gun violence continues to shape health, inequality, and everyday life in ways that are largely invisible in conventional measures of public safety. This book is about how exposure to gun violence—whether by direct victimization, the injury or death of loved ones, living in places where shootings are common, or through the media—operates as a powerful and underappreciated determinant of health in Camden and throughout the United States. Such exposure degrades mental, physical, and behavioral well-being, contributing to enduring racial and socioeconomic disparities that persist long after the killings subside.

Haunted Progress

Camden’s progress is real. Fewer people are being killed, and the city is no longer defined solely by crisis. While the changes should not be minimized, public safety success is typically measured by what is easiest to count:

murders, arrests, and crime rates. These metrics fail to capture the true burden of exposure: the accumulation of trauma, chronic stress activation, physical injury, disability, financial strain, and biological wear and tear that persist for decades. They do not account for the cumulative effects of living in places where shootings have been frequent, where injury and loss have been routine, and where fear has shaped daily life for decades.

I've witnessed Camden's progress firsthand. In 2018, fresh out of grad school, I began working as an assistant professor at Rutgers University's Camden campus, conducting research while teaching courses on gun violence prevention and the criminal justice system. Some of my students had been incarcerated for years or personally exposed to violence, a reminder that the subjects we studied were not abstract for many in the room. As I spent more time in the city, I began noticing signs of change. Corporate offices, apartment complexes, community organizations, and recreational spaces sprouted across the city, like flowers breaking through the thaw of winter.

At places like Cathedral Kitchen—an emergency food provider serving more than one hundred thousand meals a year—I saw the pride and resilience of local residents. The Salvation Army Kroc Community Center in the Cramer Hill neighborhood, opened in 2014, offers state-of-the-art facilities for young people, including after school programs, basketball leagues, and a splash pad for kids to stay cool in the summer. Camden's progress hasn't been driven by policing or city planning alone, but by organizations working daily to improve people's lives. It has been a collective effort.

Despite real cause for optimism in Camden, a more complicated conversation about gun violence in the city has been obscured by triumphant newspaper headlines and glowing press releases about police reform and falling homicide rates. Camden is a city of survivors.

According to the FBI's Uniform Crime Report, which tracks detailed homicide data over time, there were about 1,280 homicides in Camden from 1990 through 2025, the majority of which were carried out with guns.¹³ The best information available suggests that for every homicide in Camden, there were roughly three to four nonfatal incidents where someone was shot but not killed. That means there has been a shooting roughly every two to three days in Camden for the last thirty-five years.

A rolling rhythm of unremarked tragedy across decades, these are not the statistics touted by the chief of police. Compared to homicides, the numbers on nonfatal shootings reflect a much more complex reality about gun violence in the city, where discussions of long-term trends and declining

6 INTRODUCTION

numbers of killings hide the fact that people in Camden are still affected by gun violence as a way of everyday life.

Over the past three decades, thousands of people in Camden have been killed, shot, or physically assaulted with a firearm. Each shooting affects many more people beyond those directly victimized, impacting family members, friends, romantic partners, and those simply living in the neighborhood where shootings occur. Gun violence also affects the owners and employees of local businesses that power the city's economy, like the legendary soul food restaurant Corinne's, or the famous cheesesteak mainstay, Donkey's Place.¹⁴ It is profoundly traumatizing to a wide expanse of people who must cope with the looming presence of injury and death. The violence shapes people's worldviews about safety and injects fear into everyday situations.

Every shooting triggers a cascade of system involvement, including the criminal justice system, hospitals, and social service providers working in Camden to support all those affected by the violence. When shots are fired, police officers respond and investigate, eventually shepherding those responsible through the churn of local courts and correctional facilities. Victims are transported for care to Camden's Level I trauma center, Cooper University Hospital. From there, critical social service providers like the Center for Family Services work to employ a team of outreach workers, hospital responders, and social workers to ensure that the victim receives the necessary care to heal and refrain from further violence.

The violence imparts an enormous emotional toll but also carries a steep financial cost brought about by the grinding machinations of these intersecting systems. These human and economic costs are unaccounted for in the morbid arithmetic that accompanies the tallying of homicides from year to year in the city. Even in a place that is much safer than it was a decade ago, an undertow of violence pulls at Camden.

Our National Failure

Camden offers a compelling case study, but its story is not unique. The shadow cast by gun violence over daily life stretches across cities and towns of every size in America. The weight of this burden is disproportionately borne by a small number of relatively poor, predominantly Black and Hispanic neighborhoods within our nation's cities.¹⁵ Yet gun violence in America is not limited to cities. In fact, rates of firearm injury and death in rural areas have been steadily increasing for years, particularly among Black youth.¹⁶ Across the country, firearm-related accidents, suicides, and mass shootings

happen every day. Most of these go unremarked, especially when nobody is killed, but all of them affect a vast range of people and systems.

Many places have not had the long-term success in bringing down violent crime that Camden has seen in the past decade. America experienced a steady rise in murders and shootings starting in 2014, which exploded during the pandemic from 2020 through 2022. True, in the years that followed, homicide has declined across much of the country, prompting claims that the United States has entered a safer era.¹⁷ But like in Camden, the focus on reduced homicides masks stubbornly unacceptable levels of gun violence around the country. In 2025 alone, at least 13,658 people were killed and more than 25,000 were injured with a gun.¹⁸ That's roughly equivalent to half of Camden's entire population being shot or killed in a single year. That year has been described as one of the safest on record, but relative progress should not be confused with resolution. Sustaining recent gains demands our continued attention.¹⁹

This book is about what shouldering the burden of gun violence means for our collective well-being, particularly among those Americans disproportionately exposed to it. It is about how we, as a society, underestimate the true extent of gun violence and its costs on our minds, bodies, and everyday habits. It is also about what we can do to make things better. America's decades-long failure to prevent gun violence represents a profound act of public health neglect.

In this book, I draw on research and data from a wide range of disciplines, including criminology, public health, medicine, sociology, and public policy, to argue that reducing gun violence is essential to improving our health as a nation and addressing the stark disparities that divide us. This is not only a moral obligation but a necessary step toward realizing our collective potential.

I detail much of my own work throughout the book, including data collected from fifteen interviews with shooting survivors in Camden. The research was conducted alongside members of a brilliant team, including Dr. Nazsa Baker, Dr. Devon Ziminski, and Dr. Jeanna Mastrocinque. The project also included two violence intervention specialists, Darnell Whye and Lesly Heredia, who worked for the local community violence intervention program, Cure4Camden. The project was a community-based participatory action effort, meaning all aspects of the research were guided by those at Cure4Camden with decades of experience in violence intervention and on-the-ground knowledge about the city.²⁰ Throughout the book, these survivors' stories illuminate the human realities behind the

8 INTRODUCTION

data, revealing how gun violence shapes lives in ways that statistics alone cannot capture.

I also discuss research based on large datasets that expand far beyond Camden's city limits. For example, I highlight nationally representative data that my colleagues and I at the New Jersey Gun Violence Research Center (GVRC) have collected from people exposed to gun violence in its many forms.²¹ I also cover our findings using data collected from more than twenty thousand neighborhoods over the course of ten years through the Survivor Cities Project to demonstrate how gun violence shapes well-being across all levels of social interaction beyond individual shootings.

This book does not just cover my own research, and it would be incomplete without the efforts of many other experts. No researcher is an island—scientific knowledge is a collective enterprise. Therefore, I also highlight studies from scholars around the world that help tell the story of how violence shapes the health of individuals and whole societies. In doing so, I hope to make clear throughout this book that scientific research to prevent gun violence matters. Just as in any other field, research is the first link in the chain of progress toward making something better. Gun violence prevention research provides a foundation for advocacy, policymaking, technological development, and ultimately, practical intervention to make people safer. Every social problem casts its own kind of darkness, and research is the light we rely on to find our way through it.

Despite what I see as the clear value of gun violence prevention research, its political history has been marked by stops, starts, and outright attacks over the past three decades. In 1993, physician and public health researcher Arthur Kellerman and colleagues published a landmark study in the *New England Journal of Medicine* that firmly concluded that firearms in the home increase the risk of homicide.²² Not long after, in 1996, Congress passed what is now known as the Dickey Amendment. Spurred by aggressive lobbying from the National Rifle Association (NRA), Congressman Jay Dickey added a provision to a 1996 spending bill declaring that public funding could not be used to fund research that promoted gun control.²³ This effectively froze federal funding for research to prevent gun violence for more than twenty years. In 2015 Dickey admitted deeply regretting his role in restricting gun violence research, saying he did not intend to stop the work in its tracks.²⁴ His remorse is cheap atonement for decades of stalled progress and preventable loss.

In 2018 Congress clarified that the Dickey Amendment does not prohibit federal funding of research on the causes of gun violence, helping to

thaw the funding freeze that had halted research for so long. A handful of dedicated researchers had weathered the storm for years without public funding, but the clarification helped to usher in a new generation of gun violence researchers, including myself.²⁵ The field of gun violence prevention research has expanded dramatically in recent years, evidenced by the formation of the Research Society for the Prevention of Firearm-Related Harms, a sharp uptick in academic publications, and increased funding from public and private organizations. Public awareness and advocacy efforts have also advanced considerably, led by the work of thousands of dedicated members within organizations like Brady, Everytown, Sandy Hook Promise, Moms Demand Action, and many others.

Yet despite the rapid growth of a gun violence prevention ecosystem in recent years, the political ghosts of the mid-1990s still linger, haunting the hard-won gains of the movement. In April 2025, while I was working on this book, the second Trump administration gutted violence and injury prevention research at the Centers for Disease Control, an effort led by Health Secretary Robert F. Kennedy.²⁶ The Department of Justice cancelled hundreds of grants worth tens of millions of dollars to support violence prevention and victim services by local governments and community organizations.²⁷ This included funding eliminated, without explanation, to expand the life-saving work of Cure4Camden.

That same week, the National Science Foundation rescinded hundreds of research grants across the country while fifteen GOP House members signed a letter calling for a full reinstatement of the federal ban on gun violence research, echoing the original Dickey Amendment and renewing threats to choke off progress.²⁸ Luckily, that letter gained little traction with lawmakers. Much of the research highlighted in this book has taken place against a backdrop of political attack by those who would rather it not exist at all. I can only hope that the tides will turn again soon.

A Roadmap

My intention with this book is to provide a scope of the true burden of gun violence. What follows is not only a reflection on how we got here, but a roadmap for where we must go next. The first chapter dives into the stakes of the problem, providing an overview of gun violence in the United States, describing how often it occurs, where it happens, and who is most affected. I argue that almost all Americans experience gun violence across a spectrum

10 INTRODUCTION

of exposures at some point in their lives, although there are substantial differences in levels of exposure across racial and socioeconomic groups. People who are exposed to gun violence can be thought of as belonging to four overlapping groups: (1) direct victims, (2) secondary survivors, (3) community witnesses, and (4) peripheral observers. I define and describe each of these groups, arguing that the constellation of exposures serves to meaningfully shape public health throughout the country.

The second, third, and fourth chapters demonstrate how gun violence across exposure groups relates to a specific health domain—mental, physical, behavioral—highlighting effects across the population overall and for the groups most impacted. These three chapters offer the core evidence for the argument that gun violence plays a major role in shaping our collective health, weaving population-level research together with the lived experiences of Camden shooting survivors. Chapter 2 argues that poor mental health is a profound consequence of gun violence exposure, rather than its primary cause, contrary to public discussions frequently held in the wake of high-profile mass shootings. Chapter 3 then shows how exposure to gun violence gets “under the skin,” impacting physical and chronic health issues that extend far beyond psychological damage through multiple pathways, including impacts to the body’s stress response system, rising inflammation, effects on the structure and function of the brain, and epigenetic changes that span generations. Chapter 4 chronicles how gun violence shapes people’s habits and behaviors like sleep, exercise, substance use, and social interactions, reformulating how they function every day.

Throughout these three chapters, I highlight how these harms exacerbate the deeply entrenched health inequalities that have plagued America for generations. A person’s zip code remains one of the clearest predictors of health and mortality in the United States. As physician and population health scientist Sandro Galea points out in his 2019 book, *Well*, the impact of where we live on our health often goes unremarked. Much like the air itself, we only notice when something disturbs it.²⁹ Our social and physical environment—the “air” we breathe both literally and figuratively—shapes every aspect of our well-being.

Yet the contribution of violence to health disparities is often left out of the conversation when it comes to considering how structural and social conditions shape health differently among population groups. Violence is wholly preventable and efforts to shrink health disparities in the country must include a significant violence reduction strategy alongside structural solutions often proposed to improve living conditions, reduce poverty, and

address the tendrils of systemic racism that reproduce harm across generations. Despite more than a century of progress in public health and civil rights, the toll of gun violence is a stark reminder that we still live fundamentally unequal lives.

The final two chapters cover solutions to the problems I've laid out. To improve public well-being and reduce health disparities, we need to significantly reduce gun violence throughout our country within the bounds of the Second and the Tenth Amendments, which respectively stipulate the right to firearm ownership and the role of individual states in our federalist system. I summarize what I see as three overlapping pathways toward comprehensive gun violence reduction with a strong evidence base through what I call the 3S Approach—a framework for improving our structures, statutes, and strategies to meaningfully decrease gun violence.

The premise of these final two chapters is that any effective effort toward gun violence reduction must be holistic. It doesn't mean that we just throw everything against the wall and see what sticks, but rather that we take careful stock of what works and then create a system for putting all the pieces together. In this spirit, the last two chapters are somewhat wonky by design, diving into the weeds of what works with the end goal of mapping out a strategy for long-term and widespread progress. This demands a multitiered and geographically diverse approach to gun violence prevention that can save lives, improve health, and provide more equitable opportunities for everyone to live well and flourish. In the end, we do not have the luxury of separating public safety and public health—they are one in the same. We must take this truth to heart and act decisively to further reduce gun violence nationwide, ensuring that our children and future generations can live safer, better lives.

Before beginning, I should clarify a few basic definitions. I use the term “gun” throughout this book unless “firearm” is necessary to make a technical distinction.³⁰ The term “gun violence” is typically used as a catch-all to describe the many types of shootings that happen every day in the United States and I employ it often. However, it is most accurate to say that there are four main types of shootings that comprise the broad phenomenon of “gun violence” in the country: group-based gun violence, domestic gun violence, mass shootings, and suicide.³¹ Each type of shooting has a distinct set of risk factors and often occurs within a unique situational context. For instance, group-based gun violence takes place predominantly in cities and most acutely affects young Black and Hispanic men, whereas suicides with a firearm are committed most commonly by older White men living in rural

12 INTRODUCTION

parts of the country.³² On the other hand, women are by far the most likely to be victims of domestic shootings, often resulting from attacks by boyfriends, husbands, or former partners.

There are two other types of shootings that I mention periodically throughout the book: unintentional shootings and police-involved shootings.³³ These too are consequential for our collective health, especially shootings of citizens by the police, which have been documented to generate expansive harms to mental health, particularly among Black Americans. Like mass shootings, these represent a small fraction of the total burden of gun violence throughout the country in terms of number of people killed or wounded. Even though these types of shootings are less common, it doesn't mean they are any less impactful to those involved, their loved ones, and the broader community. In fact, it is often the rarest types of violence like mass shootings and police killings that capture the nation's attention and garner the most ardent outcry for reform.

Finally, in this book the term "gun violence" includes interpersonal violence between two or more people with a gun as well as self-directed violence with a gun (i.e., suicide). For some, this may be a different way of thinking about the collective toll of gun violence because "violence" often refers to an act of physical force or power by one person designed to harm or kill another. But violence can be done to oneself through self-harm or the taking of one's own life and in the United States, the majority of gun deaths each year are suicides.³⁴ Gun suicide's considerable presence in the lives of many Americans means we must talk about both interpersonal and self-directed shootings when considering the broad ramifications of gun violence exposure for our collective health.³⁵

INDEX

Note: Tables and Figures are indicated by italicized page references

- Abrutyn, Seth, 33
 Abt, Thomas, 184
Abundance (Klein and Thompson), 160
 abusive partners, 25
 academic performance, 61–62
 ACPs. *See* automatic colt pistols
 acute inflammation, 85–86
 addictions, 112–13
 adult-onset diabetes, 103
 Affordable Care Act (2010), 142
 alcohol, 113, 115
 Alcohol, Tobacco, Firearms and Explosives (ATF), 156, 158–59
 Alfred P. Murrah Federal Building, 66
 allostatic load, 79–80
 Altikriti, Sultan, 80
 Americans with Disabilities Act, 143
 amygdala, 91–92
 Andujor, Dominick, 203n4
 Anestis, Mike, 52, 205n21
 antidepressants, 67, 114
 antisocial behaviors, 121–26
 Antwon (community witness), 58–59
 anxiety disorders, 131
 apoptosis (preprogrammed cell death), 84
 Arendt, Hannah, 194
 Arlene (shooting survivor), 112–13, 199
 Arms Amendment Act, 138
 Ashley, Euan, 128
 asthma, 59
 ATF. *See* Alcohol, Tobacco, Firearms and Explosives
 Australia, automatic weapons ban in, 138
 automatic colt pistols (ACPs), 111
 automatic weapons bans, 138
 Ava (shooting survivor), 56–58, 62
 Azad, Hooman, 167
 background checks, 14–15, 162
 bad decisions, 210n42
 Bagby, Tyrrell, 4
Baker v. Nelson, 143
 Bamwine, Patricia, 120
 bears, human bodies reaction to, 78–79
 Becoming a Man (Chicago), 188–89
 bedside interrupters, 187
 behavioral risk factors, 101–2
 behaviors, 106–8; cognitive therapy for, 188; coping, 112–13; erratic, 42; firearms and violent, 155; group-based, 23–24, 27–28, 32, 35, 58; obesogenic, 131; social and antisocial, 121–26; violent, 34, 155, 219n46
 Beltway sniper shootings (2002), 61
 Bernard, H. Russell, 50
Between the World and Me (Coates), 19
 Biden, Joe, 141–42, 149, 187, 198
 Biggs (shooting survivor), 47–48
 binge drinking, 113, 115
 biological aging, 85
 biological memory, 96
 biological stress, 83
 biometric devices, 169
 Bipartisan Safer Communities Act (2022), 141, 149, 162–63, 187, 238n24
 Black Americans: firearm-related injured youth of, 6; gun violence experienced by, 51–52; homicides involving, 54; insomnia symptoms experienced by, 119–20; interpersonal violence of, 28, 51–54; mental health of, 12, 27; police officers shooting, 26–27; risk factors facing, 11; structural racism involving, 16; violence characterizing, 29
 Black Lives Matter, 144
 Black men, 24, 47–48, 58–59
 Black-on-Black violence, 28, 212n62

278 INDEX

- Bleeding Out* (Abt), 184
blood pressure, 79
BMC Public Health (journal), 133
The Body Keeps the Score (van der Kolk), 92
Bondi, Pam, 142
Bonnie, Pattie, 14
Bor, Jacob, 27
Boston Marathon bombing, 69–70
Bourdain, Anthony, 204n14
boyfriend loophole, 141, 238n24
Brady Handgun Violence Prevention Act (1993), 162, 199
Braga, Anthony, 183
brain: communication system of, 93;
 decision-making by, 106, 225n1; divergent
 responses by, 92; imaging technology for,
 91; medial prefrontal cortex of, 91–92;
 neuron activity of, 90, 94; neuroplasticity
 of, 95; traumatic violence response of,
 91–93, 95, 98–99; victim-offender over-
 lap and, 94
Breivik, Anders Behring, 118
Brown, Emma, 141
budget deficit, of communities, 197
buildings, vacant, 153
bullet retention, 109–12, 226n12
Burdett, Evelis, 197
Burke, Kimberly, 80–81, 193
Buttrick, Nicholas, 114
buyback plan, 138
- Call of Duty* (computer game), 118
call-ins, by community leaders, 183
Camden, NJ, 196, 203n4; cheese steaks in,
 204n14; gun violence in, 5–6; homicide
 rates in, 209n26; as Murder Capital of
 America, 3; police force disbanded in, 4,
 203n6
CAP. *See* child-access prevention
capillary wave, 30–38, 49
cardiovascular disease, 101–2
castle doctrine, 174–75
catecholamines, 80
Cathedral Kitchen, 5
celebrity suicides, 33–34, 215n90
cellular aging, 84–85
CGIC. *See* National Crime Gun Intelligence
 Center
chain of exposure, 38
Chalfin, Aaron, 152
cheese steaks, in Camden, 204n14
Chicago School Readiness Project (CSRP),
 60
child-access prevention (CAP), 164
 children, 85; abusive partners causing harm
 to, 25; fatal shootings influencing, 67;
 firearm deaths of, 16–17, 164–65, 167;
 49th Street School massacre survived by,
 55; gun violence impacting, 60–61, 104–5;
 indiscriminate shooting at, 41; mass
 shooting involving, 56; parent's anxiety
 about safety of, 62; parent's psychological
 harm influencing, 61; preacademic skills
 of, 60; PTSD experienced by, 54–55; safe
 spaces for, 154; shootings involving, 31,
 206n33; traumatic experiences of, 93,
 99; violence and functional changes to,
 93–94, 225n73
Children Under Fire (Cox), 56, 62
Chris (violence survivor), 46
Christakis, Nicholas, 34
chromosomes, 84
chronic health problems, 81, 102–3
chronic illness, 86, 101
chronic inflammation, 86–88
chronic stress, 79–81, 92
citizen safety, 140–45
City Invincible mural, 196, 242n1
civil rights movement, 143
clearance rates, 240n54
Clinton, Bill, 141
Coates, Ta-Nehisi, 19
cognitive behavioral therapy, 188
communication system, of brain, 93
communities: budget deficit of, 197; con-
 centrated disadvantage of, 24; firearms
 in rural and urban, 35–36; gun violence
 influencing health of, 102; intervention
 strategies by, 183–84; leaders with call-ins
 for, 183; low-income, 128; marginalized,
 100; mass shootings shattering, 123;
 mental health in, 63; physical environ-
 ment improved in, 151–52; police force
 working with, 191, 197, 204n9; shootings
 in, 63; violence rates in, 128; witnesses,
 37, 58–63
community violence interventions (CVIs),
 186–90
concealed carry permits, 15, 164, 178–79,
 237n7
concentrated disadvantage, 24
constitutional amendments, 138–39
contributory misconduct, 194
Cook, Philip, 240n54
coping behaviors, of shooting survivors,
 112–13
coping mechanisms, 107–8
cortisol levels, 79–80

- countries: background checks required in, 14–15, 162; firearm homicide rates by, 17; with homicides, 16, 207n10; right to bear arms in, 139–40; U.S. violence rates compared with other, 22–23
- COVID-19 pandemic, 20, 32, 187, 197
- Cox, John Woodrow, 56–57, 62
- criminal justice system, 6, 185
- Crumbley, Ethan, 165, 237n13
- Crumbley, James, 165
- Crumbley, Jennifer, 165
- CSRP. *See* Chicago School Readiness Project
- cumulative trauma, 5
- Cure4Camden (New Jersey), 7–9, 187, 189, 198, 205n20
- CureViolence, 186
- Currie, Elliot, 29
- CVIs. *See* community violence interventions
- The Dark Knight* (film), 44
- Daruwala, Samantha, 52
- David (shooting survivor), 47
- Deadwood* (television series), 179
- deaths: apoptosis preprogrammed cell, 84; drug overdoses resulting in, 228n31; firearm injuries leading to, 30–31; by firearms, 15–16, 70, 207n10; firearms causing children's, 16–17, 164–65, 167; gunshot injuries and brush with, 73–74; motor vehicle fatalities in, 143; NCHS data on, 233n15; trauma experience from, 52; unintentional, 27; U.S. gun, 15–16, 70, 207n10
- decision-making, 106, 210n42, 225n1
- de-escalation training, 4
- Delpeche, Gregory, 240n42
- depressive disorder, 48, 64–65
- deregulation, 15
- Devries, Karen, 113
- diabetes, adult-onset, 103
- Dickey, Jay, 8
- Dickey Amendment, 8–9, 122, 173, 199
- Dickinson, Emily, 91
- dietary habits, 130–32
- disasters, types of, 64–65
- disparities, 10, 27–30, 100–101, 193
- District of Columbia v. Heller*, 15, 139
- Division of Youth and Family Services (DYFS), 72
- DNA, 28, 84, 96–99
- Doherty, Elaine Eggleston, 113
- Domenach, Edgar, 158
- domestic shootings, 11, 25
- domestic terrorism, 66
- domestic violence, 172
- dormant cells (senescent), 84
- dose-response relationship, 52
- drug abuse: addictions in, 112–13; deaths caused by overdose from, 228n31; gun violence exposure linked to, 114–16; U.S. overdoses from, 115–16; violence exposure risks of, 112–13, 227n21
- Dunbar, Robin, 50
- Dunbar's number, 50
- duration, of disaster, 65
- Dworet, Alexander, 38
- DYFS. *See* Division of Youth and Family Services
- Dykstra, Braxton, 166
- Dzau, Victor, 101
- eating disorders, 231n78
- Ecological Momentary Assessment (EMA), 131
- economic prosperity, 125–26
- El Salvador, 16
- Elijah (shooting survivor), 109–10, 199
- EMA. *See* Ecological Momentary Assessment
- Emanuel Nine massacre, 123
- Emotional Contagion* (Hatfield), 34
- emotional toll, from violence, 6
- emotions, social networks spreading of, 34–35
- Ending Unequal Treatment* (report), 101
- Engel, George, 75
- Engels, Les, 89
- Enhanced Regulatory Enforcement Policy, 159
- epidemic, of gun violence, 45
- epigenetic change, 96–99
- Equal Pay Act (1963), 144
- ERPOs. *See* extreme risk protection orders
- erratic behaviors, 42
- Esposti, Michelle Degli, 175
- eTrace software, 157–58
- Eubanks, Shala, 41, 54
- everyday behaviors, 106–7
- Everytown, 75, 199, 216n7
- exercise, 128–29
- extreme risk protection orders (ERPOs), 141, 163, 171
- Fair Labor Standards Act (1938), 143–44
- faith, in God, 124
- family members, 112, 123–24
- fatalities, motor vehicle, 143
- fear responses, 99, 127

280 INDEX

- federal funding, 8
 federal regulations, 159
 firearms: biometric devices for storage of, 169; cable locks for, 169; children's deaths from, 16–17, 164–65, 167; concealed carry permits for, 15, 164, 178–79, 237n7; countries ownership rights of, 139–40; deaths from injuries by, 30–31; in domestic violence, 172; as force multiplier, 22–23, 210n38; global circulation of, 13, 207n3; gun trafficking prevention of, 154–59; gun violence and trafficking trends of, 156–59; gun violence prevention with policies on, 164, 237n8; guns and, 11, 205n30; harmful laws concerning, 174–81; homes with, 22; homicides by intimate partner with, 25; homicides increased by homes with, 8; homicides using, 53; illegal possession of, 171–72; Indigenous people and homicides using, 23; injuries related to, 6; in-store purchases of, 14–15; international homicide rates by, 17; international ownership rates for, 14; legislation on safe storage of, 168; minimum-age requirements for, 173–74; ownership of, 14; parents storing, 168–69; personal use deregulation for, 15; population with, 13–14; prohibitions for purchasing, 170–74; public carry of, 178–79; regulations on, 161–62; in rural and urban communities, 35–36; safe storage of, 27, 164–69, 237n10; state gun laws on, 156, 172; state suicide rates from, 21; state's minimum age for purchasing, 172; suicides using, 17, 53, 206n32; Sweden and injuries from, 18; U.S. deaths by, 15–16, 70, 207n10; U.S. suicides using, 19–20; U.S. unintentional deaths by, 27; violence plus, 148; violent behavior using, 155. *See also* guns
 Firearms Act (1997), 138
 Firearms Protections Act (1986), 158
A Fistful of Dollars (film), 179
 Flynn, Sean, 119
 FMJ. *See* full metal jacket bullets
 focused deterrence policing, 182–90, 240n46
 food consumption, 129–33
 49th Street Elementary School massacre, 41–43, 54–55
 Fuentes, Samantha, 110
 full metal jacket (FMJ) bullets, 111
 Galea, Sandro, 10, 55, 59
 Gallegos, Autumn, 117
 Gang Reduction Initiative (Denver), 188
 Gardner, Meryl P., 129
 General Social Survey (GSS), 122, 229n51
 genetic diversity, 28
 genome, modifications to, 96–99
 Geronimus, Arline, 99, 101
 Gershenson, Seth, 61
 Giffords, Gabby, 110
 God, faith in, 124
 Goddard, Colin, 110
 Goethe, Johann Wolfgang, 33
 Goffman, Erving, 72
 Gomez, Stephen, 41
 Gonzalez, Anna, 41
 Grace, Noah, 123–24
 Gray, Colt, 237n13
 green spaces, 128, 153
 Greenland, 16, 208n13
 Gregory (shooting survivor), 47, 90, 104
 Grønli, Janne, 119
 group violence intervention (GVI), 185
 group-based behaviors, 23–24, 27–28, 32, 35, 58
 group-based violence, 11, 23–24, 94, 206n32
 GSS. *See* General Social Survey
 Gun Control Act (1968), 170, 238n24
 Gun Policy in America study, 163
 gun violence: bad decisions causing, 210n42; Black people experiencing, 51–52; in Camden, NJ, 5–6; capillary wave in, 31–32; children impacted by, 60–61, 104–5; chronic health problems from exposure to, 81, 102–3; citizen safety from, 140–45; community health influenced by, 102; domestic circumstances in, 11, 25; drug abuse from exposure to, 114–16; epidemic of, 45; families torn apart by, 123–24; federal funding for research on, 8; firearm policies preventing, 164, 237n8; firearm trafficking trends and, 156–59; focused deterrence policing for, 182–90; food accessibility influenced by, 133; global comparison of, 13–14; groups exposed to, 9–10; health implications of, 133–34; holistic approach to, 186; human body stressed by, 85–86; inequality in, 199; institutional structures for prevention of, 147–51, 160, 181–82, 200, 234n28; interpersonal violence in, 12, 28, 32–33, 51–54, 94; mass shootings in, 26; mental health impact of, 43–45, 64; in minority communities, 51; national network of offices preventing, 148–51,

- 160, 234n28; pain and exposure to, 88;
- physical health impacted by, 104–5;
- prevention ecosystem for, 9, 190–94; as
- public health threat, 3–4, 11, 78; public
- safety through prevention of, 148–50;
- real-life encounters of, 68–69, 219n46;
- ripple effects from exposure to, 36,
- 37–38, 76, 160, 195; shooting types in, 11;
- shooting victims impacted by, 123–24;
- sleep deprivation from, 119–20; within
- social networks, 51, 182–83; state office
- for prevention of, 185–86; stress from,
- 130–31; in Sweden, 18; 3S Approach to
- fighting, 146–47; traumatic experience of,
- 216n7; trust destroyed by, 122, 229n52;
- Tyshaun's exposure to, 57–58; in U.S.,
- 6–7, 13–38; U.S. disparities of, 27–30;
- U.S. distribution of, 23; U.S. failure to
- prevent, 7; well-being and health influ-
- enced by, 37–38, 77–78; wildfire fighting
- like fighting, 145–47
- Gun Violence Archive, 18, 26, 49, 55
- Gun Violence Research Center (GVRC), 8,
- 205n21
- gun-free zones, 164, 237n7
- guns: dealers of, 14, 159; ownership of, 34,
- 172; policies on, 163–65; safety move-
- ment for, 140–41; show loophole on,
- 162–63; trafficking prevention of, 154–59;
- U.S. culture of, 13, 138–39, 206n2
- gunshot injuries, 73–74, 81–82, 109–11
- GVI. *See* group violence intervention
- GVRC. *See* Gun Violence Research Center

- Hall, Jacob, 56–57
- Hall, Katherine S., 231n78
- Hatfield, Elaine, 34
- HAVI. *See* Health Alliance for Violence
- Intervention
- HCUP. *See* Healthcare Cost and Utilization
- Project
- health: behaviors, 107–8; chronic illness in,
- 86, 101; chronic problems of, 81, 102–3;
- disparities, 10; exercise for, 128–29; gun
- violence implications on, 133–34; gun
- violence influencing, 37–38, 77–78;
- gun violence influencing community,
- 102; heart disease and, 100; inequality,
- 100–101; infectious diseases and, 101; poor
- sleep impacting, 116–17; through public
- safety, 199; social determinants of, 108;
- social disadvantage's relationship with,
- 103; social isolation harmful to, 124–25;
- social networks related to outcomes in,
- 108; violence exposure impacting, 98,
- 104–5
- Health Alliance for Violence Intervention
- (HAVI), 191
- Healthcare Cost and Utilization Project
- (HCUP), 50, 217n13
- healthy food access, 132
- heart disease, 100
- Hebb, Donald, 95
- Hegarty, Jackie, 126
- Heinz, Justin, 101
- Henderson, Caesar, 42
- Heredia, Lesly, 7, 205n20
- highest-risk groups, 182–90
- high-pollution areas, 59
- Hill, Mary Lou, 42
- hippocampus, 91
- Hippocrates, 128
- Hippocratic oath, 174, 239n31
- Hirth, Jacqueline M., 130
- Hispanic Americans, 11, 28, 204n15
- Hobson, Megan, 74
- Holcombe, Jennifer, 124
- Holcombe, John Bryan (“JB”), 123
- Holcombe, Karla, 123
- Holcombe, Scott, 124
- Holcombe family, 123–24
- hollow point bullets, 111
- Holmes, Jason, 44
- homes, 22, 152
- homicide rates, 53; in Camden, 209n26;
- declining, 142, 233n13; of Indigenous
- people using firearms, 23; international
- firearms and, 17; racial disparities of,
- 27–28; U.S. age-adjusted, 20, 20, 209n26;
- U.S. comparison of, 15–16, 207n10
- homicides: Black Americans involved in,
- 54; clearance rates of, 240n54; countries
- with, 16, 207n10; firearms in homes
- increasing, 8; firearms used in, 53; inti-
- mate partner firearm, 25; suicide rates
- linked to, 218n24; weapons used in, 22
- hospital-based violence intervention pro-
- grams (HVIPs), 187, 191, 241n60
- House of Bone and Rain* (Iglesias), 49
- HPA axis, 93
- human beings, violence dividing, 125
- human body: allostatic load on, 79–80;
- bears and reaction of, 78–79; chronic
- stress damage to, 80–81; gun violence
- stressing, 85–86; gunshot injuries damag-
- ing, 81–82; violence changing, 83–84
- Hurricane Ike, 66
- Hurricane Katrina, 65

282 INDEX

- HVIPs. *See* hospital-based violence intervention programs
- hypervigilance, 46, 126
- “I Dream’d in a Dream” (Whitman), 196
- Iglesias, Gabino, 49
- Immigration and Nationality Act (1965), 144
- immune system, 80
- impulse control, 60
- Indigenous Americans, 20, 23, 28, 119–20
- indirect peripheral exposure, 64
- Industry Operations Investigators (IOIs), 159
- inequality, 99, 128; in gun violence, 199; health, 100–101; in violence, 28–29, 147–48
- infant well-being, 225n73
- infectious diseases, 101
- inflammation, 85–89
- infrastructure, gun violence prevention network, 147–51, 160, 181–82, 200, 234n28
- insomnia, 116–21
- institutional reform, 4–5
- institutional structures, 147–51, 160, 181–82, 200
- in-store purchases, of firearms, 14–15
- intensive therapy, 57
- interpersonal violence, 12, 28, 32–33, 51–54, 94
- interrupters, bedside, 187
- The Interrupters* (documentary), 186
- intervention strategies, by communities, 183–84
- intimate partner, homicides by, 25
- intimate partner violence (IPV), 88, 122, 211n45
- IOIs. *See* Industry Operations Investigators
- IPV. *See* intimate partner violence
- Iron Pipeline (I-95), 155–56
- Jahalal, Kerry Ann, 240n42
- Jay, Jonathan, 241n60
- Jones, Albert, 41
- Jones, Jim, 42
- Jonestown mass murder-suicide, 42
- Journal of Trauma and Acute Care Surgery*, 121
- Joyce Foundation, 157
- Kellerman, Arthur, 8
- Kelley, Devin, 123
- Kennedy, David, 183
- Kennedy, Robert F., 9
- Kenneth (community witness), 58–59
- Kessler, Ronald, 65
- Kevin (shooting survivor), 111–12
- Killworth, Peter, 50
- Kimber, Melissa, 131
- King, Martin Luther, Jr., 29, 103
- kitchen-table dealers, 14
- Klein, Ezra, 160
- Kliwer, Wendy, 118
- Langer, Ellen, 77
- Lanza, Adam, 25, 44
- LaPierre, Wayne, 141, 179
- laws and legislation: citizen safety through, 140–45; contributory misconduct removed by, 194; firearm regulations as, 161–62; firearm safe storage, 168; harmful, 174–81; may-issue, 178; red flag, 170; shoot first, 174–75; stand-your-ground, 174–81, 175; state gun, 156, 172; U.S. firearm related, 161–62; violent crimes increased by, 175–80
- Lee, Esther, 102
- Lee, Jocelyn Smith, 58–59
- Lee, Jooyoung, 48, 111, 115
- LeMee, Gabrielle LaMarr, 14
- Lepore, Stephen, 118
- Levine, Jeremy, 193
- life expectancy, 199, 243n14
- life-ending injury, 117
- little shit, violence caused by, 23–24
- loneliness, 124–25
- Lopez, Carlos, 41
- Lorincz, Susan, 239n37
- Loughner, Jared, 44
- Love, Ronnie, 42
- Loving v. Virginia* (1967), 143
- Lowe, Sarah, 55
- low-income communities, 128
- Ludwig, Jens, 94, 148
- Lynch, Karen, 38
- Lynch, Tim, 38
- Malvo, Lee Boyd, 61
- Mancik, Ashley, 240n54
- marginalized communities, 100
- Maria (single Hispanic mother), 107–8
- Marjory Stoneman Douglas High School, 110
- Martin, Trayvon, 176–77
- Mass Killing Database, 26
- mass shootings, 12; children involved in, 56; communities shattered by, 123; community witnesses to, 37, 58–63; defining, 211n51; fear of, 127; at 49th Street Elementary School, 41–43; gun safety

- movement and, 140; in gun violence, 26; mental health and, 55; mental illness involved in, 44, 216n3; on Norwegian island, 118–19; peripheral observers to, 64; secondary survivors of, 218n29; social networks torn apart by, 124; spillover effects of, 67–68; in U.S., 25–26, 55, 65–67, 219n38; well-being impacted by, 55
- Maté, Gabor, 77
- may-issue laws, 178
- Mays, Edmund, 240n42
- McLaughlin, Katie, 88
- McPhatter, Andrew, 57
- media exposure, 69–70, 219n49
- medial prefrontal cortex, 91–92
- mental health: of Black people, 12, 27; in communities, 63; disaster repercussions to, 64–65; gun violence impacting, 43–45, 64; mass shootings and, 55; of Mitchell, 42–43; negative emotions in, 36; people removed from violence and, 63–64; physical health linked with, 76–78; PTSD and, 48; shooting survivors diagnoses of, 119; shooting victims burden on, 49; sleep linked to, 120–21; suicides and, 21–22; TRC for, 192; violence influenced by, 70; violence influencing, 59, 62–63
- mental illness, 110–13, 129; depressive disorder in, 48, 64–65; mass shootings involving, 44, 216n3; neuropsychiatric disorders in, 76; proximity influencing, 65; psychotic episodes in, 52; state-level prohibitions because of, 173; suicides preceded by, 209n31; violence and, 44
- methylation, DNA, 96–99
- Metzl, Jonathan, 140
- Mexico, 140, 208n21
- Mickles, Derrell, 240n42
- microsimulation, 219n49
- Mikey (violence survivor), 46
- mind-body system, 76–78
- The Mindful Body* (Langer), 77
- minimum-age requirements, for firearms, 173–74
- minority communities, 51, 59, 83, 102–3
- Mitchell, Tyrone, 41–43
- Moms Demand Action, 199
- moods, 130–31
- Morral, Andrew, 163
- motor vehicle fatalities, 143
- Mueller, Anna, 33
- Muhammed, John Allen, 61
- Murder Capital of America (Camden, NJ), 3
- Murthy, Vivek H., 124
- Musk, Elon, 142
- National Alliance of Trauma Recovery Centers, 192
- National Center for Health Statistics (NCHS), 233n15
- National Crime Gun Intelligence Center (CGIC), 156–57
- National Firearms Agreement, in Australia, 138
- National Incident-Based Reporting System, 157–58
- National Instant Criminal Background Check System (NICS), 14
- National Integrated Ballistic Information Network (NIBIN), 157–58, 235n41
- National Longitudinal Study of Adolescent Health, 33
- National Network for Safe Communities, 185, 190, 206n32
- National Office of Violence Prevention Network, 234n28
- National Safety Council, 233n15
- National Science Foundation, 198
- NCHS. *See* National Center for Health Statistics
- NCST. *See* Newark Community Street Team
- negative emotions, 36
- neural activation, 90, 94
- neurobiology, of violence, 94
- neuroplasticity, of brain, 95
- neuropsychiatric disorders, 76
- New York State Rifle & Pistol Association v. Bruen*, 15, 139, 239n38
- New York taxi drivers, 215n90
- New Zealand, 138
- Newark Community Street Team (NCST), 127
- NIBIN. *See* National Integrated Ballistic Information Network
- NICS. *See* National Instant Criminal Background Check System
- Niko (four-time homicide survivor), 122
- nonfatal shootings, 18, 30, 74, 213n76, 220n2; clearance rates of, 240n54; shooting victims compared to, 226n12
- nonfatal violence, 17–18, 22–23, 210n38
- Norwegian island, mass shootings on, 118–19
- Nunneri, Marlys, 74
- Obama, Barack, 141
- obesogenic behaviors, 131

284 INDEX

- Occupational Safety and Health Act (1970), 144
- Office of Victims of Crime, 194
- O'Neill, Kathleen M., 121
- Operation Ceasefire, 183, 190, 240n50
- opioid use, 227n21
- Orange, Tommy, 82
- Orlando Pulse nightclub, 70
- outreach workers, 190
- ownership, of firearms, 14
- Owens, Ajike Shantrell, 239n37
- pain, 88–89, 111–12
- pain management strategies, 113
- Papachristos, Andrew, 33
- paranoid delusions, 52
- parents, 61–62, 165–66, 168–69
- Pareto, Vilfredo, 24, 182
- Pareto principle, 24, 34
- Parry, Kevin, 203n5
- Paul (shooting survivor), 115
- A Peculiar Indifference* (Currie), 29
- The Perfect Neighbor* (documentary), 239n37
- peripheral observers, 37, 63–64
- Peterson, Jillian, 26
- Phillips, David, 33
- physical environment, improving, 151–52
- physical health, 63; exercise and, 128–29; factors influencing, 75–76; gun violence impacting, 104–5; mental health linked with, 76–78; shooting survivor and, 112; shooting victim's trauma to, 48–49; violence exposure impacting, 82–83, 104–5
- physical violence, 28–29
- physiological indicators, 89
- Pilkington, Pamela, 122
- Pinckney, Clementa, 123
- Piontak, Joy Rayanne, 131
- Pitman, Alexandra, 53
- place-making efforts, 153–54
- PLOS One* (journal), 30
- police force: Camden disbanding, 4, 203n6; community outreach working with, 191, 197, 204n9; de-escalation training for, 4; focused deterrence policing by, 182–90, 240n46; new technologies used by, 157–58, 236n45; small identified groups focus of, 182
- police officers, 26–27, 180, 203n5, 240n42
- post-traumatic stress disorder (PTSD), 45; addictions and, 112–13; of Ava, 56–57; children experiencing, 54–55; depressive disorders in, 65; hypervigilance symptom of, 46; intensive therapy for, 57; media exposure linked to, 219n49; mental health and, 48; social behaviors impacted by, 121; symptoms of, 126; women with, 130, 231n78
- potential years of life lost (PYLL), 213n75
- poverty, 28, 128, 148
- Pracon, Adrian, 118
- preacademic skills, 60
- preprogrammed cell death (apoptosis), 84
- prescription medications, 115
- prevention ecosystem, 9
- The Price of Freedom* (documentary), 243n13
- procedural justice, 184
- proximity, 37, 54–58, 65
- psychiatric illness, 112–13
- psychological consequences, 110–11, 129
- psychological harm, 43, 61
- psychotic episodes, 52
- PTSD. *See* post-traumatic stress disorder
- public health: campaigns for improving, 76; COVID-19 pandemic and, 32; gun violence threat to, 3–4, 11, 78
- public housing, 152
- public safety, 4–5, 11, 140–45, 148–50, 199
- PYLL. *See* potential years of life lost
- Pynoos, Robert, 54
- race: disparities by, 100–101, 193; genetic diversity and, 28; homicide rate disparities by, 27–28; interpersonal violence and, 28, 51–54; socioeconomics and, 107–8; Two America's factor of, 29–30; violence-inducing condition of, 30
- racism, 16, 19, 28, 69, 99
- Rahimi, Zackey, 171–72
- Ramos, Salvador, 25
- RAND data, 163, 236n6
- randomized control trials (RCTs), 60
- rate, calculating, 206n2
- RCTs. *See* randomized control trials
- real-life encounters, of gun violence, 68–69, 219n46
- recency, 37
- Red Dead Redemption* (video game), 179
- red flag laws, 170
- Redd, Dana, 4, 242n1
- regulations, 15, 159, 161–62
- retribution, for violence, 24, 58
- revolutionary suicide, 42
- Rheingold, Alyssa, 114
- Rich, John, 47
- Richardson, Joseph, 47
- Rivera, Oswaldo, 203n4
- Robart, Karl, 166

- Robb Elementary School massacre, 25, 140–41
- Rodriguez, Gabriel, 44, 196
- Roe v Wade*, 144
- Romuldas, Malinauskas, 130
- Ronnie (shooting survivor), 109, 112
- Roof, Dylann, 123
- van Rooij, Sanne J. H., 93
- root causes, of violence, 147–48
- Rossin-Slater, Maya, 67, 114
- Route 91 Harvest music festival massacre, 65–66
- rural communities, firearms in, 35–36
- safe spaces, 154, 168
- safe storage, of firearms, 27, 164–69, 237n10
- Safe Streets (Baltimore), 188
- Salvation Army Kroc Community Center, 5
- Sanders, Felicia, 123
- Sanders, Tywanza, 123
- Sanderson, Maureen, 103
- Sandy Hook massacre, 25, 66–67, 126
- Sandy Hook Promise, 75
- Sapolsky, Robert, 77
- Sarah (White marketing professional), 107–8
- Savage, Brielle, 62, 193
- Schildkraut, Jaclyn, 121
- school shootings, 114
- Schorr, Kathy, 74
- Schwartz, Amy Ellen, 61
- Second Amendment, 139, 172, 181
- secondary survivors, 49–50, 52, 114, 218n29
- secondary victims, 38
- self-defense, 177
- self-directed violence, 53–54
- self-imposed boundaries, 127
- self-poisoning, 17
- senescent (dormant cells), 84
- severity, of disaster, 65
- sexism, 28
- sexually transmitted infections (STIs), 31
- Sharkey, Patrick, 60–61
- Sharpe, Tanya, 193
- Shawn (shooting survivor), 72–73, 104, 117, 199
- shell shock, 45
- Shiyu Yang, 114
- shoot first laws, 174–75
- shooting survivors: addictions of, 113; bullet retention by, 109–11, 226n12; chronic trauma suffered by, 82; coping behaviors of, 112–13; Gregory as multiple occasion, 90; life-ending injury faced by, 117; numbness detaching, 46–47; pain disorders of, 88–89; physical and psychic fallout as, 112; physical health and, 112; psychiatric diagnoses of, 119; secondary, 49–50; violence with treatment for, 192. See also *individual shooting survivor*
- shooting victims, 56–57; bullet retention by, 110–11; gun violence and impact on, 123–24; harsh realities of, 48; mental health burden to, 49; nonfatal shootings compared to, 226n12; opioid use and, 227n21; physical trauma experienced by, 48–49
- shootings, 72–73; academic performance influenced by, 61–62; Black men experiencing, 24, 58–59; capillary wave from, 36–37; chain of exposure from, 38; children influenced by fatal, 67; children involved in, 31, 206n33; in communities, 63; community witnesses to, 37; domestic, 11, 25; group-based, 27–28; healthy food access and, 132; mass, 12; nonfatal, 18, 30, 74, 213n76, 220n2, 226n12, 240n54; police officers involved in, 26–27, 240n42; school, 114; secondary victims from, 38; single social network causing, 24–25; types of, 11–12, 26, 38; U.S. annual, 50–51
- SHOT Project, 74–75, 89
- Silver, Ian, 62, 120
- Singleton, Chelsea, 133
- sleep deprivation, 116–21
- Slutkin, Gary, 186
- Smart, Rosanna, 163
- Smith, Jocelyn, 122
- Smith, Lee, 131
- Smith, Randi, 111
- social behaviors, 121
- social control, 94–95
- social disadvantages, 103
- social engagement, 106–7
- social environment, 30, 75
- social identities, 30
- social isolation, 124–26
- social networks: emotions spreading through, 34–35; friends killed and, 122; gun violence within, 51, 182–83; health outcomes related to, 108; mass shootings tearing apart, 124; of people, 50; shootings from single, 24–25; suicides within, 33–34, 215n90; violence moving through, 33–34
- Social Science & Medicine* (journal), 120
- social system, closed, 72
- socially contagious, violence as, 32–33

- socioeconomics, 101, 107–8
 Song, Zirui, 88–89, 227n21
 Soni, Aparna, 67
The Sorrows of Young Werther (Goethe), 33
 Sosuke Okada, 114
 stand-your-ground laws, 174–81, 175
 Stansfield, Richard, 62, 120
 states: firearm purchase minimum age in, 172; firearm suicide rates by, 21; gun laws in, 156, 172; for gun violence prevention, 185–86; prohibitions by, 173; stand-your-ground laws in, 175
 Stephens, Jasmin Brooks, 52
 STIs. *See* sexually transmitted infections
 stress, dietary habits influenced by, 130–32
 Structures, Statutes, and Strategies. *See* 3S Approach
 substance abuse. *See* drug abuse
 suicides: celebrity, 33–34, 215n90; of family member, 112; firearms used in, 17, 53, 206n32; in Greenland, 208n13; homicides linked to, 218n24; mental health and, 21–22; mental illness preceding, 209n31; minimum-age requirements reducing, 173; by New York taxi drivers, 215n90; rates of, 53; revolutionary, 42; secure storage preventing, 166; within social networks, 33–34, 215n90; as socially contagious, 32–33; state firearm rates of, 21; in U.S., 19–20; U.S. age-adjusted rates of, 20, 20, 209n26; by White men, 11, 20–21; White people and, 26, 37
 Supreme Court cases: *Baker v. Nelson* as, 143; *District of Columbia v. Heller* as, 15, 139; *Loving v. Virginia* as, 143; *New York State Rifle & Pistol Association v. Bruen* as, 15, 139, 239n38; *Roe v. Wade* as, 144; on Second Amendment, 181; *United States vs. Rahimi* as, 171
 Survivor Cities Project, 62–63, 103
 survivor networks, 121
 Sweden, 18, 208n21
 Swedish Trauma Registry (SweTrau), 18
 sweet foods, 130
 SweTrau. *See* Swedish Trauma Registry
 System 1 thinking, 23–24, 189, 210n42
 System 2 thinking, 210n42
 systemic oppression, 99
 target hit rate, of police officers, 180
 technologies, 91, 157–58, 236n45
 Tekin, Erdal, 61, 67
 telomeres, 84
 Tenth Amendment, 139–40
 Theall, Katherine, 83–84
 Thomas, Christopher, 81
 Thompson, Derek, 160
 Thompson, Rebecca, 69
 Thompson, Scott, 4
Thorbjørn MS (ferry), 118
 3S Approach, 146–47, 194, 199, 234n23
 Tombstone (town), 179
 Totterdell, Peter, 35
 Townville Elementary shooting, 56
 transgenerational epigenetic inheritance, 98–99
 trauma: accumulating, 69–70; Black men suffering, 47–48; brain's response to violent, 91–93, 95, 98–99; children experiencing, 93, 99; community witnesses experiencing, 58–63; cumulative, 5; deaths causing, 52; gun violence and experience of, 216n7; shooting survivors suffering chronic, 82; shooting victim with, 48–49; violence and brain experiencing, 92–93
 Trauma Recovery Centers (TRCs), 192
 Trump, Donald, 188, 194; Enhanced Regulatory Enforcement Policy repealed by, 159; violence prevention research canceled by, 9, 198; White House Office of Gun Violence Prevention ended by, 142, 149
 trust, 122, 229n52
 Two Americas, 29–30, 103
 Tyshaun (shooting survivor), 56–58, 62
Unforgiving Places (Ludwig), 148
 United States (U.S.): age-adjusted homicide and suicide rates in, 20, 20, 209n26; annual shootings in, 50–51; childhood firearm deaths in, 16–17, 164–65, 167; constitutional amendments in, 138–39; countries violence rates compared with, 22–23; deaths by firearms in, 15–16, 70, 207n10; drug overdoses in, 115–16; groups of violence in, 29; gun culture of, 13, 138–39, 206n2; gun dealers in, 14; gun violence disparities in, 27–30; gun violence distribution in, 23; gun violence in, 6–7, 13–38; gun violence prevention failure of, 7; gun violence prevention network for, 148–51, 160, 234n28; health disparities in, 100–101; homicide comparison with, 16; laws related to firearms in, 161–62; mass shootings in, 25–26, 55, 65–67, 219n38; Mexican law enforcement recovering weapons from, 140; National Incident-Based Reporting System in,

- 157–58; non-fatal shootings in, 18; stand-your-ground laws in, 175; suicide by firearms in, 17, 53, 206n32; suicides using firearms in, 19–20; unintentional firearm deaths in, 27; violence declining in, 197
- United States vs. Rahimi*, 171
- urban communities, firearms in, 35–36
- U.S. *See* United States
- Utøya massacre, 118–19
- Vance, Ethel Lee, 123
- Van der Kolk, Bessel, 91
- Vargas, Karina, 74
- victim settlements, 203n5
- victim-offender overlap, 94
- Victims of Crime Act (VOCA), 193
- Vilija, Malinauskiene, 130
- Villarosa, Linda, 100
- violence: antisocial behaviors from, 121–26; behavioral risk factors influenced by, 101–2; biological aging from exposure to, 85; Black people characterized by, 29; Black-on-Black, 28, 212n62; brain influenced by, 91, 93; brain's response to traumatic, 91–93, 95, 98–99; childhood exposure to, 85; children's functional changes from, 93–94, 225n73; community rates of, 128; community witnesses to, 37, 58–63; divides people, 125; drug abuse risks after, 112–13, 227n21; durable infrastructure to fight, 147–51, 160, 181–82, 200; emotional toll from, 6; epigenetic changes from, 96–99; everyday behaviors impacted by, 106–7; exposure to single incident of, 61–62; firearms in domestic, 172; firearms plus, 148; group-based, 11, 23–24, 94, 206n32; from group-based behaviors, 58; health disparities contribution of, 10; health impacted by exposure to, 98, 104–5; human body changed by, 83–84; inequality in, 28–29, 147–48; infant well-being impacted by, 225n73; interpersonal, 12, 28, 32–33, 51–54, 94; interrupters of, 189–90; intervention program, 241n60; little shit causing, 23–24; living in areas with, 59; low social control and, 94–95; media exposure of, 69–70; mental health influenced by, 59, 62–63; mental health influencing, 70; mental illness and, 44; minority communities impacted by exposure to, 83; neurobiology of, 94; nonfatal, 17–18, 22–23, 210n38; nonlethal, 22–23, 210n38; people further removed from, 63–64; people's psyches damaged by, 43; physical, 28–29; physical health impacted by exposure to, 82–83, 104–5; projecting into future, 120; psychological consequences of, 129; race as condition for inducing, 30; retribution for, 24, 58; root causes of, 147–48; self-directed, 53–54; shooting survivors treatment from, 192; sleep patterns impacted by exposure to, 117–18; social networks with, 33–34; as socially contagious, 32–33; stand-your-ground laws increasing, 175–80; terror of future, 122; Trump canceling efforts preventing, 198; U.S. and other countries rates of, 22–23; U.S. groups of, 29; U.S. with declining, 197
- violent behaviors, 34, 155, 219n46
- violent crimes, 163–64, 175–80
- viral infections, 85
- VOCA. *See* Victims of Crime Act
- Voltaire, 181
- Walker, David, 41
- Wandering Stars* (Orange), 82
- war, shell shock from, 45
- weapons, homicides using, 22
- Weathering* (Geronimus), 99
- Well* (Galea), 59
- well-being: food consumption and, 129; gun violence influencing, 37–38, 77–78; infant, 225n73; mass shootings impacting, 55; social connection imperative for, 124
- Werther effect, 33
- What We've Become* (Metzl), 140
- When the Body Says No* (Maté), 77
- White House Office of Gun Violence Prevention (2023), 142, 149
- White people, 11, 20–21, 26, 37
- Whitman, Walt, 196–98, 242n1
- Why Zebras Don't Get Ulcers* (Sapolsky), 77
- Whye, Darnell, 7, 205n20
- Wilcox, Rob, 149
- wildfire fighting, 145–47
- Winston (shooting survivor), 48
- women, 11, 25, 231n78
- World Trade Center attacks, 65–66
- Wrong Place, Wrong Time* (Rich), 47
- Wu, Gary, 122
- Yamane, David, 15
- Yehuda, Rachel, 99
- zero-tolerance policy, 159
- Zimmerman, George, 176–77
- Zimmerman, Gregory, 30, 213n75