

# Illinois Chapter

INCORPORATED IN ILLINOIS

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



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Dear ICAAP Members,

Highland Park, IL. July 4th parade. A 22-year-old gunman on a rooftop with an assault rifle shoots into the crowd of spectators killing at least 6 people and injuring 38 more.

What is there to say about yet another mass shooting?

That this one is in our own backyard? – But unfortunately, this is not a first. Far from it.

That this one involves innocent children and families? - Again, something we have seen many times in recent years.

And yet again, an adolescent or young adult male with a troubled social situation has attacked unsuspecting victims going about their regular lives. Again, an assault weapon. Again, we ask WHY?

While mass shootings have dominated the news in 2022, they compose a tiny fraction of the firearm deaths in our country. The definition of “mass shooting” varies, yet statistics from the CDC using the narrower definition of mass shooting as 4 or more individuals killed in a single event, show only 1% of firearm deaths in the US are the result of mass shootings.

Each week we learn of multiple victims of gun violence in Illinois – many are children and teens. An infant riding in their car seat, a school aged child at a birthday party, a teenager at a park with friends. Gun violence is now the leading causes of death in young people aged 1-19 years old– not motor vehicle collisions, not cancer, not drug overdose, not infectious disease, not drowning, suffocation or fire.

Gun violence occurs for many reasons – anger, fear, despair, impulsivity, revenge, intimate partner violence, crime. But in these cases of highly publicized, mass shootings in which an adolescent or young adult male opens fire on innocent strangers – what drives them to this act? Is it the desire of infamy? Would shielding their identity from the press somehow prevent future mass shooters? Is it revenge against a society that has left them excluded, isolated, misunderstood? How do we identify these young people contemplating violence? How do we successfully intervene and keep dangerous weapons out of their hands? Funding for research into gun violence is crucial to helping us answer and act upon these pivotal questions.

I struggle to offer advice – we have all heard it before.

As Illinois pediatricians we must support not only the victims and their families, but the healthcare providers in Highland Park and surrounding communities who are caring for victims. This includes both the victims who were physically injured in the

shooting, but also those children who were bystanders to the shooting, and whose healthcare providers will be helping them and their families move on from this tragedy for in the weeks, months, and years ahead.

We must support the youth, not just in Highland Park, but in all Illinois communities touched by gun violence. We are experiencing record rates of anxiety and depression amongst our young people. Fear of attending school, fear of spending time in their communities, and the belief that it is only a matter of time before they become another gun violence statistic are just some of the emotions Illinois children grapple with every day. We need greater mental health services. Systems must be developed to identify and support individuals in crisis.

We must continue to voice our support for gun safety laws – stop the sale of assault weapons, require universal background checks, strengthen safe storage, enact higher age restrictions, strengthen Red Flag laws. We've all felt the "one step forward, two steps back" outcomes of gun legislation in our country. We also know that while Illinois has some of the strictest gun safety laws in the country, there is still work to be done including a statewide assault weapon ban and strengthening our safe storage legislation. Illinois is also surrounded by states with lax laws that allow the flow of illegal gun to continue into our state. Gun safety must also be addressed at the national level.

I wonder about the alleged shooter's pediatric visits. Was he asked about depression, anxiety, bullying, substance abuse, trauma? If so, did he respond? Were resources provided? Did he and his family have a trusting relationship with their pediatrician? While we cannot fix the gun violence crisis in our adolescent visits, we may have the opportunity to engage with a struggling youth and alter their course away from violence.

As the US gun violence crisis continues, I have more questions than answers. I do know that as pediatricians, we must continue to make ourselves heard on the national, local, and individual family level to advocate for the safety and well-being of our patients and the communities we serve. While we may not have the answers our patients and their families are looking for, we must help our lawmakers understand the continued devastation the epidemic of gun violence has on the children in our communities.

Sincerely,

Margaret Scotellaro, MD, FAAP  
President, Executive Committee  
Illinois Chapter, American Academy of Pediatrics (ICAAP)

Resources for Families:

AAP Healthy – [Talking with children about Disasters](#)

AAP Healthy Children – [Childhood Exposure to Violence](#)

SAMHSA – [Tips for talking with Children](#)

Everytown USA - [Finding Help](#)

National Child Traumatic Stress Network - [Helping Youth after Recent Shooting](#)