

PERSPECTIVE

“I HAVE REGRETS”: 23 YEARS OF DICKEY AMENDMENT

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“I have regrets”¹ admitted former congressman Jay Dickey (R-AR) in a 2015 interview with *The Huffington Post*, only five days after a shooting at a community college in Oregon left 10 dead and eight more injured, and almost two decades after the passage of the federal amendment that bears his name. The Dickey Amendment, as it is known, added language to a 1996 federal spending bill specifying that no funds could be used to “advocate or promote gun control,” effectively halting federally-funded research related to gun-violence. Mr. Dickey, who passed away in 2017, reflected “I wish we had started the proper research and kept it going all this time.” In a separate interview on National Public Radio, he explained that the intention of the legislation was to prevent government’s dollars to be used for gun control advocacy, but not to stop all research related to guns.²

In 1993, three years prior to the passage of the Dickey Amendment, a Centers for Disease Control (CDC) funded study conveyed that presence of firearms in households was associated with increased risk of homicide in the home. “Gun Ownership as Risk Factor for Homicide in the Home,” an article by Kellermann, et.al., published in the *New England Journal of Medicine* (NEJM). A year earlier Kellerman had published a paper finding that readily available firearms increased risk of death by suicide. Kellerman’s findings drew national attention, steering the National Rifle Association (NRA) to successfully augment their lobbying in Congress.

The NRA, founded in 1871 as a non-profit organization focused on advocacy for gun rights, started informing its members about firearm-related legislation in 1934, and became an active lobbyist in 1975. In the wake of increased scientific literature emerging related to the health risks from gun injuries in the 1980s–1990s, the NRA lobbied congress to prevent federal funds from being used to support gun-related research. During a Congressional session on the matter in 1996, opponents of the Dickey amendment referenced NRA’s influence multiple times, while Rep. Jay Dickey claimed that the “NRA has nothing to do with this bill whatsoever. It has not testified.”³

The spending bill that included the Dickey Amendment language ultimately passed, and in 1996, the NRA-backed amendment repurposed \$2.6 million previously dedicated to the Center for Disease Control (CDC) Injury Prevention Program, towards research on traumatic brain injury;⁴ even though only 5% of the budget was dedicated to gun violence related research. The Dickey Amendment language was then extended to other federal agencies including the National Institutes of Health in 2011. When interviewed about the decision to prohibit federal funding of research related to gun violence, then-House Speaker John Boehner said “a gun is not a disease.”¹

In the years since it was first passed in 1996, The Dickey Amendment language has continued to be included in annual federal spending bills, despite mounting pressure to address gun violence. In 2013, and following 2012’s Sandy Hook Elementary and Aurora Theatre shootings, President Barack Obama directed the CDC to conduct research into gun violence; however, efforts were restrained to certain categories such as youth violence, domestic and sexual violence, and suicide. Active and unsuccessful negotiations continued through March 2018 when Congress agreed on a budget that, while still including the Dickey Amendment language, offered clarification on the intent of the amendment. A report accompanying the bill stated that “[while] appropriations language prohibits the CDC and other agencies from using appropriated funding to advocate or promote gun control, the Secretary of Health and Human Services has stated the CDC has the authority to conduct research on the causes of gun violence.”⁵

Physicians and the research community are important voices in the discussion about need for federally funded research related to gun violence. Many professional physician associations have published position papers on the imperative need for gun-violence prevention and research, including the American College of Physicians (ACP), American College of Emergency Medicine (ACEP)

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and American College of Surgeons (ACS). The ACEP proposed more than 60 specific research questions needed to be addressed. The ACP's report not only supported gun violence research but also expressed the College's position in relation to firearm ownership policy. The ACS paper reflects on the polarity between perceived "freedom control vs. violence control" and calls for collaborative approach to engage both poles to re-write the "narrative."

Meanwhile, gun violence kills more people in the United States than in any other developed country.⁶ An average of 645 people die per week in the United States to gun-violence,⁷ and it's estimated that nearly 2.5 times as many people present to emergency departments with non-fatal firearm injuries. Gun-related fatalities affect people from all races, ages and neighborhoods, yet the nature and factors contributing to these fatalities differ, and significant health disparities exist. The vast majority of gun deaths are among men, and fatal gun injuries disproportionately affecting young, non-Hispanic black males.⁷ Young people are most likely to die from fatal gun-related injuries; however, rates of gun deaths by suicide

increase with age. Mass shootings shake communities far too often. Lives are lost both intentionally and accidentally to firearms, and physicians are first-hand witnesses to this public health crisis. Gun violence demands the national attention, and like any health crisis the nation's response must include robust and adequately-funded research. Repeal of the Dickey Amendment is a necessary, but not sufficient, step to the path to reducing gun violence.

References

1. Kirkland A. Congressman whose amendment ended federal gun research: 'I have regrets'. Talking Points Memo. <https://talkingpointsmemo.com/livewire/jay-dickey-regrets-amendment>. Published October 6, 2015. Accessed September 15, 2019.
2. NPR. Ex-Rep. Dickey regrets restrictive law on gun violence research. <https://www.npr.org/2015/10/09/447098666/ex-rep-dickey-regrets-restrictive-law-on-gun-violence-research>. Published October 9, 2015. Accessed September 15, 2019.
3. Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriation Act, 1997. Congressional Record. [https://www.congress.gov/congressional-record/1996/07/11/house-section/article/H7280-2-142;\(102\)—House of Representatives, July 11, 1996](https://www.congress.gov/congressional-record/1996/07/11/house-section/article/H7280-2-142;(102)—House%20of%20Representatives,%20July%2011,%201996). Accessed September 15, 2019.
4. Rostron A. The Dickey Amendment on federal funding for research on gun violence: A legal dissection. *Am J Public Health*. 2018;108(7). <https://doi.org/10.2105/AJPH.2018.304450>. Accessed September 15, 2019.
5. <https://docs.house.gov/bills-thisweek/20180319/DIV%20H%20LABORHHS%20SOM%20FY18%20OMNI.OCR.pdf> Accessed July 7, 2019.
6. The Global Burden of Disease 2016 Injury Collaborators. Global mortality from firearms, 1990-2016. *JAMA*. 2018; 320(8):792-814. doi:10.1001/jama.2018.10060. Published August 28, 2018. Accessed September 15, 2019.
7. Fowler KA, Dahlberga LL, Haileyusb T, et al. Firearm injuries in the United States. *Prev Med*. 2015 October; 79: 5–14. doi:10.1016/j.ypmed.2015.06.002.