

Chapter 8

Do We Dare Love the Shooters?

9 Principles of Firearm Harm Reduction

They be shooting whether it's dark or not, I mean the days is pretty dark a lot
Down here, it's easier to find a gun than it is to find a f***ing parking spot.

-- Chance the Rapper

Harm reduction is a compassionate and pragmatic public health framework oriented around an ethics of local community control and self-determination. Successful harm reduction approaches meet people where they are at, offering them strategies to reduce the health and safety risks to which their behaviors expose them, even if they are not interested in stopping those behaviors. Harm reduction interventions seek solutions to social problems that are grounded in the unique insights and experiential wisdom of, and foster a sense of trust, inclusion, and representation among, people most affected by those problems.

This chapter introduces readers to the 9 principles animating a hyperlocal infrastructure-building project that adapts and applies a harm reduction framework to illicit gun possession and use. (See Table 8.1 at the end of the chapter.) This project is intended to prevent the premature deaths of young Black and Latinx people from poor and working-class urban communities, and to disrupt the ceaseless demonization and criminalization of their politics of survival. It draws on two conjoined strategies to attain these goals: the continued development of safer firearm use education to supplant dangerous and unethical abstinence-only gun education, and the establishment of neighborhood-based safer gun use sites in the midst of communities with high concentrations of illicit gun users on Chicago's South and West Sides.

The criminal regulation of firearm possession in communities where everyone has easy access to guns is a diabolical hazard. Distrust of the police and fear of surveillance throttles conversations and skill-sharing around guns. Young Black and Latinx people possess increasingly sophisticated weapons, but they have no legal channels through which to learn about them. The working hypothesis of this firearm harm reduction model is that creating non-judgmental spaces in which illicit gun users can learn about the guns they routinely carry in ways that are relevant to their lived experiences, de-mystifying firearm use rather than stigmatizing and criminalizing it, will reduce instances of community violence and reduce the number of young Black and Latinx people who are living at the edge of fatality – or at least keep them alive longer.

1. The model for safer gun use sites, and for the safer firearm use education conveyed at these sites, is being collectively shaped by the voices, needs, and insights of those who are intimately affected by urban gun violence.

Specifically, this model has emerged through ongoing collaboration with shooters: gang-involved young Black and Latinx people who are actively shooting guns and getting shot at; who, more times than not, explains Ethan Viets-VanLear, one of the youth organizers working on this project, are on “both sides of the weapon,” both authors and survivors of gun-related harms; and who are consistently excluded from debates and decision-making about urban gun violence.

In 2017, a Chicago-based, abolitionist collective of organizers, restorative justice practitioners, and popular educators of which I am a part began to think together about what it would look like to treat people who illegally possess and use firearms the way that harm reduction activists treat people who illegally possess and use opioids. During the summers of 2018 and 2019, we organized a series of wisdom exchanges and political education workshops about guns. Drawing on our personal relationships with shooters who represent geographic and gang communities from across the city, (and drawing on our relationships with other youth workers, mentors, attorneys, administrators, and educators to widen the scope of our outreach,) we invited them to gather together to share stories, ask honest questions, and have non-judgmental conversations about the role of guns in their lives.

in Listening to the Movement: Essays on New Growth and New Challenges in Restorative Justice,
edited by Ted Lewis and Carl Stauffer. Cascade Books, 2021.

We also arranged individual meetings with those who wanted to contribute, but felt uncomfortable or unsafe discussing this taboo topic in group settings. Everyone who participated received food, transportation (when needed), and an honorarium, except those we met with inside prisons and detention centers, who we were not permitted to pay. When consent has been given, the words of project participants are quoted directly or summarized in this chapter; in order not to expose them to further incrimination, identifying information has been removed.

Through this ongoing organizing process, criminalized young Black and Latinx people are considering the kinds of spaces, resources, and capacity-building processes they would seek out to improve their individual safety, address gun-related conflicts and harms, and make their immediate neighborhoods healthier and more peaceful. What role can guns play in cultivating improved community safety? Can there be safety *with* guns?

2. Firearm harm reduction responds to the predominantly Black and Latinx communities enmeshed in the urban gun violence epidemic with the same open-heartedness and empathy that is usually reserved for the predominantly white communities enmeshed in the opioid addiction and overdose epidemic.

We were initially compelled to reassess the issue of urban gun violence through the lens of harm reduction because devastating numbers of young Black and Latinx people with whom we have relationships were getting shot in the streets, locked up for illegal gun possession, or both. In 2016, the year before we began this project, shootings and homicides in Chicago soared to levels not seen in decades: 4,368 people were shot, 764 were killed; of those murdered, 80% were Black and more than 50% were Black men between the ages of 15 and 34.¹ The first ten months of 2017 produced 3,144 shootings and 569 homicides.²

At the same time, illicit opioids were wreaking havoc at a similarly disproportionate rate on white poor and working-class communities across the country: in 2017, white people accounted for 77.9% of the 47,600 opioid overdose deaths in the U.S.³ Yet while those white poor and working-class communities are met with de-criminalized needle exchanges and methadone clinics, the Black and Latinx poor and working-class neighborhoods being ravaged by illicit guns are met with heightened criminal regulation and police surveillance.

3. Reducing reliance upon processes of criminalization and reducing exposure to the police enables improvements in public health and community safety.

A harm reduction framework acknowledges that, though certain drugs are illegal, people obtain and use them anyway. If you are going to use drugs, this approach suggests, at least be safe. Harm reduction interventions like needle and syringe exchanges are already common practice in the U.S. But in response to the national opioid addiction and overdose epidemic, some municipalities are beginning to extend the principles of harm reduction into what are, in the U.S., largely uncharted political waters. In places like Baltimore, New York City, the Bay Area, and Seattle, broad coalitions of public health advocates, aiming “to reduce harm to drug users and the broader community,” are campaigning for the establishment of safe consumption sites (SCSs).⁴

Like needle exchange programs, SCSs: distribute sterile injection equipment and naloxone; conduct HIV and hepatitis C testing; offer nurse consultations, low threshold medical services, and

¹ Kapustin et al., “Gun Violence in Chicago, 2016,” 9–13; Gerner, “Few Answers as Chicago Hit with Worst Violence in Nearly 20 Years.”

² DNA Info, “Chicago Murders.”

³ Kaiser Family Foundation, “Opioid Overdose Deaths by Race/Ethnicity”; Hansen and Netherland, “Is the Prescription Opioid Epidemic a White Problem?,” 2127–2129; Alexander et al., “Trends in Black and White Opioid Mortality,” 707–715.

⁴ Sherman et al., “Safe Drug Consumption Spaces,” 1.

emergency overdose response; and provide referrals to drug treatment, housing resources, legal aid, prenatal care, and mental health services.⁵ In addition to these services, SCSs provide an environment in which drug users can actually use (smoke, snort, or inject) their “pre-obtained illicit drugs.”⁶

In cities across the world – even if not yet in the U.S. – SCSs have been proven to “measurably improve public health and criminal outcomes.”⁷ SCS staff members build drug users’ awareness of risk factors inherent in drug use, and invite them to lay claim to safer drug use practices that reduce overdose events and the transmission of blood-borne pathogens.⁸ Overall, “people who utilize SCSs take better care of themselves; use their drugs more safely; and have better access to medical (and extramedical), social and drug treatment services compared to [drug users] who do not access SCSs.”⁹ For as much as SCSs do to reduce individual drug users’ high-risk behaviors, they also address health and safety risks at the broader community level by reducing instances of unsupervised public drug use, amounts of improperly discarded injection paraphernalia, and rates of “public disorder” and “local drug-related crime” in their vicinity.¹⁰

A considerable body of evidence suggests that harm reduction interventions are effective because they decline to criminalize illicit drug use or stigmatize it as immoral. SCSs offer an open door to drug users, an “unhurried” and non-judgmental environment in which to use drugs “without fear of interaction with police.”¹¹

4. Among the young Black and Latinx people most affected by urban gun violence, carrying a firearm is a rational protective strategy.

In spite of heightened law enforcement efforts to curb the flow of illegal firearms into Chicago, guns remain more widely available than ever. Criminalized young Black and Latinx people put it bluntly: “Everybody got guns.” The once highly centralized, citywide structures of Chicago’s gangs have fractured; today, territorial rivalries between hyperlocal cliques are lubricated by ubiquitous and lethal weapons. Shootings – sometimes retaliatory, sometimes accidental, attributed as often to social media insults as to decades-long, multigenerational conflicts – play out with everything from pistols with high-capacity magazines to military-style semi-automatic rifles.¹²

Gun violence is bound up with the material support, protection, and sense of belonging that gangs offer their young members; and with visions of success, politics of survival, and feelings of responsibility rooted in racial capitalism and patriarchal masculinity. The eyes of a young man at the Juvenile Temporary Detention Center light up as he describes the pride he felt when, at 15, he was given a gun and sent on a mission to shoot a rival gang member. “It made me feel honored. It reminded me that I put in a lot of hard work. I could finally prove myself as a man. It made me walk with my head higher. I gained more respect, like they looked at me as a leader not a follower.”

Gun possession is a logical adaptive response to the omnipresent threat of lethal violence young Black and Latinx individuals face due to “the state’s failure to keep them safe” – the systems that serve and protect white civil society do not serve or protect them.¹³ Distrust and hatred of the police, for example, is deeply embedded within the collective habitus of their communities, “absorbed into the culture and transmitted [...] from generation to generation.”¹⁴ The cops are a source of white supremacist

⁵ Kingston and Banta-Green, “Overview of Syringe Exchange Operations,” 1–10.

⁶ Marshall et al., “Condom Use among Injection Drug Users,” 121.

⁷ Sherman et al., “Safe Drug Consumption Spaces,” 13.

⁸ Hedrich et al., “Drug Consumption Facilities,” 306–323.

⁹ Sherman et al., “Safe Drug Consumption Spaces,” 11.

¹⁰ Hedrich et al., “Drug Consumption Facilities,” 308–312.

¹¹ Otter, “Safe Consumption Facilities,” 2.

¹² See Nickeas et al., “Some Chicago Gangs Turning to Rifles.”

¹³ Rojas, “Community Accountability as Pedagogical Strategy,” 82.

¹⁴ Sotero, “A Conceptual Model of Historical Trauma,” 96.

violence and brutality, and their presence intensifies, rather than mitigates, feelings of unsafety, dread, and rage.

The sense of safety that guns provide far outweighs potential legal consequences; thus the common refrains, “I’d rather be caught with it than without it,” and, “I’d rather be judged by 12 than carried by 6.” One 22-year-old reasons it this way: “I strap up every morning – brush my teeth, get dressed, grab my heater. I got to; I can’t leave the house without it. Out here it’s either shoot or be shot.”

5. Between bipartisan criminalization of gun possession and non-profitized abstinence-only gun education, we are hemmed in: attempting to respond to urban gun violence without actually dealing with guns.

Gruesome statistics about urban gun violence are circulated to justify conservative law and order approaches like deploying more police officers in Black and Brown communities and expanding predictive policing. In the ongoing aftermath of mass shootings, these conservative strategies work in concert with the liberal gun control movement, which advocates stricter age restrictions on buying guns and federal sentencing enhancements for criminal offenses that involve firearm possession, sometimes “regardless of whether the gun is ever fired or even brandished.”¹⁵ Fueled by bipartisan support, these carceral enforcement mechanisms and policies have produced a “war on guns,” which, like its predecessor the War on Drugs, disproportionately targets and incarcerates poor and working-class urban communities of color, particularly Black men with felony records.¹⁶

Compounding the war on guns, non-profit program providers and justice professionals reflexively privilege abstinence-only gun education. Young Black and Latinx people who routinely carry guns for protection are shut out of the material benefits of state-supported (meaning government-supported) social services, alternatives to incarceration, restorative justice programs, and youth development initiatives unless they pledge to practice a sanitized version of nonviolence. Whitewashing nonviolence, amputating it from its broader historical context in the U.S., and holding young Black and Latinx people who carry weapons to that standard does not honor their lived experiences. A young man explains the dissonance between the message he received in a recent meeting with his case manager and his reality: “I got programmed, growing up in this neighborhood. We can’t ‘turn the other cheek.’”

6. Though it has been tested in relation to the opioid epidemic, the adaptation of a harm reduction framework to the urban gun violence epidemic is trauma informed because, in particular Chicago neighborhoods, illicit opioid use and illicit firearm use are comorbid behaviors.

Before mobilizing conceptions of trauma to analyze dynamics within racialized groups of people, it is important to acknowledge that doing so is an odious game. Trauma is invested in individualization: refracted through its lens, socio-political problems are reduced to atomistic units, and rendered analyzable in terms of brain chemistry and individual responsibility. When structural harms are cast as biochemical problems, they are de-politicized. For example, fixating on trauma makes it possible to pathologize a young Black person without attending to the anti-Black histories that shape their behaviors: residential segregation; unremitting police violence; multigenerational psychic and emotional wounds sustained as a direct result of racial slavery. Trauma enables medicalized diagnoses, and thus makes healing and wellness in marginalized communities the business of specialists with expert knowledge. Dian Million (Tanana Athabascan): “trauma, or intergenerational trauma, cannot capture the infinite meaning of our lives, our histories, or any futurity that is our own. Trauma can only ever be an analytical frame that lends itself, in the long run, to capitalist management.”¹⁷

“We been getting shot at,” explains one young man, recently released after serving time for illegal gun possession, “our homies been getting killed in the streets all around us. We all got trauma

¹⁵ Denvir, “A Better Gun Control,” para. 4.

¹⁶ Levin, “Guns and Drugs,” 2173–2226; Forman Jr., *Locking Up Our Own*.

¹⁷ Million, “Spirit and Matter.”

around guns.” Gun users are criminalized for harming others, but often, long before they acquire illicit weapons, they have accrued extensive trauma histories of their own. As children, many have repeatedly “witness[ed] violence and experienc[ed] victimization” as a function of growing up in neighborhoods mired in community and police violence.¹⁸ Given the “experience-dependent plasticity” of the developing brain, chronic exposure to trauma during childhood can be “seared” or “built in” to its neural architecture, and predictive of two contrasting stress responses in adolescents and young adults: hyperreactivity and dissociation.¹⁹

Hyperreactivity is produced when the systems in the brain that are recruited to respond to external stimuli secrete elevated levels of the stress hormone cortisol into the bloodstream, shifting the body into fight-or-flight mode.²⁰ Repeatedly triggering this defense against threat lowers its threshold of activation; over time, “decreasingly intense external stimuli” can elicit an influx of cortisol and the “generalized anxiety” and “hypervigilance” of fight-or-flight.²¹ Induced not just by a traumatic event, but also by “[e]veryday stressors” or reminders of the event, hyperreactivity becomes less an acute state than an “enduring trait.”²²

A dissociative defense to stress, characterized by “emotional nonreactivity” and “withdrawn behavior,” is induced by an atypically reduced cortisol profile.²³ To lessen the physiological burden of hyperreactivity, the brain suppresses cortisol levels through the endogenous production and secretion of opioids. Those who become accustomed to “elevated levels of natural opioids” in their brain can experience withdrawal symptoms; exogenously ingesting opioids allows individuals “to chemically induce a state that mimics” the “soothing, gratifying pleasure” of endogenously orchestrated dissociation.²⁴ Epidemiologists have found that there is a “probabilistic concurrence” of childhood trauma and opioid use, the latter numbing distressing and painful emotions related to the former.²⁵

Hyperreactivity and dissociation can co-occur because they spring from the same etiological source; they are different “enduring neurodevelopmental consequences” of the same trauma history.²⁶ In the neighborhoods at the center of this project, we observe an admixture of both of these contrasting stress response patterns, and an interaction between them. Many young Black and Latinx people move through the world in a sustained state of “hypervigilance and hyperarousal,” constantly looking over their shoulders and ducking abruptly down alleys to avoid being seen by rival gang members.²⁷ In this volatile context, acquiring and carrying a firearm offers a sense of control and a defense against another gun user’s unpredictable explosion of “aggressive and violent behavior.”²⁸ Concurrently, illegal gun users also self-medicate with illegal opioids, acquiring and using “dissociating agent[s]” like percocet, codeine-based lean or Actavis, Vicodin, oxycodone, and fentanyl to provide tranquilizing relief from persisting grief, anxiety, anger, and paranoia.²⁹

¹⁸ Aiyer et al., “Exposure to Violence,” 1068.

¹⁹ Gambino and Holtmaat, “Synapses Let Loose for a Change,” 216; Perry and Pollard, “Homeostasis, Stress, Trauma, and Adaptation,” 42; Perry et al., “Childhood Trauma,” 290.

²⁰ Perry et al., “Childhood Trauma,” 278; Lugarinho, et al., “Prospects of studies on violence,” 1329; Peckins et al., “The Longitudinal Impact of Exposure to Violence,” 367.

²¹ Perry et al., “Childhood Trauma,” 275–277; Peckins et al., 366.

²² Perry and Pollard, “Homeostasis, Stress, Trauma, and Adaptation,” 42; Peckins et al., “The Longitudinal Impact of Exposure to Violence,” 367; Lee et al., “Synapse Elimination,” 195.

²³ Aiyer et al., “Exposure to Violence,” 1067–1075; Perry and Pollard, “Homeostasis, Stress, Trauma, and Adaptation,” 43; Peckins et al., “The Longitudinal Impact of Exposure to Violence,” 371.

²⁴ Somer, “Opioid Use Disorder and Dissociation,” 511–16.

²⁵ Somer, “Opioid Use Disorder and Dissociation,” 513; Van Hasselt et al., “Psychiatrically Hospitalized Dually Diagnosed Adolescent Substance Abusers,” 868–74.

²⁶ Aiyer et al., “Exposure to Violence,” 1068; Anda et al., “The Enduring Effects of Abuse and Related Adverse Experiences in Childhood,” 183.

²⁷ Somer, Eli, “Opioid Use Disorder and Dissociation,” 515.

²⁸ Anda et al., “The Enduring Effects of Abuse and Related Adverse Experiences in Childhood,” 181.

²⁹ Somer, “Opioid Use Disorder and Dissociation,” 515.

This firearm harm reduction model is not intended to minimize the profound differences between the opioid addiction and overdose epidemic and the urban gun violence epidemic. It is situated within an environment, however, where these urgent public health crises are intertwined.

7. Instead of advocating that shooters put the guns down, safer firearm use education equips them with the knowledge, skills, and resources they need to make more responsible and mindful choices about the guns they are already, routinely picking up.

Safer firearm use education, explains a 19-year-old from East Garfield Park (a community on Chicago’s West Side), is intended to “make knowledge about guns accessible” so that “you know what you capable of, and know the power and responsibility we have with guns.” Shooters participating in wisdom exchanges and political education workshops propose that neighborhood-based safer gun use sites offer three different types of safer firearm use education activities.

a. Candid conversations

Candid conversations invite young people who have been criminalized for gun use and possession to sit together; to reflect on their relationships to their weapons, the police, and their communities; and to process gun-related conflicts and harms. It means holding space in which they can address the emotional, cognitive, social, behavioral, and physiological costs of being on both sides of the gun by sharing stories of surviving gun violence, as well as (in many cases, for the first time in their lives) stories of being the shooter and authoring harm.

A clear distinction seems obvious: drug users harm themselves and gun users harm others. And yet, when asked the kinds of questions they would be interested in discussing with one another, young people repeatedly blurred this distinction by acknowledging the harm that they inflict on themselves when they use guns:

- “What feeling do you get after you pull the trigger?” What was your experience pulling a gun on someone and how have you handled the things you felt inside afterward? What feelings of guilt, regret, shame, fear, dread, or horror did you experience during or after the incident? “Does anyone else have trouble sleeping?”
- What was your relationship to the person you harmed? How has your involvement in a shooting incident changed you, your family, and affected the other relationships in your life?
- “A lot of times the media steady de-humanizing us, saying we animals. But we do it too, cuz here [in the song lyrics] it says ‘grimey savage, that’s what we are’. We talking about how we savages, and we sent off, shooting each other – I want to talk about how we out here de-humanizing ourselves.”³⁰

Their questions also make connections between paranoia and addiction, and explore the ways that, in their communities, illicit gun use is entangled with illicit opioid, marijuana, and benzodiazepine use:

- “I gotta look over my shoulder like all the time. If I’m in action mode I get off the xans [take Xanax] before I do a mission. But weed make me feel smooth, smoking weed is when I stop being hype. My question for the group is how y’all feel about drugs, and what they do for you?”

b. Political education

During one preliminary listening session, a young man on First Offender Gun Probation said, “I’d like to know how did all these guns get into my community. Where are they coming from?” Another wrote, “Did my ancestors have guns? Also I heard there are places in the world where no one has guns not even the police, so how come there are guns here?” Political education classes offer an opportunity to examine ways that working-class Black and Brown communities have historically built capacity with, and organized, trained, and mobilized around firearms. They push beyond the abstinence-only gun education

³⁰ This quote is from a workshop that made use of Bobby Shmurda’s 2014 song “Hot N***a.” The song’s lyrics are being referenced.

and whitewashed versions of nonviolence promulgated by many non-profit program providers and justice professionals by studying approaches to nonviolence that do not disavow the prevalence of guns, including past examples in which nonviolent tactics and strategic action have been complemented and sponsored “by gunfire and the threat of gunfire.”³¹

State-supported responses de-politicize urban gun violence by employing ahistorical analytical frameworks that allow for only narrow, “individualized account[s]” of it.³² Gun conflicts are approached in terms of law-breaking and crime (to be policed and punished) or in terms of trauma and contagion (to be medicalized and managed). Political education classes, on the other hand, engage shooters in cultivating and broadening a shared political analysis of gun violence that is de-individualized, properly historicized, and that distinguishes between intra-community gun-related harms and state-sponsored police violence.

c. Applied skill-building

Skill-building opportunities include emergency first responder training, know your rights workshops, and firearm safety classes.

A young man writes about a fatal shootout in which he was involved:

[...] were runnin they shoot another 3 shots I look back I see my boy hit the pavement screaming HELP ME I stop running I stop to help my boy but im scared heart poundin palms sweating and hands shaking I see blood on his hand I see him holding his stomach then his leg then his chest hes crying I start to cry I start to hold him hes coughing up blood he tells me dont leave me he starts tryin to gasp for air I look in his eyes I see that hes scared out of his mind I grabbed his hand im screaming [...]

He wonders if his friend would have lived if he had known what to do to improve his chances of survival in the moments before help arrived. Safer firearm use education includes emergency first responder training, provided through our ongoing partnership with Ujimaa Medics, a Black street medic collective in Chicago. The goal is to equip those at greatest risk of exposure to gun-related harm with concrete and time-critical first aid practices, including treating gunshot wounds, securing free airways, implementing bleeding control measures, and administering CPR. And to provide illicit gun users with a practical sense of how to manage the chaos of a shooting and what to expect in its aftermath.

Safer firearm use education also includes ‘know your rights’ workshops that disseminate information about the legalities of gun possession, transport, and use, and criteria for Firearm Owners Identification cards and Concealed Carry Licenses.

Wisdom exchange participants raise various technical questions about how to operate and care for their guns. “How do I store my piece? I worry about my baby sister finding it whenever it’s at the house.” “How do I grip it knowing the kickback coming?” Many of them envision hands-on training in firing guns as a way to reduce gun-related harms; they propose that safer gun use sites offer access to a shooting range, target practice, and instruction in the fundamentals of marksmanship. A young man at a juvenile prison, a boxer, suggests that marksmanship instruction would instill in illicit gun users a heightened sense of responsibility for the safety of their community, analogous to the burden on professional boxers who, because they know how to deploy their fists as lethal weapons, have to be circumspect about confrontations with untrained fighters. Recent evidence makes an adjacent argument by linking martial arts training, with its “themes of repetitive movements, controlled behaviors, and respect,” to reductions in physical aggression and violent behaviors among children and adolescents, and to improvements in their “self-control,” “emotional stability,” and “self-awareness.”³³

Moreover, many young Black and Latinx people who are surrounded by and illegally carrying guns for protection are already being taught how to shoot them, often by older gang members. One young man explains, “The big homie, he was the chief enforcer of the Vice Lords when I was growing in the

³¹ Cobb Jr., *This Nonviolent Stuff’ll Get You Killed*, 2.

³² Rojas, “Community Accountability as Pedagogical Strategy,” 96.

³³ Harwood et al., “Reducing Aggression with Martial Arts,” 97–100.

game. He taught me about guns and wars more than anyone else.” Hands-on firearm use education already exists, but because it is criminalized, it has been driven underground. Is this safe? What about the ways that shooters use and think about guns would change if they had consistent opportunities to learn from certified firearm safety experts?

Instead of training illicit gun users to fire guns, an idea which provokes understandable resistance from a range of professionals, proposed safer gun use site offerings have been adapted to reflect the National Rifle Association’s 4-hour certified home firearm safety course, a non-shooting course. Through firearm safety classes, shooters would learn: principles of safe handling, cleaning, care, and storage of guns and ammunition; the basics around firearm components, design, mechanics, and assembly; and how to unload different types of actions.

8. Once established, safer gun use sites can be converted into incubators for multigenerational, community-controlled responses to gun conflicts that avow the prevalence of illicit firearms and are inclusive of those who use them.

Illicit gun users participating in wisdom exchanges and political education workshops are already considering what it means to heal from gun-related harms they have both authored and received. One young man asks, “I would want to know from someone else who has [a victim] that didn’t die is they thinking about apologizing and could they ever have accountability?”

The creation of non-coercive safer gun use sites through which shooters can improve their individual wellness and safety without incriminating themselves interrupts a culture that treats them as social pariahs, offers concrete proof that they are not dispensable, and cultivates their investment in making their immediate communities healthier and more peaceful. It prepares them to collaborate with others from their neighborhoods who are also directly impacted by community and police violence (including elders, currently and formerly incarcerated people, mothers, business owners, and religious leaders), in order to determine and organize individual, family, and community accountability processes. Processes, according to project organizer Brandon Daurham, that “heal and connect instead of stigmatizing and incarcerating/criminalizing.”

Imagine multiple such neighborhood-based spaces networked together into a de-centralized “infrastructure of accountability” through which hyperlocal responses to harm (gun-related and otherwise) and the tactics to organize them, can transcend and be shared across geographic and gang territories.³⁴

9. Honoring (rather than overriding) community wisdom and community-determined solutions means pushing beyond professionally, institutionally, and legally circumscribed notions of justice, healing, wellness, accountability, and care.

Some of the culturally-specific firearm harm reduction strategies conceptualized by criminalized young Black and Latinx people participating in wisdom exchanges and political education workshops are incommensurable with codified theories of change and social science-backed best practices. Negotiating this incommensurability can be uncomfortable for justice professionals – those of us who are in the business of managing other people’s conflicts. Justice professionals include practitioners, educators, researchers, consultants, administrators, and advocates from various specialized fields (criminal justice, law, violence prevention, restorative justice, social work, youth development, alternative dispute resolution), and sustained by institutions (non-profits, philanthropic foundations, think tanks, advocacy groups, professional associations, social welfare agencies, university research centers, crime labs, LLCs, training centers, school districts, courts, community courts, reentry outfits, prisons, police departments) arrayed across interlocking industrial complexes (prison, non-profit, academic).

What are we justice professionals to do when community-determined solutions to social problems do not include us? When these solutions require that we stay outside, that we decline to enter spaces or

³⁴ Rojas, “Community Accountability as Pedagogical Strategy,” 96.

interfere with lives and communities that are not our own, how do we respond? What if the primary problem, following Nils Christie, is not the amount of gun-related conflicts, but rather the metastasizing “abundance of professionals” who are “trained to prevent and solve” them?³⁵ When all of our socialization has convinced us that the credentialed expert knowledge that we have to offer is eminently valuable, and when we have a professional imperative to serve, provide, and impart that knowledge wherever it is lacking, where do we go when we are asked to leave? How can we go away when we still have a job to do, a career to advance – not to mention when we still need to support ourselves and our loved ones financially? How will we make a living?

These challenging questions are already confronting the police. For those who are shooting and getting shot at to feel safe to gather together, access safer firearm use education, engage in multigenerational collaboration, and build community accountability mechanisms to address gun-related harms, spaces must be created that are insulated from surveillance and criminalization. Ethan Viets-VanLear writes, “We need de-criminalized spaces where we can talk about these issues safely, and come to terms with the guns in our reality.” This call to dislodge the police in order to enable possibilities of improved public health and community safety is consistent with evidence amassed by needle exchange programs in the U.S. and SCSs abroad. If, like those other harm reduction interventions, neighborhood-based safer gun use sites are to be “free from police intrusions,” as a young woman participating in this project puts it, the Chicago Police Department (CPD) must stand down. At particular times, in and around particular spaces, CPD must agree not to police, and instead to cede authority to the very racialized poor and working-class communities they relentlessly terrorize and destabilize, so that something else can grow.

But this is not just about the cops. If the police must leave so that healing can occur, which justice professionals get to stay? Who decides? Can we, all of us justice professionals, start to prepare ourselves now, together, to pack up and get out?

³⁵ Christie, “Conflicts as Property,” 4–13.

Table 8.1. *This model adapts and applies a harm reduction approach, widely accepted in relation to illicit drug use, to illicit gun use.*

a harm reduction framework applied to Illegal Drug Use	a harm reduction framework applied to Illegal Firearm Use
Though certain drugs are illegal, people obtain them from illicit markets and use them anyway.	Though firearm possession is illegal for people who have felony convictions, these people obtain guns from illicit markets and use them anyway.
Possessing and using illegal drugs is a choice; this behavior is also often an adaptive strategy to manage neurobiologically in-built stress responses produced by extensive trauma histories.	Possessing and using illegal guns is a choice; this behavior is also often an adaptive strategy to manage neurobiologically in-built stress responses produced by extensive trauma histories.
This behavior exposes people who inject drugs, and their immediate communities, to health and safety risks – e.g. increased likelihood of blood borne viral infection and overdose.	This behavior exposes people who use guns, and their immediate communities, to health and safety risks – e.g. increased likelihood of lethal violence and incarceration.
Approaches that criminalize public drug use or promote abstinence-only drug education are dangerous and unethical – they exacerbate health and safety risks.	Approaches that criminalize public gun use or promote abstinence-only gun education are dangerous and unethical – they exacerbate health and safety risks.
To reduce the risks of drug-related harms, selectively de-criminalize drug possession and establish sites where drug users can access equipment, safer drug use education, and professional supports.	To reduce the risks of firearm-related harms, selectively de-criminalize gun possession and establish sites where gun users can access equipment, safer firearm use education, and professional supports.
Provide resources so that people who routinely inject drugs can build awareness of risk factors and grow capacities to improve the health and safety of their communities.	Provide resources so that people who routinely carry and use guns can build awareness of risk factors and grow capacities to improve the health and safety of their communities.
Safer drug use education activities and resources conveyed at safe consumption sites: <ul style="list-style-type: none"> • Non-judgmental relationships • Candid conversations • Emergency overdose response • HIV and hepatitis C testing • Nurse consultations • Distribution of sterile injection supplies • Safer drug use • Referrals to healthcare and social services 	Safer firearm use education activities and resources conveyed at safer gun use sites: <ul style="list-style-type: none"> • Non-judgmental relationships • Candid conversations • Emergency first responder training • Political education classes • Know your rights workshops • Firearm safety training courses (non-shooting) • Multigenerational individual, family, and community accountability processes

Acknowledgements

This project belongs to the young people – Alicia, Alonzo, Alvaro, Angela, Anthony, Brianna, Brittany, Carlos, Charles, Consie, Corey, Cupree, Deandre, Denzel, Deondre, Desean, Donquel, Dre, Fletcher, Frederick, Gio, Jahari, Jalen, Jawan, Jeremy, JoJo, Kenneth, Kevin, Kris, Lavon, Marshawn, Maurice, both Michaels, Omari, Quinton, Rayquan, Romale, Rondale, Shaunice, Stephon, Tashay, Tayler, Tavon, Tim, Travon, Trayvonte, Tyquell, Vic, Zach, and many others – whose insights, voices, stories, and realities are represented here.

Gratitude to those whose collaboration and partnership throughout this organizing process, or whose incisive feedback on earlier versions of this essay, have sharpened and grounded this work: Emmanuel Andre, Bill Ayers, Kathy Bankhead, Dan Berger, Julie Biehl, Mac Carlson, Dan Cooper, Brandon Daurham, Jean Dennison, Bernardine Dohrn, Annie Dwyer, Will Eder, Marlon English, Anthony Floyd, Noni Gaylord-Harden, Shelley Gilchrist, Michael Gomez, Cheryl Graves, Gillian Harkins, Stephen Jackson, Kenisha Jamison, Mariame Kaba, Rebecca Kling, Ted Lewis, Eleuthera Lisch, Dian Million, Nubian, Dan Otter, Chris Patterson, Sherrif Polk, Alphonso Prater, Elena Quintana, Tony Raggs, Ali Rowhani-Rahbar, Fred Seaton, Carl Stauffer, Juan Tauri, David Ucker, Jennifer Viets, Rob Vickery, Ethan Viets-VanLear, Fred Wallace, Piet Walvoord.

Wisdom exchanges and political education workshops during the summers of 2018 and 2019 were made possible by funding from the Institute for Public Safety and Social Justice at Adler University, and by the kindness and administrative support of Misty Brown and Matt Barrington.

This essay's titular question comes from a series of talking circles that Emmanuel Andre and I co-facilitated in 2012 to process the murder of a young Black man on Chicago's North Side.

Finally, Ora Schub was a mentor, teacher, and other-mother to me. She modeled open-heartedness and generosity like no one else I have known, and in doing so she challenged me to push the limits of my empathy. My contributions to this project are dedicated to her memory.

Bibliography

- Aiyer, Sophie M., et al. "Exposure to Violence Predicting Cortisol Response During Adolescence and Early Childhood: Understanding Moderating Factors." *Journal of Youth and Adolescence* 43.7 (July 2014) 1066–79.
- Alexander, Monica J., et al. "Trends in Black and White Opioid Mortality in the United States, 1979–2015." *Epidemiology* 29.5 (September 2018) 707–15.
- Anda, Robert F., et al. "The Enduring Effects of Abuse and Related Adverse Experiences in Childhood: A Convergence of Evidence from Neurobiology and Epidemiology." *European Archives of Psychiatry and Clinical Neuroscience* 256.3 (April 2006) 174–86.
- Blankenship, Aaron G., and Maria B. Feller. "Mechanisms Underlying Spontaneous Patterned Activity in Developing Neural Circuits." *Nature Reviews Neuroscience* 11.1 (January 2010) 18–29.
- Christie, Nils. "Conflicts as Property." *The British Journal of Criminology* 17.1 (January 1977) 1–15.
- Cobb, Charles E., Jr. *This Nonviolent Stuff'll Get You Killed: How Guns Made the Civil Rights Movement Possible*. New York: Basic Books, 2014.
- DNA Info. "Chicago Murders." <https://www.dnainfo.com/chicago/2017-chicago-murders>.
- Denvir, Daniel. "A Better Gun Control." *Jacobin* (15 September 2016). <https://www.jacobinmag.com/2016/09/gun-control-mass-incarceration-drug-war-nra-shooters>.
- Expert Advisory Committee on Supervised Injection Site Research, "Vancouver's INSITE Service and Other Supervised Injection Sites: What Has Been Learned from Research?" Health Canada (March 2008). <https://www.canada.ca/en/health-canada/corporate/about-health-canada/reports-publications/vancouver-insite-service-other-supervised-injection-sites-what-been-learned-research.html>.
- Forman, James, Jr. *Locking Up Our Own: Crime and Punishment in Black America*. New York: Farrar, Straus and Giroux, 2017.

in *Listening to the Movement: Essays on New Growth and New Challenges in Restorative Justice*, edited by Ted Lewis and Carl Stauffer. Cascade Books, 2021.

- Gambino, Frédéric, and Anthony Holtmaat. "Synapses Let Loose for a Change: Inhibitory Synapse Pruning throughout Experience-Dependent Cortical Plasticity." *Neuron* 74.2 (April 2012) 214–217.
- Gilmore, Ruth Wilson. "Fatal Couplings of Power and Difference: Notes on Racism and Geography." *The Professional Geographer* 54.1 (February 2002) 15–24.
- Gorner, Jeremy. "Few Answers as Chicago Hit with Worst Violence in Nearly 20 Years." *Chicago Tribune* (30 December 2016).
- Hansen, Helena, and Julie Netherland. "Is the Prescription Opioid Epidemic a White Problem?" *American Journal of Public Health* 106.12 (December 2016) 2127–2129.
- Harwood, Anna, et al. "Reducing Aggression with Martial Arts: A Meta-Analysis of Child and Youth Studies." *Aggression and Violent Behavior* 34 (2017) 96 – 101.
- Hedrich, Dagmar, et al. "Drug Consumption Facilities in Europe and Beyond." In *Harm Reduction: Evidence, Impacts and Challenges*, edited by Tim Rhodes and Dagmar Hedrich, 305–331. Luxembourg: Publications Office of the European Union 2010.
- Kaiser Family Foundation, "Opioid Overdose Deaths by Race/Ethnicity." <https://www.kff.org/other/state-indicator/opioid-overdose-deaths-by-raceethnicity>.
- Kapustin, Max, et al. "Gun Violence in Chicago, 2016." University of Chicago Crime Lab (January 2017). <http://urbanlabs.uchicago.edu/attachments/store/2435a5d4658e2ca19f4f225b810ce0dbdb9231cbdb8d702e784087469ee3/UChicagoCrimeLab+Gun+Violence+in+Chicago+2016.pdf>
- Kingston, Susan, and Caleb Banta-Green. "Overview of Syringe Exchange Operations in Washington State." University of Washington Alcohol and Drug Abuse Institute (September 2015) 1–13.
- Lee, Hanmi, et al. "Synapse Elimination and Learning Rules Co-regulated by MHC Class I H2-D^b." *Nature* 509 (8 May 2014) 195–200.
- Levin, Benjamin. "Guns and Drugs." *Fordham Law Review* 84.5 (2016) 2173–2226.
- Lugarinho, Leonardo Planel, et al. "Prospects of Studies on Violence, Adolescence, and Cortisol: A Systematic Literature Review." *Ciência & Saúde Coletiva* 22.4 (2017) 1321–32.
- Marshall, B.D.L., et al. "Condom Use among Injection Drug Users Accessing a Supervised Injecting Facility." *Sexually Transmitted Infections* 85 (2009) 121–26.
- Million, Dian. "Spirit and Matter: Resurgence as Rising and (Re)Creation as Ethos." *Symposium: Indigenous Resurgence in an Age of Reconciliation*. University of Victoria (18 March 2017).
- Nickeas, Peter, et al. "Some Chicago Gangs Turning to Rifles for Added Firepower, Police Say." *Chicago Tribune* (24 February 2017).
- Otter, Dan. "Safe Consumption Facilities: Evidence and Models." King County Heroin and Opiate Addiction Task Force (2016). https://www.kingcounty.gov/~media/depts/community-human-services/behavioral-health/documents/herointf/Safe_Consumption_Facilities_Evidence_Models.ashx?la=en.
- Peckins, Melissa K., et al. "The Longitudinal Impact of Exposure to Violence on Cortisol Reactivity in Adolescents." *Journal of Adolescent Health* 51.4 (October 2012) 366–72.
- Perry, Bruce D., et al. "Childhood Trauma, the Neurobiology of Adaptation, and 'Use-Dependent' Development of the Brain: How 'States' Become 'Traits'." *Infant Mental Health Journal* 16.4 (Winter 1995) 271–91.
- Perry, Bruce D. and Ronnie Pollard. "Homeostasis, Stress, Trauma, and Adaptation: A Neurodevelopmental View of Childhood Trauma." *Child and Adolescent Psychiatric Clinics of North America* 7.1 (January 1998) 33–51.
- Rojas, Clarissa. "In Our Hands: Community Accountability as Pedagogical Strategy." *Social Justice* 37.4 (2011–2012) 76–100.

- Sherman, Susan, et. al. "Safe Drug Consumption Spaces: A Strategy for Baltimore City." *The Abell Foundation* 29.7 (February 2017) 1–15.
- Smith, Andrea. "Introduction." In *The Revolution Will Not Be Funded: Beyond the Non-Profit Industrial Complex*, edited by INCITE! Women of Color Against Violence, 1–18. Cambridge, MA: South End, 2007.
- Somer, Eli. "Opioid Use Disorder and Dissociation." In *Dissociation and the Dissociative Disorders: DSM-V and Beyond*, edited by Paul F. Dell and John A. O'Neil, 511-518. New York City: Routledge, 2009.
- Sotero, Michelle M. "A Conceptual Model of Historical Trauma: Implications for Public Health Practice and Research." *Journal of Health Disparities Research and Practice* 1.1 (Fall 2006) 93–108.
- Van Hasselt, Vincent B., et al. "Maltreatment in Psychiatrically Hospitalized Dually Diagnosed Adolescent Substance Abusers." *Journal of the American Academy of Child & Adolescent Psychiatry* 31.5 (September 1992) 868–74.