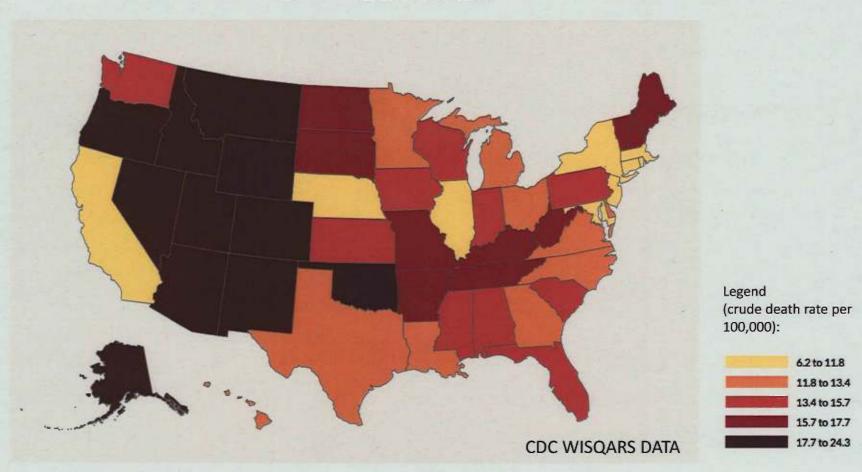
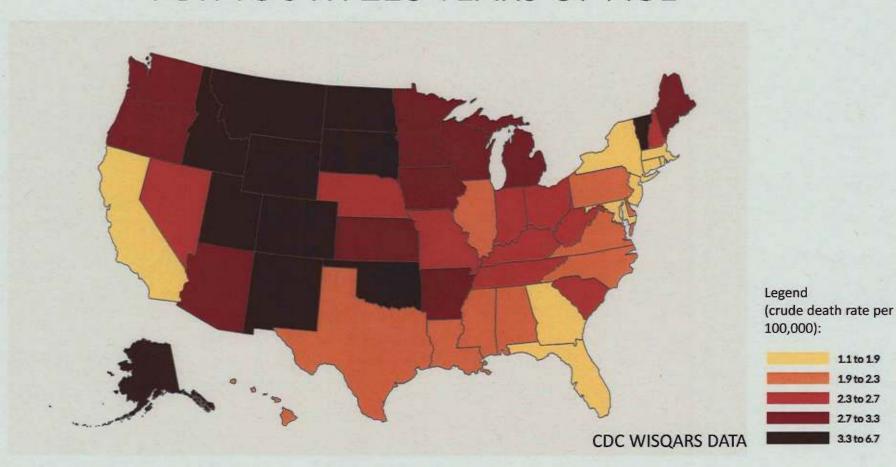
# 2008-2017 OVERALL SUICIDE RATE FOR ALL AGES



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## 2008-2017 OVERALL SUICIDE RATE FOR YOUTH ≤18 YEARS OF AGE



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## Testimony in support of S.22 -

An act related to: 1. a waiting period for firearm sales and 2. safe storage of firearms

Vermont has a higher than average rate of suicide deaths. Our rate of youth suicide deaths consistently place us in the top quartile in the U.S.<sup>1</sup>

Means matter. Among all age groups, firearms are the most common method used in suicide death in Vermont. In the 18 and younger age group, about half of the suicide deaths are due to firearms.<sup>1</sup>

Vermont has higher than average youth suicide death rate when compared to other states but lower than average prevalence rate of youth reporting severe depressive symptoms, suicidal planning, and suicide attempts<sup>2,3</sup>.

Differences across states in the rates of youth suicide deaths are largely explained by variations in household gun ownership<sup>2</sup>.

90% of those who survive a suicide attempt to not go on to later die by suicide4.

Many suicide attempts occur with little planning during a short-term crisis.

Adolescent and young adult survivors of nearly-lethal suicide attempts were asked how much time elapsed from the moment they decided to attempt suicide to when the attempt occurred. 24% said less than 5 minutes and an additional 50% said less than 1 hour<sup>5</sup>.

Those who attempt suicide impulsively are more likely to choose a violent method and are less likely to have a history of depression than those who use other methods<sup>5</sup>.

Easily accessible firearms in the home are associated with an increase in suicide deaths and unintentional death in young people<sup>6,7</sup>.

Research shows that storing firearms locked provides a protective effect against firearm injury and death among young people<sup>8</sup>.

Multiple studies have shown children know where the firearms are located in the home despite reports from parents believing their children do not know the location of firearms<sup>9,10</sup>. Many children also admit to having handled the firearm without their parents' knowledge.

The American Academy of Pediatrics recommends safe storage/child access prevention laws along with safe storage education to reduce firearm injury and death among children and adolescents<sup>11</sup>.

No single intervention will solve the problem of gun violence. However, requirement of a waiting period to purchase firearms and requirement of safe storage of firearms help to address the proven connection between impulsivity, access to firearms and suicide.

The **Vermont Chapter of the American Academy of Pediatrics**, representing over 200 Vermont Pediatricians, and the **Vermont Medical Society**, representing over 2,000 Vermont physicians, support the passage of S.22 as an important component in the effort to reduce gun violence in our state.

### References

- CDC WISQARS Suicide data, 2008-2017.
- Knopov, Anita; Sherman, Rebecca J; Raifman, Julia R; Larson, Elysia; Siegel, Michael B. Household Gun Ownership and Youth Suicide Rates at the State Level, 2005-2015. American journal of preventive medicine, 2019; 1873-2607
- 3. 2017 Youth Risk Behavior Survey: https://www.cdc.gov/healthyyouth/data/yrbs/results.htm
- 4. Owens D, Horrocks J, and House A. Fatal and non-fatal repetition of self-harm: systematic review. British Journal of Psychiatry. 2002;181:193-199.
- Simon, T.R., Swann, A.C., Powell, K.E., Potter, L.B., Kresnow, M., and O'Carroll,
   P.W. Characteristics of Impulsive Suicide Attempts and Attempters. SLTB. 2001; 32(supp):49-59.
- David C. Grossman, Donald T. Reay & Stephanie A. Baker, Self-Inflicted and Unintentional Firearm Injuries Among Children and Adolescents: The Source of the Firearm, 153 Arch. Pediatr. Adolesc. Med. 875, 875 (Aug. 1999), http://jamanetwork.com/journals/jamapediatrics/fullarticle/347593. →
- 7. Matthew Miller and David Hemenway, *The Relationship Between Firearms and Suicide: A Review of the Literature*, 4 Aggression & Violent Behavior 59, 62-65 (1999)
- 8. Grossman DC, Mueller BA, Riedy C, Dowd MD, Villaveces A, Prodzinski J, Nakagawara J, Howard J, Thiersch N, Harruff R. Gun Storage Practices and Risk of Youth Suicide and Unintentional Firearm Injuries. *JAMA*.2005;293(6):707–714.
- 9. Philip J. Cook & Jens Ludwig, U.S. Dep't of Justice, Nat'l Inst. of Justice, *Guns in America:* National Survey on Private Ownership and Use of Firearms, (1997), https://www.ncjrs.gov/pdffiles/165476.pdf
- 10. Frances Baxley & Matthew Miller, *Parental Misperceptions About Children and Firearms*, 160 Archives Of Pediatric & Adolescent Med. 542, 544 (2006).
- 11. Firearm-Related Injuries Affecting the Pediatric Population COUNCIL ON INJURY, VIOLENCE, AND POISON PREVENTION EXECUTIVE COMMITTEE Pediatrics Nov 2012, 130 (5) e1416-e1423.