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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.¹

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.¹

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^{2,3}.

Differences across states in the rates of youth suicide deaths are largely explained by variations in household gun ownership².

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 hour⁵.

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 methods⁵.

Easily accessible firearms in the home are associated with an increase in suicide deaths and unintentional death in young people^{6,7}.

Research shows that storing firearms locked provides a protective effect against firearm injury and death among young people⁸.

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^{9,10}. 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 adolescents¹¹.

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.

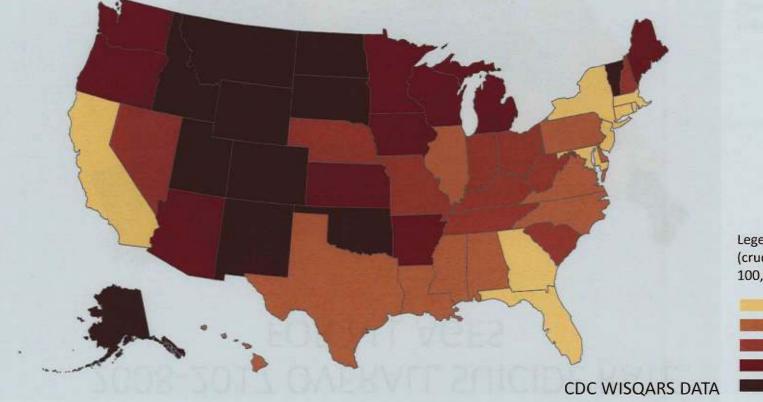
References

- 1. 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.

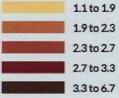
1999), http://jamanetwork.com/journals/jamapediatrics/fullarticle/347593. -

- 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)
- 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.
- 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), <u>https://www.ncjrs.gov/pdffiles/165476.pdf</u>
- 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.

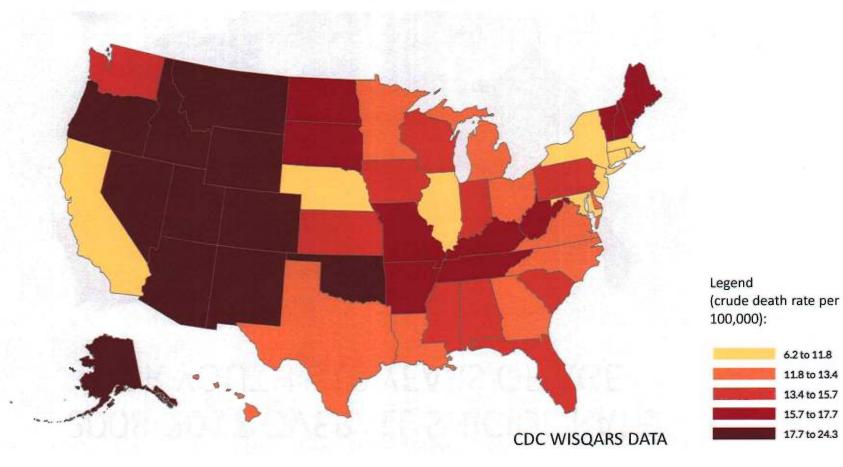
2008-2017 OVERALL SUICIDE RATE FOR YOUTH ≤18 YEARS OF AGE



Legend (crude death rate per 100,000):



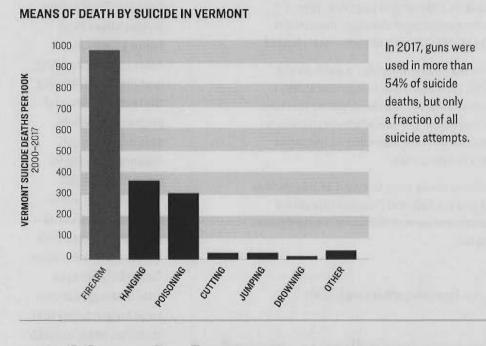
2008-2017 OVERALL SUICIDE RATE FOR ALL AGES





GUNS AND SUICIDE IN VERMONT

Suicide affects an appallingly large and growing number of Vermont families. **But these tragedies are preventable.** The vast majority of people who attempt suicide survive and go on to live out their lives—unless they use firearms. **Responsible gun safety reforms must be part of a comprehensive response to this public health crisis.**



Giffordslawcenter.org

SUICIDE'S TOLL

Since 2000, nearly one thousand Vermont residents have died by gun suicide, including more than 100 people under age 25. Gun suicides in Vermont also have a disproportionate impact on veterans and older residents of the state.

1.5x

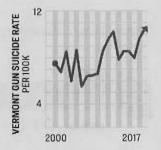
In 2017, Vermont's firearm suicide rate was 1.5 times higher than the national firearm suicide rate, and nearly three times higher than that of other Northeastern states.

90%

While Vermont residents are affected by all aspects of the gun violence crisis, gun suicides take a particularly harsh toll. Nearly 90% of all gun deaths in Vermont are suicides.

SUICIDE RATES ARE RISING ACROSS THE STATE

Vermont's firearm suicide rate increased by nearly 40% between 2000 and 2017—reaching its highest level in 25 years.



The Tragic Intersection of Guns and Suicide

SUICIDE ATTEMPTS ARE OFTEN IMPULSIVE

In many cases, suicide attempts are impulsive, desperate reactions to acute crises like the loss of a job or relationship, or the death of a loved one. Many people act on suicidal impulses quickly and with little planning. A variety of studies suggest that most suicide survivors contemplated their actions for only a brief period of time often less than 24 hours—before making a suicide attempt.

GUNS ARE A UNIQUELY LETHAL METHOD OF SUICIDE

Firearms are the most lethal of the commonly available means of suicide in the US. The vast majority of people who attempt suicide survive—unless they use a gun. While less than 5% of non-firearm suicide attempts result in death, approximately 85% of gun suicide attempts end in death. This explains how guns are responsible for a majority of the nation's suicide deaths even they are used in only 5% of lifethreatening suicide attempts.

SUICIDE ATTEMPTS ARE NOT USUALLY REPEATED

Of those who survive a suicide attempt, the vast majority never attempt again, and 90% do not go on to die by suicide. This finding is consistent with the observation that suicidal crises are often short-lived. By delaying or limiting access to guns among those at a proven risk of suicide, we can save thousands of American lives every year.

Waiting Periods Save Lives

Given the impulsive nature of suicide, it is unsurprising that studies have found that the risk of suicide death is particularly elevated in the first week after an individual acquires a gun. In fact, one study found that California handgun purchasers were 57 times more likely to die by firearm suicide in the first week after a handgun purchase compared to the average resident of the state. Although gun purchasers remain at increased risk of suicide for years after the acquisition of a handgun, these results suggest that the time directly following a purchase is when the risk is most elevated.

Waiting period laws can help mitigate the risk directly following the purchase of a gun and prevent impulsive suicides. These laws require a certain number of days to elapse between the purchase of a firearm and when the purchaser can actually take possession of that firearm—creating a "cooling off" period in which gun purchasers can reconsider their intentions. Academic studies have shown that waiting period laws are associated with reduced rates of firearm suicide.

So far, ten states—California, Florida, Hawaii, Illinois, Iowa, Maryland, Minnesota, New Jersey, Rhode Island, and Washington—and the District of Columbia have passed waiting period laws that apply to the purchase of some or all firearms. Vermont should follow their lead and pass this lifesaving law.

For more details and underlying research, visit lawcenter.giffords.org/suicide



280+

new gun safety laws have been enacted in 45 states and DC since the tragedy at Sandy Hook.

125,000

Americans are shot each year—over one million in the past decade.

25x

Americans are 25 times more likely to be killed by a gun than people in other developed nations.

WE'RE ON A MISSION TO SAVE LIVES

For 25 years, the legal experts at Giffords Law Center to Prevent Gun Violence have been fighting for a safer America by researching, drafting, and defending the laws, policies, and programs proven to save lives from gun violence, Founded in the wake of a 1993 mass shooting in San Francisco, in 2016 the Law Center joined with former Congresswoman **Gabrielle Giffords to** form a courageous new force for gun safety that stretches coast to coast.

contact us media@giffords.org