If you or someone you love is in crisis or struggling with their mental health, contact the National Suicide Prevention Lifeline: 1-800-273-8255 or Text HOME to 741741.
ABOUT BRADY

Founded in 1974, Brady works across Congress, courts, and communities, uniting gun owners and non-gun owners alike, to take action, not sides, and end America’s gun violence epidemic. Our organization today carries the name of Jim Brady, who was shot and severely injured in the assassination attempt on President Ronald Reagan. Jim and his wife Sarah led the fight to pass federal legislation requiring background checks for gun sales. Brady continues to uphold Jim and Sarah’s legacy by uniting Americans from coast to coast — red and blue, young and old, liberal and conservative — against the epidemic of gun violence.
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INTRODUCTION

On any given day in the United States, an average of 64 people die by gun suicide.\textsuperscript{2} Suicide accounts for two-thirds of all gun deaths; with 1.4 million suicide attempts in 2019,\textsuperscript{3} it is one of the most pressing public health crises in America.\textsuperscript{4} While some of those who die by suicide live with diagnosed mental illnesses such as anxiety, clinical depression, or other mood disorders, more than 50% of people who die by firearm suicide do not have a diagnosed mental health condition.\textsuperscript{5} Mental health diagnoses alone do not necessarily spur thoughts of suicide or suicidal behavior — stressful situations like the loss of a loved one, unemployment, housing insecurity, systemic injustice, substance misuse, lack of resources for everyday challenges, and other problems can also lead to suicidal thoughts or behavior. Any of these factors paired with access to lethal means can create dangerous, and even deadly, situations.

The COVID-19 pandemic has exacerbated existing inequities and insecurities across America, particularly in historically underserved communities. It is not yet clear how this global crisis has impacted suicide rates in America. However, COVID-19 has undoubtedly fostered a nationwide

![SUICIDE ATTEMPT FATALITY RATE BY METHOD\textsuperscript{1}](image)

**SUICIDE ATTEMPT FATALITY RATE BY METHOD\textsuperscript{1}**

<table>
<thead>
<tr>
<th>Method</th>
<th>Suicide Attempt Fatality Rate 2007-2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cut/Pierce</td>
<td>1%</td>
</tr>
<tr>
<td>Drug Poisoning</td>
<td>2%</td>
</tr>
<tr>
<td>Falling</td>
<td>28%</td>
</tr>
<tr>
<td>Hanging</td>
<td>53%</td>
</tr>
<tr>
<td>Firearm</td>
<td>90%</td>
</tr>
</tbody>
</table>
Firearms account for 5% of suicide attempts, but more than half of suicide deaths.

Individuals in crisis who use mental health services or access a hotline often go on to live long and full lives. In fact, 90% of those who survive a suicide attempt don’t go on to die by suicide, and 70% never make another attempt. However, unique consideration must be given to the 41% of the U.S. population that owns a gun or lives in a home containing one. It is important to acknowledge and address that compared to other methods of suicide, firearms are by far the most lethal. While guns are used in only a small percentage of suicide attempts, they are an overwhelming lethal means, resulting in death 90% of the time and leading to 50% of all suicide deaths. This report, therefore, focuses on the relationship between firearms and suicide to provide tangible solutions for policymakers, community organizers, and all others across the U.S. working to prevent further injury and save lives.

**FIREARM SUICIDE IN THE UNITED STATES HAS RESULTED IN 340,000 LIVES LOST, WHICH ACCOUNTS FOR MORE THAN HALF OF THE SUICIDE DEATHS IN THE COUNTRY.**
THE LINK BETWEEN GUNS AND SUICIDE

Gun violence kills approximately 40,000 Americans each year, and suicide accounts for the vast majority of these firearm fatalities. In 2019, more than 60% of gun deaths — 23,941 fatalities — were due to suicide. This is consistent with two decades of data showing that firearm suicide in the United States has resulted in 340,000 lives lost, which accounts for more than half of the suicide deaths in the country.

Suicide most often occurs during a time of exceptional psychological distress combined with a desire to be free from distress. When this desire is combined with an actionable plan and access to a chosen method, a person is at extraordinarily high risk of suicide. Many suicide attempts are initiated very quickly following a decision to act. One study found that 24% of survivors had attempted suicide within five minutes of deciding on that course of action; 48% attempted within 20 minutes, and 71% within one hour. Importantly, research shows that 70% of people who survive a suicide attempt live out their lives without ever attempting suicide again, and the majority of people who act on a suicide attempt actively try to reverse it or seek help.

However, the use of a gun in a suicide attempt is uniquely lethal. Firearms account for only 5% of suicide attempts, but over half of all suicide deaths.

THE IMPACT OF COVID

As the world grapples with the effects of the COVID-19 pandemic and key stress factors increase, proactive suicide prevention is more important than ever. Preliminary data does not indicate an increase in suicide during 2020, but we do not yet know the long-term consequences of this unique global event. What is known, however, is that there was a 145% increase in background checks on gun sales from June 2019 to June 2020, indicative of a sustained surge in gun purchasing. Increased access to guns, coupled with increased risk factors for suicidal thoughts and behaviors, creates a dangerous combination where crises are more likely to be lethal.

An overwhelming body of research shows, however, that suicide is often preventable. One evidence-based strategy for suicide prevention is called Lethal Means Safety, which is a strategy of placing time and distance between an individual contemplating suicide and a potential method of suicide. The safe storage of guns among gun owners dramatically reduces the risk of suicide for those with suicidal ideation. As such, discussions about access to lethal means must be part of the solution. In order to better tailor our suicide prevention efforts to combat the deadly intersection of COVID-19 and gun suicide, we must understand and critically examine the role that safe storage of firearms plays in saving lives.
JESSICA’S STORY

Jessica was a 22-year-old woman in treatment for stress related to entering graduate school as well as her history of suicidal thoughts. Jessica had experienced these thoughts for most of her teen years and had attempted suicide once before. She had worked hard to address these challenges and had become quite successful in pursuing her academic career. After several years of improved friendships, active use of effective coping skills, and obtaining her undergraduate degree, Jessica began to struggle again with thoughts of suicide. While in therapy, Jessica indicated to her therapist that recent coping strategies had become harder to use, and that she felt her friendships were slipping away. Jessica purchased a handgun and stated that “owning it makes me feel more in control.” Jessica died by gun suicide only a few days after the purchase of the firearm.77

Because most suicide attempts take place within minutes of a decision being made — and given that firearms are uniquely lethal when used as a method of suicide — access to a firearm represents an extraordinary risk of death when a person is considering suicide. Data shows that those who die by suicide are three times more likely to have lived in a house with a loaded firearm when compared to those who die by suicide while having lived in a home with an unloaded firearm. Furthermore, individuals living in homes with guns stored unlocked were twice as likely to die by suicide than those in households where firearms were stored locked.19 When firearms are part of the decisions made during moments of crisis, such decisions can too easily lead to death.

60%
Over 60% of all gun deaths are from suicide (2019).

TIME ELAPSED BETWEEN DECISION AND SUICIDE ATTEMPT78

<table>
<thead>
<tr>
<th>Time</th>
<th>Percentage of attempters</th>
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<tbody>
<tr>
<td>Less than 5 minutes</td>
<td>24%</td>
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<tr>
<td>Less than 20 minutes</td>
<td>48%</td>
</tr>
<tr>
<td>Within an hour</td>
<td>71%</td>
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</table>
2019 STATE SUICIDE: ALL SUICIDES

Crude Rate refers to rates per 100,000 population. Data source: CDC’s WONDER website, http://wonder.cdc.gov

National Total: 14.5

2019 STATE SUICIDE: FIREARM SUICIDES

Crude Rate refers to rates per 100,000 population. Data source: CDC’s WONDER website, http://wonder.cdc.gov

National Total: 7.3
COMMUNITIES UNIQUELY IMPACTED BY FIREARM SUICIDE

YOUTH AND TEENS

Children, teens, and young adults are among those most vulnerable to gun violence in all of its forms, and suicide is no exception. Since 2006, the firearm suicide rate for minors has increased approximately 60% among those identified as boys and young men — an increase nearly three times the rate of the general male population.22 Similarly, those identified as girls and young women are now more than twice as likely to die by suicide than they were 15 years ago.23 From 2000 to 2016, nearly 19,000 young people died by suicide before their 18th birthday, with firearms accounting for nearly 10,000 of those deaths;24 in 2016, an average of two children (18 years old or younger) ended their lives with a firearm every day.25 According to a 2019 study by the Jason Foundation, more teenagers and young adults have died from suicide than from cancer, heart disease, AIDS, stroke, pneumonia, influenza, and chronic lung disease combined.26

A major factor contributing to the risk of suicide for young people is the ease with which many minors are able to access firearms. Studies have shown that upwards of 4.6 million children live in homes with a firearm that is unlocked and loaded, and many youth are able to obtain access to these guns.27 Other studies have shown that two-thirds of youth firearm suicides take place in the family home, and over half of these deaths are carried out with a firearm owned by a family member.28 This access to lethal means contributes to the high rate of firearm suicides among youth populations.

CAYMAN’S STORY

On a winter day in 2015, 13-year-old Cayman, described as a “really, really happy kid,” found a gun in his parent’s home — a gun that his father had even forgotten they owned — and used it to take his own life. Cayman, who was facing pressure at school for falling behind on assignments, had received an email that he was in danger of failing a class unless he turned in his work. Perhaps afraid of repercussions both at school and at home, Cayman became yet another young person who took his own life with a firearm. A year after Cayman’s death, his father said that “teens make bad choices sometimes, and a single event can seem insurmountable to them. ... My intent is to say that guns in the house of teenagers are a risk, even for a responsible gun owner.”

YOUTH SUICIDE TRENDS

Suicide Death Rates (Unadjusted) Ages 10-19

<table>
<thead>
<tr>
<th>Year</th>
<th>Males</th>
<th>Females</th>
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<tbody>
<tr>
<td>1999</td>
<td>7.4</td>
<td>1.6</td>
</tr>
<tr>
<td>2017</td>
<td>10.7</td>
<td>4.2</td>
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</table>

Rate (per 100,000).
GENDER & SEXUALITY: LGBTQ+ COMMUNITIES

Some studies have found that LGBTQ+ youth are one of the most at-risk populations for suicide. However, there is very limited data regarding the impact of suicide, and more specifically firearm suicide, on LGBTQ+ populations. Reporting on LGBTQ+ individuals and suicide rates is complicated by discrepancies in tracking the LGBTQ+ population, particularly after death when an individual cannot self-identify and those investigating a death may not know the proper questions to ask in regard to gender and sexual identity.

Nevertheless, due to related risk factors that underserved communities face (lack of familial or cultural support, access to healthcare, housing, job security, or other common stressors associated with LGBTQ+ experiences like discrimination or harassment), the LGBTQ+ community represents a demographic deserving of special attention from community leaders, mental health practitioners, and policymakers when it comes to suicide prevention efforts. One study found that LGB youth “seriously contemplate suicide at almost four times the rate of heterosexual youth and are five times as likely to have attempted suicide compared to heterosexual youth.” This data, limited as it may be, supports both the need for a tailored approach to addressing suicide in LGBTQ+ communities and that safe storage of firearms in the homes of LGBTQ+ youth should be considered a crucial practice.

GENDER: MEN

Suicide rates in the United States are now at their highest levels in at least 35 years, according to most recent data. In 2019 alone, 23,941 people lost their lives to gun suicide, and 86.6% of those lives lost were male. The 2019 data also shows that 17,427 of those who died identified as white males, which means that white men are twice as likely to die by firearm suicide than the general U.S. population.

Men die by suicide at a rate 3.63 times higher than women. They are also more likely to attempt suicide with a gun than women — and seven times more likely to die. This correlates with the fact that men own guns at higher rates and are less likely to store guns safely. When compared to women gun owners, “male gun owners [were] more likely … to say there is a gun that is both loaded and easily accessible to them all of the time when they’re at home.”

WHITE MEN ARE TWICE AS LIKELY TO DIE BY FIREARM SUICIDE THAN THE GENERAL U.S. POPULATION.
Men of every age group, race, and ethnic identity are at higher risk of firearm suicide death than women in the same categories.\(^{35}\) A study of 2019 data found that white men age 75 and older are at the highest risk of firearm suicide, but in recent years, firearm suicide risk has peaked for men between the ages of 20 and 34, representing a trend of increasing risk for younger male demographics.\(^{36}\)

**RACE AND ETHNICITY: AMERICAN INDIAN, ALASKAN NATIVE, AND BLACK YOUTH**

In addition to the impact of firearm suicide on white men, there are a number of other communities disproportionately impacted by firearm suicide. American Indian and Alaskan Native males between the ages of 15 and 35 experience suicide rates much higher than their white male counterparts. Overall, these men have a disproportionately high rate of firearm suicide (11.16 deaths per 100,000), but fewer reported suicide deaths than white males (the largest total population to die by suicide in the U.S.), because of both the smaller size of the American Indian and Alaskan Native populations and an imprecise reporting mechanism that is likely to record ethnicity improperly on death certificates.\(^{37}\)

It is important to note that American Indian and Alaskan Native deaths by suicide skew younger, with the highest proportion of deaths concentrated in the 15-25 age bracket. Data similarly shows
that suicide deaths skew toward youth in Black communities — Black individuals ages 15-34 are more likely than those aged 35-85 to die by suicide. Suicide deaths, however, within the general U.S. population continue to be more concentrated among older adults ages 75-85, with white males representing 73% of the bracket’s fatalities. In fact, in the past 25 years, there have been steep declines in suicide rates among young people overall.

Suicide attempts by both male and female Black teens have significantly increased. For Black girls, data shows that rates of suicidal behavior are accelerating, while injury caused by suicide attempt has also increased for Black teenage boys. Researchers speculate that this latter increase may be a result of Black male teenagers opting for more lethal methods of suicide, like firearms. Research exploring the reasons for these troubling trends in suicide among Black youth cites as possible causes disparities in mental health treatment along with social determinants such as racism, traumatic childhood events, and poverty, all of which disproportionally affect Black populations.

GEOGRAPHY

A recent analysis of 2018 and 2019 suicide rates conducted by the Centers for Disease Control and Prevention (CDC) found not only that the urbanization level of an area in which a person lives is associated with different rates of firearm suicide, but that firearms were the most common mechanism of suicide death among all urbanization levels.

Suicide rates in 2019 were lowest in large central metropolitan areas (11.2 suicides per 100,000 people) and increased as the level of urbanization declined, with nonmetropolitan areas having the highest rate (20.1 per 100,000). Research also shows that 58% of rural households have guns, while only 29% of urban households and 41% of suburban households report possessing a firearm. This data helps us understand the significant risk of firearm suicide for residents of rural areas and outlines the lesser but still significant risk of suicide for residents of metropolitan and urban areas. The CDC concluded from their study that a

THOSE WHO DIE BY SUICIDE ARE THREE TIMES MORE LIKELY TO HAVE LIVED IN A HOUSE WITH A LOADED FIREARM WHEN COMPARED TO THOSE WHO DIE BY SUICIDE WHILE HAVING LIVED IN A HOME WITH AN UNLOADED FIREARM.
“conglomeration of messaging, resources, therapy, [and] protective factors are not reaching” these rural communities most at risk, which points to the ever-growing need for solutions that will curb the rates of firearm suicide in all communities across the country.

**MILITARY-CONNECTED COMMUNITIES**

Active service members and veterans are disproportionately affected by firearm suicide when compared with non-military-connected individuals. In 2018, 6,435 United States veterans died from suicide, representing 17.6 veteran deaths per day — 13 of which involved a firearm. From 2005 to 2018, there was a 25.6% increase in the suicide rate among veterans who had recently used Veterans Health Administration (VHA) services, and a 57% increase for veterans without recent VHA contact. Differences in suicide rates among veterans who access veteran-specific care compared to those who do not have access to providers with a veteran background illustrate the importance of culturally competent care when working with military-connected communities in crisis.

**JAMES’ STORY**

James was a 42-year-old man with more than 20 years of military service prior to his retirement. Since 9/11, he had more than a dozen deployments to the Middle East, and as a veteran working with a government contractor he regularly traveled to different Middle East locations. Although his service deployments had ended, his regular trips overseas contributed to James’ divorce at 41. Following the divorce, James lived alone, and between trips overseas he became despondent. He lived in a rural area and would stay in his apartment by himself, disconnected from his friends. One of his coping mechanisms was to “dry fire” his pistol; he would aim his empty weapon at the couch and practice his shooting technique. James lost his life when, rather than turning to his coping technique, he used the same firearm and died by suicide. Safe storage of this firearm could have played an important role in preventing James’ suicide attempt and the subsequent loss of his life.

Male and female veterans are at an increased risk of suicide compared to non-veterans: Female veterans are 250% more likely to die by suicide than female non-veterans, regardless of method, and male veterans are 18% more likely to die by suicide than the average male civilian.

Veterans have unique experiences and relationships with firearms that likely contribute to the vulnerability of dying by suicide. Virtually all male and female veterans are at an increased risk of suicide compared to non-veterans: Female veterans are 250% more likely to die by suicide than female non-veterans, regardless of method, and male veterans are 18% more likely to die by suicide than the average male civilian.

**17.6**

*Veteran suicide deaths per day, 13 of which involved a firearm (2018).*
Veterans have training and experience in the use of firearms, and many consider firearm ownership a part of their identity. Evidence shows that veterans often remain gun owners even after leaving active duty, and gun ownership among veterans is considerably higher than the rate of gun ownership among the general population. Nearly half of veterans self-report that they are gun owners, and nearly 75% of combat veterans report owning and having access to firearms. In comparison, only about 20% of civilian households report gun ownership.44

Knowledge of, experience with, and easy access to firearms all likely contribute to a higher chance that firearms will be the chosen method in a suicide attempt. Firearms are used in 69.4% of suicides among male veterans and 41.9% of all female veteran suicides.45 Suicide prevention efforts and veteran healthcare services must consider the significant role that firearms play within military-connected communities.

**VETERAN SUICIDE DEATHS VS. NON-VETERAN SUICIDE DEATHS**

Percent of suicide deaths by firearm

<table>
<thead>
<tr>
<th></th>
<th>Non-Veterans</th>
<th>Veterans</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Adults</td>
<td>48.2%</td>
<td>68.2%</td>
</tr>
<tr>
<td>Male</td>
<td>53.5%</td>
<td>69.4%</td>
</tr>
<tr>
<td>Female</td>
<td>31.7%</td>
<td>41.9%</td>
</tr>
</tbody>
</table>

VETERAN SUICIDE DEATHS VS. NON-VETERAN SUICIDE DEATHS

Percent of suicide deaths by firearm

- All Adults: 48.2% for Non-Veterans vs. 68.2% for Veterans
- Male: 53.5% for Non-Veterans vs. 69.4% for Veterans
- Female: 31.7% for Non-Veterans vs. 41.9% for Veterans
SOLUTIONS

POLICY AND LEGISLATION

Due to their unique lethality, reducing the ease with which firearms can be accessed by individuals in crisis is a critical part of preventing their use in suicides. The five states with the lowest rates of suicide among white men (the largest population affected by gun suicide) also have the lowest rates of gun ownership. These states — Massachusetts, New York, New Jersey, Rhode Island, and Connecticut — rank among those with the most comprehensive gun laws nationwide. It is critical we examine the types of policies shown to be effective in reducing firearm suicides if we are to curb America’s gun suicide epidemic. These policies include, but are not limited to, extreme risk laws, waiting periods, child access prevention laws, and minimum age requirements.

Extreme Risk Laws

Extreme Risk laws, sometimes called Extreme Risk Protection Orders (ERPO) or red flag laws, are an important tool that families, household members, law enforcement and a limited number of other categories such as school administrators or health officials, can use to prevent firearm injuries and fatalities, particularly from suicide attempts. These laws are specifically crafted to focus on behavioral risk factors that lead to gun violence while avoiding the stigmatization of those living with mental illness who do not exhibit indicators of potential harm. Extreme risk laws vary by state, but generally enable specified individuals to present a judge with evidence that another individual’s behavior is demonstrating that they are at an increased risk of harming themselves or others with a gun. If there is evidence of an imminent risk, the respondent will be temporarily prohibited from purchasing or possessing those firearms. Shortly thereafter, the respondent appears before a judge in a second civil (not criminal) hearing to ensure due process protections exist, similar to the Constitutional processes utilized for domestic violence or other similar civil protective orders.

The factors that a judge may consider when attempting to determine one’s risk for harm varies depending on state laws. Forms of evidence can include documented past irresponsible behavior with guns indicating propensity for violence, previous acts of violence, stalking or domestic abuse, specific threats of future violence, substance misuse, and recent firearms or ammunition acquisition. If a judge issues an order, the at-risk individual must surrender any firearms or ammunition in their possession to law enforcement (or, in some cases, a neutral third party), and will be prevented from purchasing a new gun during the duration of the order. These orders are not permanent; some last for a period of only a few weeks. If a renewal is sought, a hearing must be held, and the court must find that an extension is warranted.

Frequently, family members, partners, or housemates are able to identify warning signs or concerning behaviors before an individual acts to harm themselves or others. More often than not, however, those concerned about an individual have no official mechanism to prevent the person in crisis from obtaining or using firearms, leading to tragic consequences. Extreme risk orders provide a swift, effective way for family members to work with courts and law enforcement to temporarily
remove guns from loved ones before an irreversible violent incident occurs. If that person is considering suicide, removing guns from these scenarios has been proven to prevent injury and provide the opportunity to access and benefit from the necessary care.

A study evaluating Connecticut’s extreme risk law found that at least one suicide was averted for every 10-20 risk warrants that were issued and that many individuals received care services they might not have otherwise accessed.49 Another recent study showed that in 44% of cases the extreme risk order led to the respondent receiving psychiatric treatment they may not have otherwise received.50 One study of Indiana’s extreme risk law found that in the decade after enacting the policy the state had a 7.5% decrease in firearm suicides, resulting in a possible 383 lives saved.51 The same study found that there was a 13.7% drop in firearm suicides during the roughly eight-year period after Connecticut implemented its extreme risk law.52 Extreme risk orders alone cannot prevent all firearm suicides, but both anecdotal and statistical evidence shows how effective this type of policy has been in the 19 states (and the District of Columbia) where it has been implemented.

Waiting Periods

Limiting access to firearms for individuals experiencing periods of crisis is key to reducing firearm suicides. Waiting periods create time between the ideation of suicide and an actual attempt by delaying access to firearms. When waiting periods are in place, there is a critical barrier between the start of a firearm purchase and the transfer of that firearm to the purchaser. This is crucial in “heat of the moment” cases that can lead to homicide, domestic violence, and suicide. Since the vast majority of individuals who decide to attempt suicide put their plan into motion in less than an hour, these laws create a life-saving space of time in which the individual can reach out for help or reconsider their decision.

Waiting periods have been associated with a reduction in both homicide and suicide rates in the states where they exist. A 2015 study found that suicide rates in South Dakota increased by 8.9% in the four years after the state’s waiting period law was repealed, while Washington, D.C. experienced a 1.5% decrease in suicide rates following the adoption of a law that initiated waiting periods at time of purchase rather than when an application originated for that purchase.53 Another study found that any delay between the purchase and transfer of a firearm both reduced gun suicide rates by between 2% and 5% and prevented the substitution of another method of suicide; lives were not lost because no suicide attempt was made. The author of this study specified that if states without waiting periods were to adopt such laws for handgun purchases, an estimated 600 lives would be saved per year.54 A significant number of studies
## Legislative Solutions to Prevent Firearm Suicide

<table>
<thead>
<tr>
<th>State</th>
<th>Minimum Age</th>
<th>Waiting Periods</th>
<th>CAP</th>
<th>Safe Storage</th>
</tr>
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### Minimum Age

Federal law prohibits the sale of all guns to those under 18. States regulate possession on a wide spectrum. Nebraska & Minnesota allow possession as young as 14 with hunting licenses/firearm safety certifications, while other states mandate a minimum age of 21 for purchase and possession of handguns, like Iowa, Maryland and Massachusetts.

### Waiting Periods

There are only a few states that impose waiting periods for all firearms. Most states regulate handgun purchase more strictly based on evidence that they are the most frequently used firearm in suicide attempts. Waiting periods range from a full two weeks in Hawaii to just 72 hours in Illinois.

### Child Access Prevention

Child Access Prevention (CAP) laws exist in many different forms to prevent children from accessing unsecured firearms in the home. Two of the most important differences in these statewide laws are 1: the age at which an individual is considered a minor and 2: the standard for what is considered access. Under the first category, some states define minors as those under 16, like Connecticut and Florida. Other states define minors as those under 18, like California. There is also variation as to what constitutes “access” to household firearms, with some states imposing liability if the child is able to access the firearm, regardless of use or injury, like California or Maryland, while other states establish a standard that the law is breached only if access was “intentionally, knowingly or recklessly” permitted. These states include Nevada and Virginia.
### LEGISLATIVE SOLUTIONS TO PREVENT FIREARM SUICIDE (CONTINUED)

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**Safe Storage**

Variations in gun safe storage laws can be seen in the type of gun regulated (long guns versus handguns), and the circumstances under which those guns should be locked. Most states, like New Jersey and Maryland, focus on handgun storage. Similarly, many state laws call for storage in select cases, like Connecticut and Delaware.

**Extreme Risk Laws**

Extreme Risk Laws vary based on who can file a court petition for an order to temporarily remove firearms from a person in crisis. States with the most comprehensive policies enable family members and intimate partners. States with less comprehensive laws often only allow for law enforcement to petition, like Indiana and Florida.
come to similar conclusions: A 2017 study found that, from 1977 to 2014, states with waiting periods for handgun purchases and states with waiting periods within their firearm permitting systems had a significant decrease in both firearm suicide rates and suicide rates overall.  

A growing number of states have enacted waiting periods, but these laws vary by state, ranging from three days to two weeks; in some states, the wait also applies only to certain types of firearms. Regardless of specifics, these policies have broad support — a 2018 poll found that 77% of Americans support enacting a federal mandatory waiting period for all gun purchases.

**Child Access Prevention Laws**

An overwhelming amount of research shows how easy access to guns leads to an increased risk of gun violence among young people. This is particularly concerning given that at least 4.6 million minors in the U.S. live in homes with an unlocked, loaded firearm. One study found that 36% of children under the age of ten self-admitted that they had accessed a firearm in their home. Similar to general safe storage requirements, child access prevention (CAP) laws encourage the secure storage of firearms in homes with children by imposing requirements on adults to keep guns locked or otherwise inaccessible to children except in cases with proper supervision or for specific activities like hunting or sports shooting. CAP laws vary greatly by state, as there is no federal policy currently in effect. Multiple studies have found that CAP laws are associated with decreases in the total rate of youth suicide, as well as the rate of youth suicide by firearm. Other studies have even found that CAP laws with more strict provisions have a greater effect on reducing youth suicide than CAP laws with less strict provisions.

Broader safe storage laws similarly promote increased gun safety by requiring gun owners to keep their firearms secured or inaccessible to any unauthorized user, helping to keep firearms out of reach of those at high risk of injuring themselves or others, such as children or someone experiencing crisis. These laws also vary; while 11 states have some form of safe storage mandate, the actual requirements of what constitutes “safe storage” are far from standardized.

**Minimum Age Requirements**

Another type of policy designed to reduce youth gun violence, including firearm suicides, is a minimum age requirement. Minimum age laws set a standard for the age at which a person can legally purchase or possess a firearm. While there are currently federal standards in effect, some states have passed versions of these laws that go beyond the federal minimum. The federal Gun Control Act mandates that shotguns, rifles, and their ammunition may only be sold to individuals 18 or older. All other firearms, such as handguns and pistols, and related ammunition, may only be sold to individuals 21 or older.

Studies on minimum age laws have found that these laws are associated with a decrease in the suicide rate, and an even more concentrated decrease in the rate of firearm suicides, among young people ages 20 and below. Studies have also found that minimum age laws have a concentrated decrease on suicide rates among male youth, presenting yet another promising strategy for reducing youth suicide by firearm.
PUBLIC HEALTH SOLUTIONS

LETHAL MEANS SAFETY AND SAFE STORAGE

One evidence-based strategy to prevent suicide is called Lethal Means Safety (LMS). There is a long history of successful public health initiatives that have reduced suicide rates using this strategy. For example, the most common method of suicide for many years in the United Kingdom was the use of toxic oven gas as a means of suffocation. When the gas was changed to a non-toxic formula, the suicide rate dropped. People who had attempted to die by oven gas generally did not go on to attempt suicide using a different method. This is an example of a suicide method that had become more difficult to obtain, and the suicide rate was therefore reduced.

Similarly, when overdose by some prescription medications became a common method for suicide, these medications began to be sold in blister packs rather than in bottles. In this case, the method of suicide was essentially slowed down rather than removed. The suicide rate also dropped following this initiative. These are examples of LMS: efforts to put time and distance between a person and any particular method of suicide.

Lethal Means Safety is of the utmost importance for people who think about suicide and have access to a useable firearm. Because suicide attempts with a firearm result in death 90% of the time, the safe storage of firearms is a crucial suicide prevention method. Safe storage also mitigates the risk of both unintentional and intentional shootings, helping to prevent incidents of family fire. Family fire is a shooting that results from an improperly stored or misused firearm in the home.

Studies have consistently shown that youths who die by suicide often use unlocked firearms that have been found in their home. Access to a gun can increase the risk of death by suicide by 300%, and unlocked firearms are far more likely to be used in a suicide attempt than firearms that are safely stored. Storing firearms separately from ammunition has been shown to reduce the risk of firearm suicide, with some reports indicating a 61% decrease in the risk of family fire. Recent studies have noted that even a slight increase in the number of American households practicing safe storage could prevent almost a third of all annual gun deaths from suicide and unintentional shootings. Simply storing a firearm safely is a factor known to reduce the likelihood of a gun owner dying by firearm suicide.

Trigger Locks and Cable Locks

A trigger lock is a simple two-piece lock that fits through the trigger guard of a firearm to prevent the trigger from being pulled. For most trigger locks, a combination, push-button, or key lock secures the device, rendering it inoperable to anyone who does not have the appropriate means of unlocking the gun. Cable locks are devices that block the chamber of a firearm to prevent a gun from being fired. A cable can be inserted in or through the magazine well, chamber, or gun barrel and chamber to block a cartridge from moving into position, thus preventing the gun from being fired. As with trigger locks, a simple combination or key opens the lock. However, trigger locks and cable
locks do not prevent theft of firearms and are not necessarily compatible with all types of guns or blocking all unwanted users. Safety is a scale that is ever-evolving. While a cable lock can prevent toddler access, it may not be able to prevent access by a teen or adult in crisis. Lockboxes can provide a more secure option.

**Lock Boxes, Gun Vaults, and Safes**

Lockboxes, gun vaults, and gun safes are viable safe storage options that make unauthorized access to a firearm even more difficult than trigger locks, in some cases even deterring theft. Lockboxes are small safes designed to securely store a handgun. Most can be bolted down or secured with a cable and opened with a combination, digital keypad, biometric identification (fingerprint), or key. In contrast, gun vaults and safes are larger and typically designed to store long guns, handguns, or valuables. These storage options are also opened with a combination, digital keypad, biometric identification, or key. While lockboxes and gun vaults may be more expensive options for safe storage, they are simple, secure, and ensure your firearm is quickly accessible in an emergency situation.

300%  
Access to a gun can increase the risk of death by suicide by 300%.
**Off-site Storage**

In select cases, the best method of safe storage is to temporarily store a gun off-site with a family member, friend, at a local gun shop, or even a police department. In temporarily storing guns off-site, gun-owning households with a loved one in crisis are afforded even greater protection from firearm suicide, enabling the individual in crisis time to access care. In voluntarily placing their firearms in the hands of a trusted partner, gun-owning households are empowered with even greater autonomy to keep themselves and their loved ones safe.

**ASKING SAVES LIVES**

It is important to engage family, friends, and members of your community in conversations about unlocked or loaded guns in the home. Just as they ask all sorts of questions before allowing their children to visit other homes, parents and guardians are encouraged to ask if there is an unlocked gun in a home their child visits. Initiating this conversation isn’t just the responsibility of parental figures; it extends to all individuals, especially gun owners and firearm-related businesses. While the question may seem simple, it has the power to save a life.

Asking about firearm storage in the home is a key component of preventing firearm suicide. This concept of asking originated from the American Association of Pediatrics and is endorsed by Brady. We must provide culturally informed safe storage messaging to prevent incidents of family fire, but to do so, we must first start the conversation.

Depending on the messenger, these conversations may look different. Even in your own home, it is important to note that families grow and circumstances change, so ongoing conversations about safe storage are important. It can be especially important to ask about guns in the home if you know someone is experiencing a crisis and may be at risk of harming themselves or others. Having regular conversations about gun safety with those in your community can reduce firearm suicide and other forms of gun violence.
CONCLUSION

America has the highest rate of firearm suicide in the world; Americans are eight times more likely to die from firearm suicide than someone in any other industrialized country.\textsuperscript{75} While those in the United States are no more or less likely to be at risk for suicide than those in other countries, easy access to firearms in the U.S. is much more prevalent than in most developed nations. Finland — the developed country closest to the U.S. in firearm suicide rates — experiences half the rate of gun suicides that the U.S. does.\textsuperscript{76}

While firearms are not the most common means used in suicide attempts, they are by far the most lethal — and the most common method that results in death. Suicide is a complex, multifactored problem that warrants a range of prevention strategies. Easy access to a usable firearm is often the determining factor in death by suicide. By strengthening existing mechanisms like waiting periods and extreme risk laws, focusing on safe storage practices, and normalizing conversations about gun safety, a countless number of firearm suicide attempts can be avoided — and lives saved.
ENDNOTES


2. https://www.endfamilyfire.org/#gunSuicides


4. https://www.bradyunited.org/key-statistics


6. https://www.endfamilyfire.org/#gunSuicides


77. Name and identifying details have been changed for purposes of anonymity.


80. Yu B, Chen X. Age and Birth Cohort–Adjusted Rates of Suicide Mortality Among US Male and Female Youths Aged 10 to 19 Years From 1999 to 2017. JAMA Netw Open. 2019;2(9):


82. Name and identifying details have been changed for purposes of anonymity.

