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Testimony for: LD 52: AN ACT TO ALLOW CERTAIN SCHOOL EMPLOYEES TO CARRY FIREARMS ON SCHOOL PROPERTY and LD 518: AN ACT TO ALLOW ARMED SECURITY IN SCHOOLS and LD 1557: AN ACT TO INCREASE AND ENHANCE SCHOOL SAFETY BY ALLOWING INDIVIDUALS WITH CONCEALED CARRY PERMITS TO POSSESS HANDGUNS ON SCHOOL PROPERTY

Thank you to Senator Rafferty, Representative Brennan, and the members of the Education and Cultural Affairs Committee for the opportunity to share my written testimony. My name is Dr. Amy Buczkowski, and I am a hospital-based pediatrician that lives in Freeport, Maine. I represent the Maine Chapter of the American Academy of Pediatrics, and thus, represent a large network of pediatricians across the state of Maine. We stand in opposition to LD 52, LD 518, and LD 1557, as these bills threaten the safety of children in Maine schools.

Educators and pediatricians share a sacred duty to promote the safety and well-being of Maine children and to create environments that help them grow and develop to reach their full potential. When children feel safe in school, they learn more successfully, and young families are attracted to live and stay in Maine. I know with the current state of gun violence in the United States many of us are grappling with the correct course of action to increase safety in our schools. However, legislation, like LD 52, LD 518, and LD 1557, has no data to support its success in improving children's safety. Instead, increasing the presence of firearms on school property in any capacity poses a significant threat to the safety and mental well-being of children and educators.

As a pediatrician, I perform procedures regularly – spinal taps, blood draws, and more. In order to be able to perform these procedures successfully, I must do enough of them to remain competent and calm when these skills are called to action in serious or emergent situations. Alternatively, it would be unfair to ask me to perform brain surgery or mix medications in the pharmacy or provide security services in the hospital. These are simply not tasks that I am trained to do. Similarly, we can look to security in schools.

Educators, resource officers, and civilians are all experts in their own domains, but none of these roles are afforded enough education to be experts in emergency gun violence response. This is the expertise of law enforcement officials, who receive an average of 840 hours of basic training including 168 hours of training on weapons, self-defense, and the use of force¹. This is not possible to ensure for those outside of law enforcement, especially when their focus should be on the education of our children. When firearms are in schools, children can get access to them. Most children know where their parents store their firearms, and in fact, more than one third of those children reported handling their parents' firearms (many without the knowledge of their parents)².

It is unreasonable to expect that this will be different in the school setting, and many reports exist that suggest firearms in schools are just as accessible to children³. If children can gain access to firearms at school, then this increases the injury and mortality risk of serious assault, suicide attempts, or accidental injuries all of which are known to be more lethal with firearms involved. Alternatively, we have evidence to suggest that restriction of firearms on school property is protective for students. For example, federal laws that were passed in the 1990s that prohibited firearms within 1000 feet of school grounds were associated with decreases in school-associated student homicide rates⁴.

Parents and teachers agree with our stance. In a March 2018 survey of almost 500 U.S. teachers, 73% opposed proposals to arm school staff⁵, and another survey found that 63% of parents of K-12 school students oppose arming teachers⁶. Using what we know about firearm violence, our best chance of protecting Maine's children in schools are preventative, rather than reactive, approaches. These include policies that prevent shooters from gaining access to guns, protecting schools through trauma-informed threat assessment programs to identify and manage potential threats of violence, implementing basic security upgrades (access control measures and door locks), and planning in advance for emergencies⁷. Join Maine pediatricians in opposition to LD 52, LD 518, and LD 1557, as we believe these are counterproductive to and lack evidence that they improve the safety of Maine's children in schools.

Thank you for your consideration!

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