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American Academy of Pediatrics

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## Testimony for LD 2238 - An Act to Address Gun Violence in Maine by Requiring a Waiting Period for Certain Firearm Purchase

Good morning, Senator Carney, Representative Moonen, and Members of the Joint Standing Committee on Judiciary. My name is Dr. Jasmine Landry, and I am a resident physician working and living in Portland, Maine. I represent the Maine Chapter of the American Academy of Pediatrics, and I am testifying in support of LD 2224 and LD 2238.

I am in my third year of post-graduate training as a pediatrician. Despite being early in my career, I have witnessed direct consequences of gun violence in my own patients. I have taken care of children in the pediatric ICU after accidental and intentional gunshot wounds, and I have experienced their parents' devastation when they have not survived. I also take care of many children and young adults who have a history of significant personal trauma. These patients are at higher risk for death by suicide, and I am always worried about whether they have access to the most fatal means of attempting suicide: a firearm.<sup>i</sup>

LD 2238 requires a 72-hour waiting period between purchase of a firearm and delivery of the firearm to the buyer. Waiting period laws as proposed by this bill can introduce a safety buffer of time in between the decision to purchase a firearm and a potential act of violence. Suicide attempts are often impulsive: many survivors of suicide attempts contemplated their actions for less than 24 hours before acting.<sup>ii</sup> Yet this fleeting decision can be devastating – indeed, 89% of gun deaths in Maine are by suicide.<sup>iii</sup> I get to take care of teenagers, who, on occasion, can be emotional and impulsive. In 2021, there were 14 deaths by suicide among people under 25.<sup>iv</sup> We cannot stop teenagers from being impulsive, but we have the power to put safety measures in place to prevent suicide. Introducing a waiting period has been shown to reduce firearm deaths by suicide.<sup>v</sup>

Protecting our children from gun violence includes protecting their parents and families. Children who experience the death of a parent have higher rates of chronic illness, substance use, depression, and suicide.<sup>vi</sup> Exposure to gun violence even without death of a family member can lead to increased rates of depression, anxiety, and post-traumatic stress disorder.<sup>vii</sup> LD 2238 can reduce the frequency of impulsive violent acts that children are directly impacted by.

I ask you to help me care for and protect the children and young adults of Maine by voting for LD 2224 and LD 2238. Thank you for your consideration and work on this issue, and I am happy to answer any questions.

Jasmine Landry MD

Portland, ME

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<sup>i</sup> Azrael D and Miller M. “Reducing Suicide Without Affecting Underlying Mental Health: Theoretical Underpinnings and a Review of the Evidence Base Lining the Availability of Lethal Means and Suicide,” in Rory C. O’Connor and Jane Pirkis, eds., *The International Handbook of Suicide Prevention*, 2nd ed., Hoboken, N.J.: John Wiley and Sons, 2016.

<sup>ii</sup> Deisenhammer et al., “The Duration of the Suicidal Process: How Much Time is Left for Intervention Between Consideration and Accomplishment of a Suicide Attempt?,” *The Journal of Clinical Psychiatry* 70, no. 1 (2008)

<sup>iii</sup> Centers for Disease Control and Prevention, National Centers for Injury Prevention and Control. Web -based Injury Statistics Query and Reporting System (WISQARS) (2021). Available at: [www.cdc.gov/injury/wisqars](http://www.cdc.gov/injury/wisqars)

<sup>iv</sup> Centers for Disease Control and Prevention, National Centers for Injury Prevention and Control. Web -based Injury Statistics Query and Reporting System (WISQARS) (2021). Available at: [www.cdc.gov/injury/wisqars](http://www.cdc.gov/injury/wisqars)

<sup>v</sup> Luca M, Malhotra D, Poliquin C. “Handgun Waiting Periods Reduce Gun Deaths,” *Proceedings of the National Academy of Sciences*, Vol. 114, No. 46, 2017, pp. 12162 –12165.

<sup>vi</sup> Balistreri KS, Alvira-Hammond M. Adverse childhood experiences, family functioning and adolescent health and emotional well-being. *Public Health*. 2016 Mar;132:72-8. doi: 10.1016/j.puhe.2015.10.034. Epub 2015 Dec 22. PMID: 26718424; PMCID: PMC4798868.

<sup>vii</sup> Holloway K, Cahill G, Tieu T, Njoroge W. Reviewing the Literature on the Impact of Gun Violence on Early Childhood Development. *Curr Psychiatry Rep*. 2023 Jul;25(7):273-281. doi: 10.1007/s11920-023-01428-6. Epub 2023 May 26. PMID: 37233973; PMCID: PMC10213564.

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LD 2238

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