

## TESTIMONY IN SUPPORT OF

LD 2224

An Act to Strengthen Public Safety by Improving Maine's Firearm Laws and Mental Health System  
and

LD 2238

An Act to Address Gun Violence in Maine by Requiring a Waiting Period for Certain Firearm Purchases

Good afternoon Senator Carney, Representative Moonen, and Members of the Joint Standing Committee on Judiciary. My name is Austin Vaughan, and I am a third year medical student at the University of New England College of Osteopathic Medicine. I am submitting this testimony in support of LD2224 and LD2238.

For most of human history, disease was the number one cause of child mortality in the United States. In the 1960s, that unfortunate top spot was overtaken by motor vehicle accidents, where it remained until a few years ago... when the CDC released data showing that as of 2020, the number one cause of death in children and adolescents in the United States is guns<sup>1</sup>. More than 1 in every 17,000 U.S citizens under the age of 20 died in 2021 from a firearm<sup>2</sup>. For reference, in only one other comparable country is gun-related deaths in the top five cause of child and teen mortality – Canada, where it is ranked number 5. Canada had 48 deaths. The United States had 4,733.<sup>2</sup>

But there's data that shows common sense gun laws, including mandatory waiting periods like those suggested by LD 2238, can help! One Harvard study demonstrated a 17% drop in gun-related homicides and a 7-11% drop in gun-related suicides by imposing a mandatory waiting period.<sup>3</sup> And that makes sense, when the data we have clearly shows that states with more permissive gun laws (or lack thereof) have a significantly higher rate of mass shootings.<sup>4</sup>

LD2224 also offers meaningful changes in streamlining the current process for both mental health professionals and law enforcement in evaluating someone in crisis, but these areas in our state are still lacking in resources to be able to guarantee crucial intervention in pivotal moments. We need to pass additional legislation that empowers families and friends who know their loved ones best to have a more direct avenue in removing those people in crisis from harm's way.

One of my friends asked how I've had the energy to show up here in the sparse free time allotted outside of medical training, but this IS part of my training. The obligation of health professionals to the wellbeing of their patients extends beyond the exam room. And so I advocate here – not just as a future pediatrician who wants to protect children from being shot, but from the adverse health outcomes that we KNOW affect the children who have lost a family member, witnessed an act of gun violence, or simply live in the perpetual fear that exists in our schools. I don't know of anyone who believes these bills alone will solve the problem of gun violence in our country. But it's reasonable enough to think that they would

at the very least save the life of one child, one parent, or one friend. And shouldn't that be enough?

I've spent the last three years of my life studying medicine, with the sole mission of using that knowledge to help children live healthier lives for years to come. Nothing can deter me from that goal. But I would be lying if I didn't say it's hard to swallow that the number one cause of death in children here in the U.S. is something that no stethoscope or scalpel can fix. It's up to **all of us** to create a world safe enough for our children to live full, confident lives – unburdened by the fear that their town, their school, or their family may be the next one in danger.

So please, let's take a step toward that world together by passing LD 2224 and LD 2238. Thank you for your time.

Austin Vaughan

1. <https://www.nejm.org/doi/full/10.1056/nejmc2201761>
2. <https://www.kff.org/global-health-policy/issue-brief/child-and-teen-firearm-mortality-in-the-u-s-and-peer-countries/>
3. <https://www.pnas.org/doi/10.1073/pnas.1619896114>
4. <https://www.bmj.com/content/364/bmj.l542>