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LD 2283 An Act to Enact the Crisis Intervention Order Act to Protect the Safety of the Public

Honorable Senator Carney, Representative Moonen and Members of the Judiciary Committee, I am a Portland resident, a pediatrician, a concerned citizen and a mother. I am testifying today on behalf of Maine Health and the Maine Chapter of the American Academy of Pediatrics to request your support for LD 2283. I have previously testified in support of LD 2238 the waiting period bill and would like to thank the committee for voting ought to pass on that bill.

This is a measure to protect Maine's public health. There is evidence from other states that similar laws reduce both firearm homicides and firearm suicides. The latter is a particular concern in Maine as we have an excess of suicides based on population size. The suicide rate in Maine has also been increasing at a rate higher than the national average. While more can undoubtedly be done to help reduce suicides in Maine, this legislation is an important step.

I also support this bill for personal reasons. On March 24, 2019 my nephew James, a bright 21-year-old college junior used his second legally purchased firearm in a firearm suicide. He was under the treatment of a psychiatrist and his family and friends were aware that he was contemplating suicide. They did everything they could to prevent his death including confiscating the first firearm that he had legally purchased. However, there was not a mechanism to prevent him from purchasing another firearm. I think of his death almost daily and often wonder if he would still be with us if a crisis intervention law was in effect where he was living.

You may wonder if someone who is determined to die by suicide will substitute one means for another if their planned method of suicide becomes inaccessible. There is evidence from states with similar laws and for waiting periods between purchase and delivery of a firearm that this is not the case. This is also the case when other means of dying by suicide are examined.


You may also wonder if we can trust the courts to appropriately weigh evidence when determining if firearms should be removed from an individual. I would argue that we already do this with something infinitely more precious: our children. In my more than 20 years as a pediatrician I have worked with the Department of Health and Human Services, the Judiciary, and police officers regarding concerns for child abuse at least 100 times. We trust this system to adjudicate if a child is endangered by his or her caregivers or to determine if false reports of child endangerment are being made with malicious intent. If we trust these offices and these processes to prevent dangerous parents access to their children, how can we not trust this process to restrict dangerous individuals from having access to firearms?

Maine Health and the Maine Chapter of the American Academy of Pediatrics supports LD 2283 and urges the committee to vote to pass on the bill as referred.

Kristine M. Pleacher, MD

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