Maine Chapter

INCORPORATED IN MAINE

American Academy of Pediatrics



Executive Committee

President Deborah Hagler, MD, FAAP

Vice President Laura Blaisdell, MD, MPH, FAAP

Treasurer Christopher Motyl, DO, FAAP

Secretary Genevieve Whiting, MD, FAAP

Past President Janice Pelletier, MD, FAAP

Board of Directors

Amy Buczkowski, MD, FAAP Melissa Burch, MD, FAAP Adrienne Carmack, MD, FAAP Gabriel Civiello, MD, FAAP Anne Coates, MD, FAAP Elizabeth Fischman** Dan Hale, MD, FAAP Jennifer Jewell, MD, MS, FAAP Stephanie Joy, MD, FAAP Emily Keller, MD, FAAP Alton Kremer, MD, PhD, FAAP Michele Labotz, MD, FAAP Thomas LaJoie** Lawrence Losey, MD, FAAP Valerie O'Hara, DO, FAAP Maria Rutmann, MD, FAAP Sydney Sewall MD, MPH, FAAP Mary Tedesco-Schneck, PhD, NP Andrea Tracy, MD, FAAP Aaron Wallace, MD* Robin Wolschendorf, MD* Brian Youth, MD, FAAP

*Resident Board Representatives **Medical Student Representatives

Chapter Executive Director Dee Kerry dakerry@aap.net

30 Association Drive, Box 190 Manchester, ME 04351 office: 207-480-4185

www.maineaap.org Twitter: @MaineAAP

Testimony of The Maine Chapter of the American Academy of Pediatrics in

Favor of LD 759, An Act to Amend the Child Endangerment Laws to Include

Certain Unauthorized Access to a Loaded Firearm

Good morning Senator Deschambault and Representative Warren and members of the Criminal Justice and Public Safety Committee. My name is Deborah Hagler . I reside in Harpswell. I have been a practicing pediatrician in Maine for 24 years. I attended Cornell Medical College; completed my pediatrics training at the Children's Hospital of Philadelphia and will graduate next month with a Master of Public Health from Johns Hopkins University focusing on public health approaches to youth mental health. I am currently the President of the Maine Chapter of the American Academy of Pediatrics.

Despite significantly higher spending on healthcare, our children have an almost 6 in

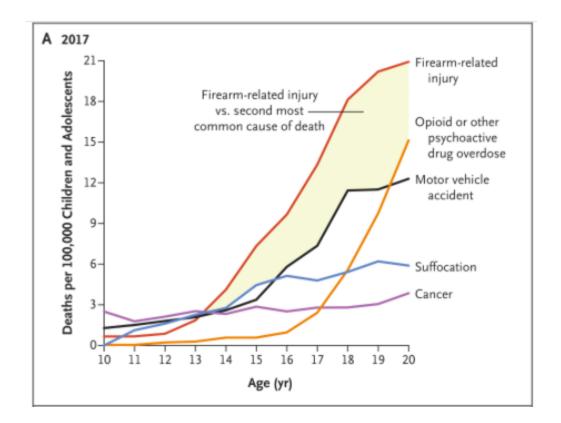
10 chance of dying before the age of 19 compared to children in other developed

nations because of firearm injuries.¹ In other words, because of gun related injuries,

accidents, suicide and homicide, child and adolescent mortality in the US exceeds that

other developed nations. Firearm injuries have become the leading cause of death for

youth between the ages of 14 and $20.^2$



 $Figure \ 1. \ Bandara \ NA, \ Jhauj \ R, \ Mehrnoush \ V. \ The \ Major \ Causes of \ Death \ in \ Children. \ N \ Engl \ J \ Med. \ 2019 \ Apr \ 4;380(14):1384-1385. \ doi: \ 10.1056/NEJMc1901264. \ PMID: \ 30943360.$

The real life data should be convincing enough that efforts to hide loaded firearms or teach our children to stay away from firearms in the home have not been adequate.

Kids are curious . In a famous study conducted by emergency physicians from Emory, 64 boys ages 8-12 divided into 29 groups and observed through a two way mirror in a room where 3 guns were hidden - 2 brightly colored squirt guns and one .38 semi-automatic dismantled handgun with a sensor that indicated when the trigger depressed.

Parents had, prior to room entry been surveyed as to whether their children had been educated about guns and whether they seemed interested in guns. 75% of the boys found the handgun. 50% who found the real gun were not sure if the real gun was real or fake. 50% who found the gun pulled the trigger. Parent's assessment of interest did not correlate with who pulled the trigger; prior gun safety instruction did not deter pulling of trigger. Only one boy prevented the others in his group from touching the real gun and left the room to get an adult and he was teased a great deal by his peers.³ A study published this month in Pediatrics surveyed just over 46,000 high school students in Colorado and found that 1 in 5 had "sorta "or "very easy" access to a handgun and those that were depressed, had been in a fight, or who had attempted suicide reported easier access.⁴

And that brings me to this past year. We are just beginning to manage the wave of mental illness heading our way as fallout from the Covid 19 pandemic and kids had been struggling even before its onset, with rates of depression doubling among adolescents in the past decade ⁵ and Maine reporting the highest rates of mental illness among youth in the country.⁶

While kids have not been the face of the pandemic, they have suffered big losses in time spent with friends, extended family, in school, in activities, and many have been severely affected by economic hardships that their families have faced. I have spent my time this past year using telehealth to give parents and adolescents space to process this complex, sustained grief and seen that it has sent many spiraling into deep depression. Teens have opened up about their despair, sharing hopelessness, and often very detailed plans regarding suicide including research they had done about using firearms. For some this has led to hospitalization and very tearful discussions with families.

LD 759 asks firearm owners to make reasonable efforts to keep firearms stored safely and out of children and teens hands. Reducing the access to means reduces suicide deaths. Other states that have legislation that ensures safe firearm storage have seen decreases in their teen suicide rates.⁷

Adolescents experience their feelings deeply and passionately and they are impulsive. But they are amazingly resilient. Maine and our country have a great deal of healing and recovery from the tragedy of the pandemic and its fallout. LD759 is one step to keeping our young people safe and allowing this process to unfold.

References:

^{1.} Thakrar AP, Forrest AD, Maltenfort MG, Forrest CB. Child Mortality In The US And 19 OECD Comparator Nations: A 50-Year Time-Trend Analysis. Health Aff (Millwood). 2018 Jan;37(1):140-149. doi: 10.1377/hlthaff.2017.0767. PMID: 29309221.

2. Bandara NA, Jhauj R, Mehrnoush V. The Major Causes of Death in Children. N Engl J Med. 2019 Apr 4;380(14):1384-1385. doi: 10.1056/NEJMc1901264. PMID: 30943360.

3 Seeing Is Believing: What Do Boys Do When They Find a Real Gun? Geoffrey A. Jackman, Mirna M. Farah, Arthur L. Kellermann, Harold K. Simon Pediatrics June 2001, 107 (6) 1247-1250; DOI: 10.1542/peds.107.6.1247

4.Webster DW, Vernick JS, Zeoli AM, Manganello JA. Association between youth-focused firearm laws and youth suicides. JAMA. 2004 Aug 4;292(5):594-601. doi: 10.1001/jama.292.5.594. Erratum in: JAMA. 2004 Sep 8;292(10):1178. PMID: 15292085.

5.Webster DW, Vernick JS, Zeoli AM, Manganello JA. Association between youth-focused firearm laws and youth suicides. JAMA. 2004 Aug 4;292(5):594-601. doi: 10.1001/jama.292.5.594. Erratum in: JAMA. 2004 Sep 8;292(10):1178. PMID: 15292085.

6.Whitney DG, Peterson MD. US National and State-Level Prevalence of Mental Health Disorders and Disparities of Mental Health Care Use in Children. JAMA Pediatr. 2019 Apr 1;173(4):389-391. doi: 10.1001/jamapediatrics.2018.5399. PMID: 30742204; PMCID: PMC6450272.

7.Webster DW, Vernick JS, Zeoli AM, Manganello JA. Association between youth-focused firearm laws and youth suicides. JAMA. 2004 Aug 4;292(5):594-601. doi: 10.1001/jama.292.5.594. Erratum in: JAMA. 2004 Sep 8;292(10):1178. PMID: 15292085.

FYI: Campion EW. The Problem for Children in America. N Engl J Med. 2018 Dec 20;379(25):2466-2467. doi: 10.1056/NEJMe1814600. PMID: 30575478.