FIREARM SUICIDE IN THE UNITED STATES

Mikey, a 13-year-old boy from upstate New York, was friendly and engaged. One day in January, he shot and killed himself with one of his father’s guns. Mikey’s suicide came as a shock. “He may have gotten angry for some reason. At that age you’re not thinking how final a gun is.”

ALEXANDRIA BODDEN, MIKEY’S OLDER SISTER AND GUN VIOLENCE PREVENTION ADVOCATE

INTRODUCTION

Claiming the lives of over 22,000 Americans every year, including over 1,000 children and teens, firearm suicide is a significant public health crisis in the US. Nearly two-thirds of all gun deaths in the US are suicides, resulting in an average of 61 deaths a day. And the problem is getting worse: Over the past decade, the US firearm suicide rate has increased by 19 percent. This trend has been of particular concern for children and teens, whose firearm suicide rate has increased by 82 percent over the past 10 years; and for veterans, who have a firearm suicide rate 1.5 times higher than non-veteran adults.

In a recent poll, 16 percent of respondents—or roughly 40 million American adults—reported that someone they care for attempted or died by suicide with a gun. Addressing firearm suicide is an essential element of any strategy to reduce gun violence in this country. Given the unique lethality of firearms as a means of suicide, policies and practices that limit or disrupt access to firearms have been shown to save lives.

FIREARM SUICIDE MAKES UP...

2/3 OF ALL GUN DEATHS.

1/2 OF ALL SUICIDES.

KEY FINDINGS

The US firearm suicide rate is 10 times that of other high-income countries. Americans should be aware of the prevalence of firearm suicide, how having access to a gun increases the risk of suicide, and steps they can take to mitigate risk. A review and statistical analysis of 14 different scientific studies concluded that having access to a firearm triples one’s risk of death by suicide. This elevated risk applies not only to the gun owner, but to everyone in the household. People who live in US states with high rates of household gun ownership are also almost four times more likely to die by gun suicide than those in states where fewer households have guns. This relationship remains strong even when controlling for other factors associated with suicide, like poverty, unemployment, serious mental illness, and substance abuse.

While firearms are used in less than six percent of suicide attempts, over half of suicide deaths are with firearms. There is a popular misconception that suicide is inevitable, that suicidal ideation is a permanent condition. But most people who attempt suicide do not die—unless they use a gun. Across all suicide attempts not involving a firearm, less than 5 percent will result in death.
But for gun suicide, those statistics are flipped: Approximately 85 percent of gun suicide attempts end in death. And the vast majority of all those who survive a suicide attempt do not go on to die by suicide. This suggests that a reduction in suicide attempts by firearm would result in an overall decline in the suicide rate.

Firearm suicides follow sharply divergent demographic patterns.
Men, white Americans, and those living in rural areas are disproportionately affected. Men represent 86 percent of firearm suicide victims; they are six times more likely than women to die by firearm suicide. For men, firearm suicide rates largely increase with age, and are especially high for males 65 and older. For women, firearm suicide rates are highest in the 40-to-60 age range.

White Americans represent 87 percent of all firearm suicide victims, and have the highest rate of firearm suicide by race. American Indians/Alaska Natives also have a disproportionately high rate of firearm suicide, with the second-highest rate of firearm suicide among the country's five major racial and ethnic groups.

Americans living in rural areas experience far higher rates of firearm suicide than those living in urban areas. The average firearm suicide rate increases as counties become more rural, and the rate of firearm suicide in the most rural counties is 58 percent higher than in the most urban.

**RECOMMENDATIONS**

Policies and practices that focus on disrupting access to firearms can reduce firearm suicides. These include:

**Building public awareness about the suicide risk posed by firearm access.**
Most gun-owning Americans think their firearms make them safer. The reality is that access to a firearm increases the risk of suicide for all people in the household. In the absence of public health campaigns led by the federal government, trusted experts like law enforcement, gun dealers, and medical professionals have all launched campaigns that help inform Americans about the risks of firearms in the home and how to mitigate those risks. For example, through a program called the Gun Shop Project, dozens of gun shops nationwide have begun displaying and distributing materials with information about the risks of firearm access—particularly as it pertains to suicide.

Physicians and other medical professionals are also crucial sources of information about the risk of firearm access. By asking their patients about firearm access and counseling about firearm suicide risk, medical professionals may help prevent these deaths. Counseling on Access to Lethal Means, or CALM, is one example of a program that trains medical professionals on how to explain the differing lethality of various suicide methods and to “help clients at risk for suicide and their families reduce access to lethal means, particularly firearms.”

**Limiting the easy and immediate acquisition of firearms.**
Policies and practices that disrupt the easy and immediate acquisition of firearms have been shown to save lives. States with permit-to-purchase (PTP) laws, which require an individual to obtain a permit in addition to a background check when buying a handgun, see reductions in firearm suicide. Connecticut's enactment of PTP and comprehensive point-of-sale background check laws were associated with a 15 percent decline in the firearm suicide rate over the following decade. By contrast, when Missouri repealed its PTP law, the state experienced a 16 percent increase in the firearm suicide rate over the following five years.

A mandatory waiting period may also help prevent firearm suicides. A waiting-period law requires a certain number of days to elapse between the purchase of a firearm and when the purchaser can actually take possession of that firearm. Policies that create this buffer are associated with reduced rates of firearm suicide.
Encouraging the secure storage of firearms in the home to prevent access by children and other unauthorized users.

Secure firearm storage can help mitigate the risks of firearm suicide, especially for children. Approximately 4.6 million American children live in households with at least one loaded, unlocked firearm. When American children die by firearm suicide, over 80 percent use a gun belonging to a family member. One study found that households that locked both firearms and ammunition were associated with a 78 percent lower risk of self-inflicted firearm injuries and an 85 percent lower risk of unintentional firearm injuries among children, compared to those that locked neither. And researchers estimate that if half of households that store at least one unlocked gun moved to lock all of their guns, 251 youth fatalities from firearm suicide and unintentional shootings could be prevented in a single year. These lives saved would make up one-third of all preventable youth deaths from firearm suicide and unintentional shootings that year.

Many cities and states have laws that require or encourage secure storage. Six states and the District of Columbia have passed laws mandating that owners securely store their firearms. And 14 states have passed Child Access Prevention (CAP) laws, which impose criminal penalties when a person fails to securely store a firearm and a child gains unauthorized access to it. States with laws mandating secure storage or with CAP laws saw an 8 percent decrease in overall suicide rates and an 11 percent decrease in firearm suicide rates among adolescents aged 14 to 17.

Creating mechanisms to temporarily remove firearms from individuals in moments of crisis.

To protect individuals in crisis, several states have passed Extreme Risk laws as a way to temporarily remove firearm access. Extreme Risk laws give family members and law enforcement a way to intervene before warning signs escalate into tragedies. These laws permit immediate family members and law enforcement to petition a court for an order to temporarily remove guns from dangerous situations. If a court finds that a person poses a serious risk of injuring themselves or others with a firearm, that person is temporarily prohibited from purchasing and possessing guns, and any guns they already own are held by law enforcement or another authorized party while the order is in effect. At the time of publication, 17 states and DC have Extreme Risk laws in place.

The National Suicide Prevention Lifeline is a national network of local crisis centers that provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. Text TALK to 741741 from anywhere in the US, anytime, about any type of crisis.

For more information on secure storage of firearms and how you can help others improve their storage practices, visit besmartforkids.org.

2. Ibid. A yearly average was developed using five years of most recent available data: 2013 to 2017.

3. Ibid. Firearm suicide to total suicide ratio and daily average developed using five years of most recent available data: 2013 to 2017.

4. Ibid. A percent change was developed using 2008 to 2017 age-adjusted rates for all ages.

5. Ibid. A percent change was developed using 2007 to 2016 crude rates for children and teens (0 to 19).


17. Ibid. A yearly average was developed using five years of most recent available data: 2013 to 2017.

18. Ibid. A yearly average was developed using five years of most recent available data: 2013 to 2017.

19. Ibid. Racial and ethnic breakdowns developed using five years of most recent available data: 2013 to 2017. White defined as non-Hispanic white.

20. Ibid. Racial and ethnic breakdowns developed using five years of most recent available data: 2013 to 2017.

21. Centers for Disease Control and Prevention. National Center for Health Statistics. Wide-ranging Online Data for Epidemiologic Research (WONDER) Underlying Cause of Death: A yearly average of each CDC classified urbanization level was developed using five years of most recent available data: 2013 to 2017.

22. Ibid. A yearly average was developed using five years of most recent available data: 2013 to 2017. County urbanization levels given by CDC; Centers for Disease Control and Prevention. 2013 NCHS Urban-Rural Classification Scheme for Counties. April 2014.

23. Centers for Disease Control and Prevention. National Center for Health Statistics. Wide-ranging Online Data for Epidemiologic Research (WONDER) Underlying Cause of Death: A yearly average was developed using five years of most recent available data: 2013 to 2017.


28. Federal law requires criminal background checks for all guns purchased from a licensed firearms dealer and does not cover any sales by unlicensed sellers. A total of 20 states (and Washington, DC) have closed that critical gap for handguns. Seven of those states require the check only pursuant to a purchase permitting process, nine require a background check only at the point of purchase, and four require background checks both in order to obtain a permit and also at the point of sale. Cifasik CK, Meyers JS, Vernick JS, Webster DW. Effects of changes in permit-to-purchase handgun laws in Connecticut and Missouri on suicide rates. Preventive Medicine. 2015;79:43–49.

29. Ibid.

30. Ibid.