

Firearm Suicide

Key Facts:

- Firearm suicide is a public health crisis.¹ More than 24,000 individuals in the United States died by firearm suicide in 2018²; the rate of firearm suicide in the United States is 10 times higher than that of other high-income countries.^{1,3} In Minnesota, there were 356 firearm suicides in 2018, or nearly one per day.⁴ This amounts to 82% of firearm deaths being attributable to suicide in Minnesota.² Firearm suicide rates have been increasing: between 2009 and 2018, the age-adjusted firearm suicide rate increased by 19% in the United States and by 24% in Minnesota.²
- White males are at increased risk of firearm suicide, both nationally⁵ and in our state.⁴ Thus, in 2018, 87% of firearm suicides in Minnesota were among non-Hispanic white males.² In the United States, firearm suicide rates among this demographic group increase with age starting in adolescence, with a particularly sharp rise after the age of 70.⁵ Likewise, in Minnesota among this demographic group, the highest firearm suicide rates are observed among those over the age of 75.²
- In the United States, the case-fatality rate of suicidal acts overall is less than 10%, whereas the case-fatality rate of suicidal acts with a firearm is nearly 90%.⁶ (Thus, firearms are used in less than 5% of all suicide attempts but in more than 50% of fatal suicide attempts.⁶) Suicidal crises are often self-limiting, suicide attempts are often impulsive acts, and the vast majority (90%) of those who survive a such an attempt do not subsequently die by suicide.^{7,8} It thus stands to reason that reducing access to the most lethal method of self-injury among individuals in suicidal crisis is very likely to save lives.⁷ Indeed, the public health research bears this out: For example, in a summary analysis (meta-analysis) of 14 epidemiologic studies, the presence of guns in the home was found to be associated with a three-fold increase in the risk of suicide.⁹ Individuals living in US states with high gun ownership levels have a higher risk of suicide (and specifically firearm suicide) than those living in states with low gun ownership levels, even after controlling for other factors such as mental illness and drug and alcohol abuse.¹⁰
- All firearms within a home should be stored locked and unloaded, and ammunition should be stored and locked separately.^{8,11} Studies indicate that these practices reduce the risk of firearm suicide.⁸ For

individuals at increased risk of suicide, offsite storage of firearms may be the safest approach.¹¹ There are many resources available that present options for storage, both within and outside the home.¹¹

- Several types of gun policies can play an important role in reducing firearm suicide rates. Regarding criminal background check policy, implementation of a permit-to-purchase law in Connecticut was associated with a 15% reduction in firearm suicide rates, whereas repeal of Missouri's permit-to-purchase law was associated with a 16% increase.¹² Extreme risk laws provide a mechanism for appropriate parties to petition a court to temporarily limit firearm access among individuals who pose a risk to themselves or others. Studies from Connecticut and Indiana suggest that extreme risk laws reduce firearm suicide rates.¹³⁻¹⁵ Other gun policies that have been found to be associated with reductions in the risk of firearm suicide include waiting periods and child access prevention laws.¹⁶ **It is essential that Minnesota pass measures such as the criminal background check bill and the extreme risk protection order bill.**
- In addition to legislative approaches, other solutions are also worthy of consideration. One example is the Gun Shop Project that encourages gun shop and firing range owners to share suicide prevention information with customers and provides guidance as to how to avoid selling or renting guns to those who are potentially suicidal.¹⁷ The project started in New Hampshire, where half of gun shops there are now disseminating project materials.
- Additionally, it is important for health professionals such as primary care providers and emergency department physicians to educate patients about the connection between firearms and suicide and to screen for access to firearms in the home.⁸ Based on available data, such interventions are effective in terms of reducing access to firearms among those at risk.⁸ There are [handouts](#) and other resources available to help health professionals counsel their patients about firearms.¹⁸

If you or someone else is considering suicide, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255), which is free and confidential.

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