The North Carolina Child Fatality Prevention Team (State Team) is making the following recommendations to the Child Fatality Task Force.

**Problem – Access to Lethal Means:**
Between August 19, 2015 and August 17, 2016, the State Team reviewed approximately 44 cases, each of the suicide deaths contained specific information that indicated a correlation between access to lethal means, a majority involved access to firearms and/or lack of safe storage and child death by suicide. This trend has been true over time in prior years of team reviews and included in reports to the task force. The recurrence of these types of fatalities is concerning and as a result, the State Team is seeking ways to address access to means related to child deaths by suicide.

**Recommendation: Implement a Statewide Suicide Prevention Access to Means Awareness Plan** at a population level to reduce access to means of suicide in order to decrease child deaths.

Means restriction is one of the essential components of a comprehensive approach to suicide prevention. Many front-line professionals will tell you that they did not learn how to ask questions or how to take time to counsel on access to means without fear or cultural bias as a part of suicide prevention or safety planning. Many parents/guardians, youth and community members at large are looking for information on safety education and safety planning. Effective awareness education provides tools for prevention. Two key components are recommended.

**Level of Action:** funding for pilot of CALM training and evaluation, funding for safe storage education campaign, agency collaboration, future agency policy change

**Component #1** Implement a consistent evidence informed statewide provider education on *Counseling on Access to Means (CALM)* in order to reduce child access to lethal means, including firearms, medications, and methods of asphyxiation.

- **CALM – Counseling on Access to Means**
  - As a result of CALM training, providers will utilize best practices to engage in counseling with individuals and families that promotes safe messaging, self-care and safety planning related to access to means and suicide prevention.
  - CALM is a 2 hour course that teaches practitioners how to ask those at risk for suicide or those who have attempted suicide about their access to lethal means, and work with them and their families to reduce their access. This is an essential part of safety and crisis prevention planning. This counseling is not anti-gun or anti-medication. The training course qualifies for continuing education units.
  - CALM is intended for anyone. It is designed especially for providers who counsel people at risk for suicide, primarily mental health and medical providers, but also clergy and social service providers.
  - Of note, an individual who went through the training stated, “What I did not know about suicide now frightens me. And how much I learned empowers me,”
**Action Recommended:**

- Support/fund the implementation of a CALM training pilot, evaluation and expanded implementation.
  - Consult with NC qualified CALM trainers and follow implementation in western NC counties (Appalachian State University – Dr. Kurt Daniels, Dr. J.P. Jameson)
  - Costs are not known at this time.
  - Evaluation to inform future policy change.
- Support and promote access to direct in person training by a qualified CALM Trainer or access to online training offered through the SPRC ([http://www.sprc.org/resources-programs/calm-counseling-access-lethal-mean](http://www.sprc.org/resources-programs/calm-counseling-access-lethal-mean))
- Support and promote health care providers, especially pediatricians regarding unlocked firearms in home, [http://askingsaveskids.org/](http://askingsaveskids.org/)

**Component #2): Implement consistent education on safe storage of firearms**

- **Access to Means Awareness and Safe Storage Campaign**

**Action Recommended:**

- Establish a stakeholder group to:
  - Update and develop communication tools and mechanisms for broad intentional dissemination statewide. I.e. include safe messaging, use of social media and communities (e.g. local community prevention and child fatality teams, prevention coalitions and education events, e.g. SafeKids and related injury prevention events, PTAs, faith communities and through individual child and family health care encounters.)
  - Develop implementation plan and budget for intentional dissemination and evaluation of campaign strategies.
    - Consult with suicide prevention and CALM subject matter experts, SafeKids at the state and community level
    - Costs are not known at this time.
    - Evaluation to inform future policy change.

**Evidence to Support:**

- Addresses implementation of both the National and State Suicide Prevention Plan Objective6.1 – Encourage providers who interact with individuals at risk for suicide to routinely assess for access to lethal means. (Surgeon General, 2012; DHHS, 2015).
- A number of factors may influence an individual’s decision regarding method in a suicide act, but following substantial academic research both nationally and internationally there is
now evidence that clearly demonstrates that having quick access to a lethal means of dying during a time of a suicidal crisis will increase the chance of death by suicide. If the means are not easily accessible the chance of living through a suicidal crisis increases substantially because it allows time for a person to reflect. Reducing access to means should be a key part of all suicide prevention strategies (Hawton et al 2007).

- An excerpt from the “Mean’s Matter” report which mirrors the findings of the many studies to date since the 1990’s suggests the following:
  - Many suicide attempts occur with little planning during a short-term crisis.
  - Intent isn’t all that determines whether an attempter lives or dies; means also matter.
  - 90% of attempters who survive do NOT go on to die by suicide later.
  - Access to firearms is a risk factor for suicide.
  - Firearms used in youth suicide usually belong to a parent.
  - Reducing access to lethal means saves lives.
  - Most efforts to prevent suicide focus on why people take their lives. But as we understand more about who attempts suicide and when and where and why, it becomes increasingly clear that how a person attempts—the means they use—plays a key role in whether they live or die. (https://www.hsph.harvard.edu/means-matter/)

- The World Health Organization strongly recommends that there should be collaboration to implement interventions at the population level to reduce access to means of suicide in order to decrease deaths, (http://www.who.int/mental_health/mhgap/evidence/suicide/q7/en/).

- In 2015, Colorado implemented CALM in the Children’s Hospital of Colorado, evaluation of the pilot resulted in all social workers, mental health staff and psychiatric emergency department reported that the training was useful, the protocol improved their practice. Of those parents/guardians who received the means restrictions counseling, 90% reported it was respectful and clear, and enough time to ask questions; very few reported unlocked firearms were in their homes and most reported medications were locked. Studies are pending publication at this time.

Supporters and Stakeholders:
- Further supports harm reduction initiatives and safe storage education in the state that the Child Fatality Task Force has promoted.
- National Rifle Association (NRA)
- National Alliance on Mental Illness (NAMI in NC) state and local affiliates
- NC Families United
- NC Youth M.O.V.E. (Motivating Other Voices of Experience)
- SafeKids
- Local Mental Health Associations (MHA)
- State and not for profit organizations such as the American Foundation of Suicide Prevention (AFSP) are recommending that action is taken in this area with regards to
inclusive education for health providers, schools and families. This includes gun safety education.

- Nationally and in NC, the American Foundation for Suicide Prevention is making “Access to Means” a funded and key initiative for 2017. The AFSP are collaborating with the Veterans Administration and other groups to advocate for restriction to means policy and to ensure that they remain Bipartisan with regards to these issues which can be sensitive.
- The Veterans Administration is very concerned about access to means and distributes free gun locks statewide and provides safe storage education. Active military & National Guard.
- Broad stakeholder community organizations reaching all generations. For example, grandparents might have pharmaceuticals that are not locked away and/or a firearm which is not locked – by educating on safe storage we are reducing the risk of a suicide in a crisis.

**Experts to Consult: North Carolina contacts:**

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**Supplemental Information and Sources:**

- [http://www.yspp.org/about_suicide/means_restriction.htm](http://www.yspp.org/about_suicide/means_restriction.htm)
- [http://www.sprc.org/resources-programs/calm-counseling-access-lethal-means](http://www.sprc.org/resources-programs/calm-counseling-access-lethal-means)
