

**RE: Support HB 736 for law enforcement suicide prevention
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Chairman Clippinger and Committee Members:

Thank you for the opportunity to share testimony in support of HB 736 which would require each law enforcement agency to develop and implement an employee assistance program to provide all employed police officers with access to confidential low- or no-cost mental health services, including crisis counseling, stress management counseling, mental health evaluations, and peer support services. My name is Kat Olbrich and I am the Maryland Area Director for the American Foundation for Suicide Prevention (AFSP). It is the foundation's mission to save lives and bring hope to those affected by suicide -- through research, education, advocacy, and support.

Suicide is a leading, preventable public health problem in our state. In Maryland, suicide is the 3rd leading cause of death for youth and young adults ages 15-34, the 4th leading cause for adults ages 35-44, the 5th leading cause for adults ages 45-54, the 9th leading cause for adults ages 55-64, and the 11th leading cause of death overall. In 2018, we lost 650 Maryland residents to suicide.

Our law enforcement officers are often on the front lines when a neighbor is in crisis, but in fact they are at increased risk for suicidal behavior themselves. Research has highlighted the link between PTSD and suicide among first responders, and police officers are more likely to die by suicide than in the line of duty. In the United States in 2017, there were at least 140 police officer suicides. In contrast, 129 police officers died in the line of duty.

Research has shown that members of law enforcement and other first responders are at elevated risk for suicide. They often experience occupational hazards and stressors on the job, such as traumatic events and shift work, that can in turn increase risk for suicidal behavior or exacerbate existing risk for suicide related to other factors. In addition, law enforcement officers and other first responders tend to work within a culture that discourages showing signs of weakness, which can contribute to a reluctance to seek help or self-disclose mental health concerns or suicidal thoughts. We owe it to them to support a change in this culture, where it is a sign of strength to seek help and where officers are supported in mental health just as they are in other aspects of health.

Suicide can be prevented through early detection of officers who may be in crisis or struggling with their mental health and by connecting those officers to resources and treatment services. I urge you to support HB 736 to ensure that all law enforcement departments have the tools to effectively prevent officer suicide. There is no single cause of suicide, but by treating and preventing mental health conditions, addressing access to lethal means, and empowering our law enforcement officers to live and thrive in their communities, we can save lives.

Committee members, the AFSP Maryland Chapter is grateful for your consideration of HB 736 and for working with your colleagues and other agencies to address the suicide rate among our law enforcement population. We all have a role to play in preventing suicide, and with your support, passage of this legislation will affirm the state's commitment to improving the lives of Maryland's police officers and their loved ones and to prevent the tragic loss of life to suicide in the future. Please feel free to contact me at kolbrich@afsp.org or 202-770-8973 with any questions or if you would like additional information.

Centers for Disease Control and Prevention. (2020). National Center for Injury Prevention and Control: WONDER Underlying Cause of Death, 1999-2018. Retrieved from <https://wonder.cdc.gov/controller/datarequest/D76>

Heyman, M., Dill, J., & Douglas, R. (2018). The Ruderman White Paper on Mental Health and Suicide of First Responders. *Ruderman Family Foundation*. Retrieved from https://rudermanfoundation.org/white_papers/police-officers-and-firefighters-are-more-likely-to-die-by-suicide-than-in-line-of-duty/.