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House Bill 699 Office of the Chief Medical Examiner – Grief Counseling Services

Health and Government Operations Committee February 16, 2022 Position: SUPPORT

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates, and concerned citizens for unified action in all aspects of mental health, mental illness, and substance use. We appreciate this opportunity to present testimony in support of House Bill 699.

HB 699 requires the Office of the Chief Medical Examiner to work in coordination with the Behavioral Health Administration to establish a grief counseling services program for individuals who have experienced a loss to suicide or a substance use overdose.

The American Association of Suicidology reports for each death by suicide, 135 people are exposed, and 40-50% of the population are exposed to suicide in their lifetime. In 2018, 650 Marylanders died by suicide resulting in potentially 87,750 individuals in Maryland being exposed to suicide in that year alone. Suicide bereavement can bring complex emotional reactions, post-traumatic stress, and feelings of guilt and anger. It can involve investigations into the private lives of those close to the individual. Loved ones may face financial concerns as they face unexpected funeral costs. A wealth of studies have shown that suicide bereavement is a suicide risk factor for those exposed. A study from 2020 found the highest risk for suicide within bereaved groups was among those hose bereaved by suicide with additional contributions from depressive symptomatology, PTSD, and lower perceived social support, all of which can be aspects of the bereavement experience.

The burden of locating grief services following a loss to suicide typically falls to the newly bereaved. Models of coordinated response from caregivers that involve proactive outreach have been piloted across the United States and worldwide. The National Action Alliance for Suicide Prevention reports professionals who are likely to have early contact with the bereaved individual, including medical examiners, can have a significant impact. Providing training and support in responding to suicide loss survivors for medical examiners is featured in Objective 4.2 of the Survivors of Suicide Loss Task Force's April 2015 report.⁴

Providing immediate community-based resources for individuals who have recently experienced a loss to suicide or substance use overdose is a crucial support to prevent future suicides and help individuals grieve. For this reason, MHAMD supports HB 699 and urges a favorable report.

https://sprc.org/sites/default/files/migrate/library/RespondingAfterSuicideNationalGuidelines.pdf

¹American Association of Suicidology, https://suicidology.org/facts-and-statistics/

²Survivors of Bereavement by Suicide, https://uksobs.org/for-professionals/how-suicide-bereavement-is-different/

³Pitman, A., Osborn, D., Rantell, K., & King, M., (2020). https://bmjopen.bmj.com/content/6/1/e009948

⁴Suicide Prevention Resource Center,