

Safe gun storage counseling and lock distribution could lower military suicide rate

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Michael Anestis, executive director of the New Jersey Gun Violence Research Center based at Rutgers and an associate professor of Urban-Global Public Health in the Rutgers School of Public Health Credit: Raymond Clinkscale, Rutgers School of Public Health

Military members who receive gun locks and lethal means counseling,

which focuses on ways to limit a person's access to specific methods for suicide, are more likely to use a gun safe and unload firearms before they are stored, according to a Rutgers researcher.

The study was published in the *American Journal of Public Health*.

More than 60 percent of military suicides involve firearms. "Suicide mortality is higher in homes with a [firearm](#) and the majority of military personnel do not store their firearms safely or report [suicidal thoughts](#)," says Michael Anestis, executive director of the New Jersey Gun Violence Research Center based at Rutgers and an associate professor of Urban-Global Public Health in the Rutgers School of Public Health.

The researchers tracked 232 firearm-owning members of the Mississippi National Guard who were divided into four groups: those who received lethal means counseling or health and stress counseling only or a combination of both types of counseling in addition to being given cable gun locks. They followed up at three and six months to assess how safe firearm storage practices improved.

They found that the combination of lethal means counseling and cable locks resulted in greater adoption of safe storage methods, such as storing firearms in a gun safe, using a locking device when the firearm is not in use and storing firearms unloaded.

Participants who received cable locks were about twice as likely to use locking devices. Those who received lethal means counseling alone increased their use of gun safes and locking devices by 40 percent over six months.

"The findings show that service members may benefit from lethal means [counseling](#) and distribution of cable locks, perhaps at the point when a person enters the service," Anestis said.

More information: *American Journal of Public Health* (2020). [DOI: 10.2105/AJPH.2020.306019](https://doi.org/10.2105/AJPH.2020.306019)

Provided by Rutgers University

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