



# State of Connecticut

## SENATE

### SENATOR TONY HWANG

TWENTY-EIGHTH SENATE DISTRICT

LEGISLATIVE OFFICE BUILDING  
300 CAPITOL AVENUE, SUITE 3400  
HARTFORD, CONNECTICUT 06106-1591  
CAPITOL: (800) 842-1421  
E-MAIL: Tony.Hwang@cga.ct.gov  
WEBSITE: www.SenatorHwang.com

### ASSISTANT MINORITY LEADER

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HOUSING COMMITTEE  
LABOR & PUBLIC EMPLOYEES COMMITTEE

**MEMBER**  
COMMERCE COMMITTEE  
VETERANS' AFFAIRS COMMITTEE

March 3, 2015

Esteemed members of the Public Health Committee:

I am proud to testify in support of HB 6276. This bill would provide training to health care professional in youth suicide prevention. And it is absolutely needed.

Right now, suicide is the third leading cause of death for youth ages 10-24 in Connecticut. It is also the second leading cause of death for young adults ages 25-34, and the fourth leading cause of death for adults ages 35-54. Tragically, more than 300 Connecticut residents ended their lives in 2013.

While these statistics are alarming, it is also important to know that suicide is preventable.

Ninety percent of individuals who die by suicide have a mental health disorder at the time of their deaths, although these disorders are often untreated, under-treated, or underdiagnosed.

About one third of people who die by suicide have had contact with mental health services within a year of their death, and one in five have had mental health contact in the month prior to their death. An overwhelming 75% of individuals who die by suicide saw their primary care physician within the past year.

Unfortunately, despite the very serious, life-or-death nature of the encounters between patients at risk for suicide and health professionals, clinicians from a wide range of professions do not have confidence in dealing with individuals at risk for suicide, and a majority of clinicians have minimal to no training to competently deal with a clinical situation to prevent suicide<sup>1</sup>.

This demonstrates that there is a critical need for new standards of training and education for health professionals across the country, including here in Connecticut where close to 800,000 residents are living with mental illness in any given year.

In recognition of this serious and urgent public health issue, on February 12, 2015, President Obama signed the Clay Hunt Suicide Prevention for American Veterans Act into law at a public ceremony in the East Room. Just days earlier the bill was approved by the full Senate in a vote of 99-0, after passing in the House of Representatives 403-0. Seldom do we see unanimity in Washington these days, but such overwhelming public support by legislators in Washington, D.C. highlights the importance and growing awareness for suicide prevention programs and training.

The federal government is not alone in passing legislation to help those suffering with serious mental health issues and contemplating ending their own lives. Since 2012, three states have passed legislation requiring or encouraging suicide prevention training for health care professionals – Washington, Kentucky, and Louisiana. In addition to Connecticut, ten other states are now considering similar legislation, though Connecticut is the only state to limit the scope of training to youth suicide prevention.

In fact, I propose we amend HB 6276 by striking out the word youth. This would broaden the training and help prevent suicides among all ages. Regardless, in passing this bill, Connecticut would join other states and the federal government in addressing suicide as a serious and preventable public health problem.

Let me repeat: suicide is preventable, and it is clear threat to public health. It is incumbent upon us, as elected representatives, to do everything in our power to protect the health and safety of the public. This bill is one necessary step to further that mission.

Thank you for your time and thoughtful consideration.

Kindly,

Tony Hwang  
28<sup>th</sup> District State Senator

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<sup>i</sup> National Action Alliance for Suicide Prevention: Clinical Workforce Preparedness Task Force. (2014). *Suicide prevention and the clinical workforce: Guidelines for training*. Washington, DC: Author.