

TO: Chair Abney and House Finance Committee members

FROM: Amy Herlihy

RE: Support for: H 5776: Suicide Deterrent Barriers. Directs the Rhode Island Turnpike and Bridge Authority (RITBA) to design a safety barrier or netting system on the Mount Hope, Claiborne Pell, and Jamestown Verrazzano Bridges. Any newly constructed bridges with a deck height of over 100 feet must also have safety barriers or safety netting.

DATE: May 19, 2025

My name is Amy Herlihy and I live in Representative Boylan's district 66. I am writing in support of H5776.

I grew up on Cape Cod and to get home, my family had to cross a bridge. The 2 bridges that my family used to get home, and span the Cape Cod Canal, have had safety barriers to prevent suicides since 1981. In October 2021 the Army Corp of Engineers, who operate and maintain the Cape Cod Canal, reported that since 2002 there have only been 2 recorded incidents of suicide from those bridges.

Numerous studies, from around the world, have proven the effectiveness of barriers to prevent suicides. For example, in 1986 an 8-foot fence was erected as a barrier on the Duke Ellington Memorial Bridge in Washington, DC, which was described as the "number one jump site." In the five years following, there was no significant increase in suicide by jumping from the nearby Taft Bridge, and there was a 50% reduction in suicide by jumping compared to 1979-1985.¹

In 1998 barriers were constructed on the Clifton suspension bridge, in Bristol, England, and deaths from this bridge halved from 8.2 per year to 4.0 per year and there was no evidence of an increase in suicide by jumping from other sites in the Bristol area once barriers had been erected. This study provides evidence for the effectiveness of barriers

¹ O'Carroll PW, Silverman MM. Community suicide prevention: the effectiveness of bridge barriers. *Suicide and Life Threatening Behavior*. 1994;24(1):89-91; discussion 91-9.

on bridges in preventing site-specific suicides and suicides by jumping overall in the surrounding area.²

And in Auckland, New Zealand, safety barriers to prevent suicide by jumping were removed from Grafton Bridge in 1996 after having been in place for 60 years. The barriers were reinstalled in 2003. This study compared mortality data for suicide deaths for three time periods: 1991-1995 (old barrier in place); 1997-2002 (no barriers in place); 2003-2006 (new barriers in place). Removal of barriers was followed by a fivefold increase in the number and rate of suicides from the bridge. Since the reinstallation of barriers, there have been no suicides from the bridge. This natural experiment, using a powerful a-b-a (reversal) design, shows that safety barriers are effective in preventing suicide: their removal increases suicides; their reinstatement prevents suicides.³

Upon moving to Rhode Island, I was shocked and I continue to be shocked whenever I cross the Mount Hope Bridge, and other bridges, because they lack suicide barriers. It boggles my mind- how could these bridges lack a long proven barrier for suicide? It's time for Rhode Island, the Ocean State, where use of bridges is necessary to traverse our beautiful state, to construct research supported suicide barriers on our bridges to reduce access to a lethal means when our citizens are in crisis.

² Bennewith O, Nowers M, Gunnell D. Effect of barriers on the Clifton suspension bridge, England, on local patterns of suicide: Implications for prevention. *Br J Psychiatry*. 2007; 190:266-7.

³ Beautrais A, Gibb S, Fergusson D, Horwood LJ, Larkin GL. Removing bridge barriers stimulates suicides: an unfortunate natural experiment. *Australian and New Zealand Journal of Psychiatry*. 2009; 43(6):495-497.