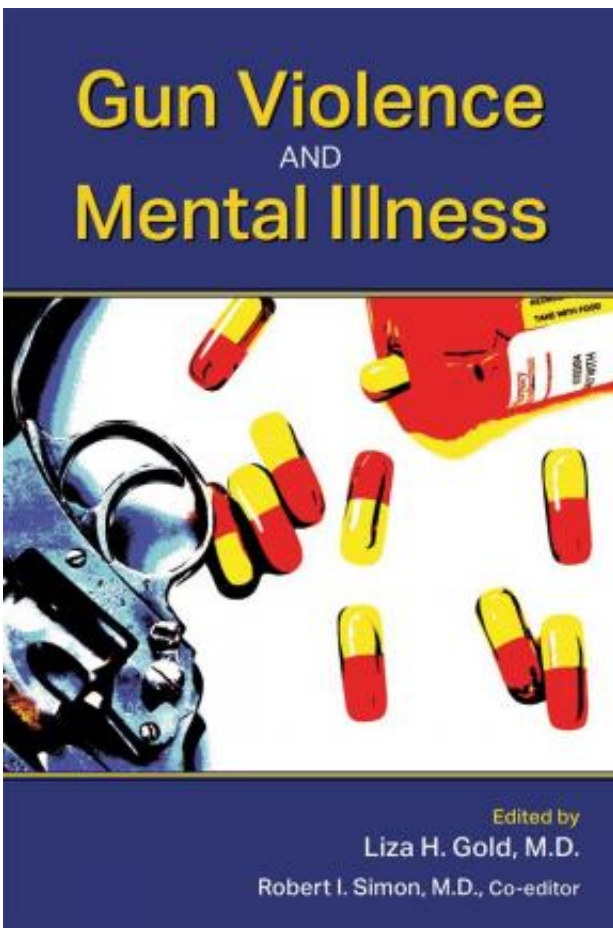


Debunking myths about gun violence and mental health

December 2 2015, by Renee Twombly



Gun Violence and Mental Illness was released in November.

Like many Americans, Liza H. Gold, MD, felt sick with grief when the Sandy Hook Elementary School mass shooting occurred in December

2012. The deaths of the 20 children and six teachers were profoundly tragic in so many ways, not least because first, their deaths were preventable as are many firearm deaths, and second, mental illness became the scapegoat, says Gold, a clinical professor of psychiatry at Georgetown University Medical Center.

"As before, people on both sides of the gun debate said that the answer to preventing these and other mass shootings is to keep guns out of the hands of the mentally ill. Surveys show as many as 80 percent of people say the top cause of [gun violence](#) is failure of the mental health system to identify individuals who are a danger to others," Gold says.

But she believes that "only a crazy person would go on a shooting rampage" and that "we are helpless to prevent gun violence" are not true—and the public should know that, she says. So Gold, with the help of Robert I. Simon, MD, also a Georgetown clinical professor of psychiatry, started organizing a book released in November, *Gun Violence and Mental Illness* (American Psychiatric Publishing, Inc.).

Gold will be speaking about reducing gun violence on December 4 at "Moving from Crisis to Action: A Public Health Approach to Reducing Gun Violence" at Emanuel A.M.E. Church in Charleston, S.C., where nine people were killed in a mass shooting nearly six months ago.

"People with serious mental illness are much more likely to be victims of violence than perpetrators," Gold says. "Evidence demonstrates that mental illness is only weakly associated with violent behavior. People with serious mental illness are responsible for only 3-5 percent of all violence and recent research suggests that they are responsible for only about 1 percent of gun violence."

About 33,000 people a year die by firearms in the U.S. Mass shootings, committed by individuals with or without mental illness, are statistically

rare when compared with the number of gun suicides and homicides. Despite a media focus that suggests otherwise, less than 0.5 percent of yearly gun deaths occur in the context of [mass shootings](#).

Most firearm homicides occur between those who know each other and are committed by angry and impulsive people, often fueled by alcohol or drugs, who do not have a diagnosis of serious mental illness. "Most people with serious mental illness are not violent, most violent individuals do not have serious mental illness and evidence indicates that individuals with serious mental illness who kill strangers with a gun is one of the rarest types of gun violence in the United States," Gold says.

Many people are surprised to learn that two-thirds of the approximate 33,000 annual firearm deaths in the United States are due to suicide, Gold says, and as many as 90 percent of those who take their own lives have a psychiatric diagnosis "rendering suicide the real intersection between mental illness and gun violence."

"Guns are everywhere and their bullets are predominantly used for suicide. If guns were less easily available, and if the mental health system had more resources and fewer obstacles to obtaining care, rates of suicide would decrease. Even a 5 percent decrease in firearm suicide rates would result in saving over 1,000 lives a year," Gold says.

FACTS, NOT FICTION

Gold and Simon wanted to drill down on two critical health care issues that the U.S. is facing—mental health and gun violence. They agree that the [mental health care](#) system is broken. "There is a shameful lack of [mental health resources](#) available to treat those with serious mental illness," Gold says. "Many end up in jail, often for relatively minor offenses."

Gold's goal in presenting this information, assisted by Simon and by the contributing authors, is to help move the national discussion beyond the inflammatory social and political rhetoric that often surrounds discussions of gun and mental health issues. "Tens of thousands deaths a year from a preventable injury are too many. I don't want your kid to shoot my kid; I don't want my kid to shoot your kid or shoot himself or herself. We should be able to figure out a way to decrease the number of gun suicides and homicides in this country."

To do that, Gold, also a contributing author, and Simon invited experts from a variety of disciplines—mental health clinicians, public health researchers and legal scholars—to use available research evidence to address misconceptions about the relationship between mental illness and gun violence that often result in the inability to treat either crisis effectively. Each of the 14 chapters then discusses potentially effective interventions suggested and supported by this evidence.

While the book is published by an academic organization, American Psychiatric Publishing, Inc., it is meant to be accessible to the general public.

MENTAL ILLNESS AND HOMICIDE RARELY MIX

Other findings discussed in the book include:

Suicide accounts for about two-thirds of all firearm deaths, or about 21,000 of the approximately 33,000 annually in the U.S. "Nevertheless, addressing the serious problems in the provision of [mental health](#) care could reduce rates of suicide, but will not decrease gun homicide rates," Gold says.

Most firearm homicides, about 11,000 a year, are interpersonal. They are frequently committed "by individuals who are angry, violently

impulsive, and often fueled by alcohol or drugs, but are not committed by individuals with mental illness," says Gold.

Evidence shows restricting individuals' access to firearms at times of increased risk of suicide or violence, whether they have mental illness or not, can decrease rates of suicides and homicides. "However, categorically restricting gun access to individuals based on negative stereotypes is an ineffective approach," Gold says.

"MORE LIGHT, LESS HEAT..."

After debunking many of the myths that surround gun violence and mental illness, Gold, Simon and the contributing chapter authors offer a roadmap toward workable solutions.

"There is no one magic fix—we recognize that people have both a constitutional right and legitimate reasons to own guns," she says. "The goal of this book is to move the national discussion forward with more light and less heat."

Gold says the approach to addressing both crises is modeled on the way motor vehicle deaths have been sharply reduced in the U.S. "It wasn't just one thing that reduced deaths, not just seatbelts or stop signs or rumble strips or speed limits or public education campaigns that raised awareness that you shouldn't drink and drive. It is all of it together. We have got to do that kind of multilevel intervention that has been demonstrated to work both here and in other countries to reduce the devastating costs that gun violence and [mental illness](#) take on individuals, families, communities and society."

Gun Violence and Mental Illness is available for order at American Psychiatric Publishing, Inc. (appi.org) and on Amazon.

Provided by Georgetown University Medical Center

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