



Advocacy and Action
for Connecticut's
Mental Health

Myth v Fact: Violence and Mental Health Conditions/Illness

Mental Health Conditions and the Facts on Connection to Violence

The Institute of Medicine tells us that the magnitude of the link between mental illness and violence “is greatly exaggerated in the minds of the general population.” What is the true magnitude of this link?

- Mental illness is thought to account for about 4% of the causes of violence. That means that factors ***other than mental illness*** account for the other 96%. (Larry Davidson, 2013)
- The contributing factor of mental illness to acts of violence involving guns is even smaller, being around 2%. Again, that means that ***98% of the factors that cause gun violence are attributable to things other than mental illness.***
- **Less than 1% of persons identified as having a mental illness will commit a violent crime.** So while persons with mental illnesses comprise 25% of the American population of adults over 18, they commit only 1 out of every 1,250 incidents of violence. They are, in fact, under-represented among persons who commit violence. (Larry Davidson, 2013)
- **People with mental illness are twice as likely to be the victims of violent crime compared with those in the general population.** [People with mental health conditions] (sic) were two times more likely to be victims (die by homicide) than compared with the general population. Fifty percent of those killed were by an acquaintance, one-third by a family member, spouse of partner, and one-fifth by a stranger. 68% were killed by a perpetrator that was not mentally ill. (The Lancet Psychiatry, 2014)

Despite these highly consistent findings that persons with mental illnesses are much more likely to be victimized by others than to hurt them, there have been ***13 times as many articles*** on the violence presumably perpetrated by persons with mental illnesses as there have been on the victimization of persons with mental illnesses. Thus, the Institute of Medicine tells us that the link between mental illness and the commission of violent acts is “greatly exaggerated.” (Larry Davidson, 2013).

The question remains why someone would harm or kill masses of people, themselves, or loved ones. People look for a simple explanation to a tough question and often times come up with two issues, guns and mental health. **The national dialogue historically has focused on mental health (illness) as the primary reason for the shootings, but the facts say otherwise.** As Doctor Jeffrey Swanson asserts, “On the face of it, a mass shooting is the product of a disordered mental process. You don’t have to be a psychiatrist: what normal person would go out and shoot a bunch of strangers?” (Beckett, 2014) The quick assumption is that a disordered mental

process equals a mental illness. Yet, a disordered thinking /mental process could be related to anger, revenge, hatred, physical abuse, excessive substance use, etc. A key distinction is that it does not mean a person has a mental health diagnoses such as bipolar disorder, anxiety disorder, or schizophrenia. There is a variety of research data that explain who does and does not commit violent crimes.

Violent Crimes, who commits them?

A 2001 study looked specifically at 34 adolescent mass murderers, all male. 70 percent were described as a loner. 61.5 percent had problems with substance abuse. 48 percent had preoccupation with substance abuse. 48 percent had preoccupations with weapons. 43.5 percent had been victims of bullying. *Only 23 percent had a documented psychiatric history of any kind – which means 3 out of 4 did not.* (Beckett, 2014)

Those who have a predisposition to committing horrific acts of violence tend to have an extreme form of self-centeredness known as solipsism, Dr. Harold Schwartz, psychiatrist-in-chief at The Institute of Living, noted. "We are all of us on some continuum of connectedness to others," he said. "To them, they are the only one really living, and their thinking is that everyone else is a cardboard fixture there to support them." Social isolation exacerbates that sort of thinking and creates a kind of spiral. (Weir, 2012)

Dr. Catherine Lewis, a forensic psychiatrist at the University of Connecticut, said it was important to distinguish between kids who simply don't have many friends and those who have been rejected — both categories often covered by the label of "loner." "It's a word used a lot to describe people who commit shootings, but there's a big difference between someone who is happy to be solitary and someone who, by their own difficulties, is not accepted," she said. "The issue is more of being a failed joiner, rather than being a loner."(Weir, 2012)

In a report published by the University of Virginia, The Consortium for Risk Based Firearms presented findings and recommendations on evidenced based indicators of individuals most likely to commit violent crimes. *The Consortium recommends that Congress and the states enact new temporary firearm prohibitions banning other groups at heightened risk of violence from possessing firearms to include:*
(Developments in Mental Health Law, 2014)

- Individuals convicted of a violent misdemeanor
- Individuals subject to a temporary domestic violence restraining order
- Individuals convicted of two or more DWIs or DUIs in a five-year period
- Individuals convicted of two or more misdemeanor crimes

Perception and the role of the media

The role of public perception and attitudes toward people experiencing mental illness has been formed over time and capitalizes on fear and sensationalism. This creates discriminatory behaviors and practices that may lead people to shy away from discussing mental health related issues. The irony is that the prevalence of mental illness conditions is one fourth of Americans or 80,000,000 people.

A longitudinal study of American's attitudes on mental health between 1950 and 1996 found, "the proportion of Americans who describe mental illness in terms consistent with violent or dangerous behavior nearly doubled." Also, the vast majority of Americans believe that persons

with mental illnesses pose a threat for violence towards others and themselves (Pescosolido, et al., 1996, Pescosolido et al., 1999).

"Characters in prime time television portrayed as having a mental illness are depicted as the most dangerous of all demographic groups: 60 percent were shown to be involved in crime or violence" (Mental Health American, 1999).

"Most news accounts portray people with mental illness as dangerous" (Wahl, 1995).

"The vast majority of news stories on mental illness either focus on other negative characteristics related to people with the disorder (e.g., unpredictability and unsociability) or on medical treatments. Notably absent are positive stories that highlight recovery of many persons with even the most serious of mental illnesses" (Wahl, et al., 2002).

The discrimination and stigma associated with mental illnesses stem in part, from the link between mental illness and violence in the minds of the general public (DHHS, 1999, Corrigan, et al., 2002).

The effects of stigma and discrimination are profound. The President's New Freedom Commission on Mental Health found that, "Stigma leads others to avoid living, socializing, or working with, renting to, or employing people with mental disorders - especially severe disorders, such as schizophrenia. It leads to low self-esteem, isolation, and hopelessness. It deters the public from seeking and wanting to pay for care. Responding to stigma, people with mental health problems internalize public attitudes and become so embarrassed or ashamed that they often conceal symptoms and fail to seek treatment (New Freedom Commission, 2003)."

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