Wrong Focus: Mental Health in the Gun Safety Debate

Washington -- April 17, 2013 -- The Judge David L. Bazelon Center for Mental Health Law today released Wrong Focus: Mental Health in the Gun Safety Debate, an update of a paper originally issued on April 16, 2013. Highlighting key research, the paper explains why the gun safety debate should not focus on mental health or people with psychiatric disabilities.

"Since the Newtown tragedy last December, too many advocates, journalists, and politicians have put people with psychiatric disabilities in the center of the gun safety debate," stated Director of Programs Jennifer Mathis of the Bazelon Center for Mental Health Law. "This has sparked knee-jerk, myth-based proposals that wrongly target mental health despite the minimal relationship with gun violence," stated Mathis.

"Some have used mental health to divert attention from the real issue at hand: gun regulation. Others have wrongly pushed mental health reforms -- especially mental health record reporting -- as a key solution to prevent gun violence. But both approaches are misguided and neither will improve public safety.

"Studies have shown that mental illness by itself is not statistically related to violence, and that people with serious mental illnesses are far more likely to be the victims of violent crimes than the perpetrators. And yet, despite the facts, many lawmakers and journalists continue to stigmatize people with psychiatric disabilities as the primary concern related to gun violence.

"Lawmakers who are serious about reducing gun violence should focus on the primary causes of gun violence, not people with psychiatric disabilities. It is time to stop scapegoating people with psychiatric disabilities in the rush for easy solutions to the complicated problem of gun violence.

"Though fixing our broken mental health system is an imperative, we should do so separately from the gun debate, as mental health reforms are likely to have little impact on gun violence.

"We know that services such as supportive housing, mobile services, supported employment, and peer support services are extremely effective in enabling people with psychiatric disabilities to succeed. These technologies are also less costly than emergency rooms, psychiatric hospitals, jails, and shelters. But they are unavailable to thousands of Americans who need them.

"We should afford Americans with psychiatric disabilities the services they need because it will improve people's lives and save money. Not because it is a distraction from the primary causes of gun violence," stated Mathis.