

Mental Health, Violence and Suicide: Replacing Myths with Facts

Introduction: Mental Health Misunderstood

The signs, symptoms and causes of mental health conditions are not always understood. Myths about mental health—sometimes driven by the media or popular culture—can negatively impact the public’s perception of people living with mental illness and contribute to the incorrect idea that a mental health crisis is always a public safety issue. Negative stereotypes about mental illness can also make it frightening for people to seek help when they need it. At the same time, these stereotypes can feed misinformation, making it challenging for first responders and behavioral health professionals to respond safely and effectively to a person in crisis.

Combatting and overcoming misconceptions regarding mental illness is key to reducing the stigma of mental illness and encouraging people in crisis to reach out for help. As State Administering Agencies (SAAs) and other criminal justice planners look to support programming to address mental illness, dispelling these myths and educating key stakeholders can ultimately improve responses to behavioral health crises.

MYTH 1 People with Mental Illness Are Violent

One of the most harmful myths about mental illness is that it leads to violence.

FACT: There may be a slightly elevated risk that a person with mental illness commits an act of violence, but **most people with mental illness are *not* violent and mental illness contributes very little to the overall level of violence in society.**ⁱⁱⁱ In fact, people with mental illness are much more likely to be the victim of a crime rather than the perpetrator.ⁱⁱⁱ

Certain social and environmental factors contribute to the risk of violence in both people with mental illness and those without. These factors include a history of violent victimization, use of illegal substances and poverty, among others.^{iv}

MYTH 2 People with Schizophrenia or Psychosis are Especially Dangerous

Terms like “psychotic” and “schizophrenic” are often used incorrectly to describe someone who is dangerous or out of control. Media and popular culture falsely portray these conditions as violent, scary and uncontrollable—which leaves people experiencing these conditions scared, isolated and often afraid to seek help.

FACT: Schizophrenia is a **treatable condition** that manifests with a variety of symptoms, including seeing or hearing things that others don’t see (hallucinations), false beliefs (delusions), disorganized speech and thinking, difficulty expressing emotions and disorganized physical movements.^v Psychosis—the experience of hallucinations and delusions—is one symptom of schizophrenia and related conditions. **While symptoms of schizophrenia can be upsetting or confusing to witness, they rarely lead to violence.**^{vi}

MYTH 3 Most Mass Violence is Caused by Mental Illness

Mass violence incidents are disturbing and difficult to understand. Since the motive of the perpetrator is often unclear, many people assume that the perpetrator was mentally ill.

FACT: According to the Columbia Mass Murder Database, **only about 5 percent of mass murders (defined as any mass violence incident that results in at least three deaths, not including the perpetrator) are connected to a serious mental illness.**^{vii} Contributing factors for mass violence may include a history of legal problems, challenges coping with life stressors, anger problems and a desire for notoriety.

MYTH 4
Firearms Deaths are Primarily Caused by Criminal Activity

FACT: More firearms deaths are due to suicide than to homicide. In 2021, 54 percent of firearm-related deaths were suicides,^{ix} and the majority of suicides involve a firearm. Firearm-related deaths—both suicides and homicides—have risen in recent years. However, firearm-related homicides began to drop significantly in 2023. Efforts to reduce firearm deaths should address suicide.

MYTH 5
If a Person Plans to Die by Suicide, They Can't Be Stopped

There's a common misunderstanding that people planning suicide cannot be deterred. For example, many people believe that if you take away a gun, a suicidal person will just find another means to hurt themselves.

FACT: Suicide is often impulsive, and limiting access to lethal means significantly reduces suicide deaths.^x

"Limiting lethal means" could include the safe storage of firearms and medications or, for example, putting nets under bridges.

However, limiting access to firearms and other lethal means is not enough. A comprehensive approach is needed—one that includes public education, access to treatment and crisis response services.

A Note on Language

Inaccurate language, derogatory terms or slang can also contribute to misunderstandings about mental illness and deter people from seeking help for mental health conditions. For example:



▶ Descriptions of suicide should be factual, include limited details and avoid sensationalism. In some cases, sharing too many details about a suicide can lead to additional suicides by vulnerable individuals – a phenomenon called "suicide contagion." When describing suicide, the preferred term is "died by suicide," rather than "committed suicide," which can be perceived as blaming the individual rather than their mental health condition.^{viii}



▶ Person-first language ("a person with schizophrenia") is preferred over condition-first language ("a schizophrenic person"). Person-first language emphasizes the individual, not their condition.



▶ When talking about an individual with a mental illness, it's best to describe specific behavior or a diagnosis, if known.

Endnotes

- i <https://www.apa.org/monitor/2021/04/ce-mental-illness>
- ii <https://jamanetwork.com/journals/jamapsychiatry/article-abstract/210191>
- iii Kimberlie Dean et al., "Risk of Being Subjected to Crime, Including Violent Crime, After Onset of Mental Illness: A Danish National Registry Study Using Police Data," *JAMA Psychiatry* 75, no. 7 (2018): 689–696.\
- iv <https://csgjusticecenter.org/publications/addressing-misconceptions-about-mental-health-and-violence/>
- v <https://www.samhsa.gov/mental-health/schizophrenia>
- vi <https://www.healthline.com/health/schizophrenia/are-schizophrenics-violent#risk-factors>
- vii <https://www.columbiapsychiatry.org/news/mass-shootings-and-mental-illness#:~:text=Approximately%205%25%20of%20mass%20shootings,cases%20these%20conditions%20are%20incidental.>
- viii <https://www.henryford.com/mimind/blog/language-matters>
- ix <https://afsp.org/an-introduction-to-firearms-and-suicide-prevention/>
- x <https://afsp.org/an-introduction-to-firearms-and-suicide-prevention/#why-have-a-firearms-and-suicide-prevention-program?>

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