



Firearms and Mental Illness Memo

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John R. Kasich, Governor
Tracy J. Plouck, Director

TO: Alcohol, Drug Addiction and Mental Health Services Partners

FROM: Mark Hurst, MD, *Medical Director*, Ohio Department of Mental Health and Addiction Services

TOPIC: Firearms and Mental Illness

With the debate around firearms and mental health intensifying, it is a reminder of the important role we as mental health professionals play as both clinical providers and experts whose voice is essential to informing the public conversation. With this in mind I am writing to share some information and resources that I hope you will find useful in your continued commitment to both those you serve and as an information resource to your community.

Statistics from 2016 (the most recent available) show that a relatively small number of violent acts directed toward others were committed by individuals with mental illness—and those that did were more frequently committed by people not in active treatment or who were using alcohol or other substances. Even one such event is regrettable and cause for concern. Just as alarming is that the data also reminds us of the comparatively greater risk that exists for individuals with mental illness to take their own lives. According to the Ohio Department of Health, more than 1,700 Ohioans lost their lives due to suicide in 2016, with more than one-half of them using a firearm.

When individuals with certain mental illnesses are actively experiencing symptoms, they may be impulsive, misperceive reality and have impaired judgment. If firearms are available, the risk to themselves and others increases markedly. Health care providers have no duty more important than to maintain the wellness and safety of patients, families and the communities where they reside. This duty is accomplished by providing effective treatment for psychiatric disorders and substance use problems, as well as remembering our duty to address the risk that exists from access to firearms for those under mental health treatment.

Both state and federal laws restrict ownership of firearms by individuals with mental illness, but some individuals who are mentally ill still obtain them. In addition, many patients live with family members who own firearms. Patients and their families should be advised of the risks of firearm access by individuals with mental illness, and the importance of mitigating this risk. In addition, hospitals (or other agencies or facilities) in which a person is an involuntary patient, should ensure that the relevant Bureau of Criminal Investigation (BCI) forms are completed and submitted within seven days after the adjudication of mental illness or commitment (Ohio Revised Code Section 5122.311). In appropriate clinical circumstances, Duty to Protect interventions should also be implemented for individual and public safety.

Please remember that free online training on “Counseling on Access to Lethal Means” is available through the Suicide Prevention Resource Center (SPRC) and is a helpful tool for clinicians to improve their skills in this area. It may be accessed at: <http://training.sprc.org/enrol/index.php?id=3>

While our clinical interventions alone will not eliminate all firearm-related injuries and deaths, they most certainly eliminate some of them. Even one life saved is worth it.

Questions? Contact Dr. Mark Hurst, OhioMHAS medical director, at mark.hurst@mha.ohio.gov or Marc Baumgarten, chief of the OhioMHAS Office of Legal Services, at marc.baumgarten@mha.ohio.gov.

<http://mentalhealth.ohio.gov>