

The debate over gun control versus mental illness essay sample

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The debate over gun control is not a new argument, neither is the existence of mental illness. There have been those who support and those who oppose gun control for many years. What has recently re-ignited the debate is an increase in mass shootings over the past few decades; one in particular is the Newtown, Connecticut, massacre. Incidents, such as this, fuel anger and fear, driving many to question the need for firearms in modern society, while others cite these incidents as a reason for remaining armed. The purpose of gun control is to limit the amount of violence in today's society, but this cannot be addressed without first looking at the mental health of those committing these violent acts. Mass shootings are not a new phenomenon. They have occurred since the existence of firearms themselves. Over the last few decades, however, these incidents have dramatically increased.

Although there are similarities in these occurrences, there are only three factors that tie them together; age is not one of them. Adam Lanza, the Newtown, Connecticut, shooter, was only 20-years-old when he walked into an elementary school and murdered 27 people before taking his own life. 40-year-old Wade Michael Page entered a Sikh temple in Oak Creek, Wisconsin, killing six and himself (Citizens Crime Commission, 2013). Just as age is not a determiner, neither is ethnicity.

Eduardo Sencion killed four people at an International House of Pancakes restaurant in Carson City, Nevada, before taking his own life. Sencion was of Mexican descent. Seung-Hui Cho, a 23-year-old Asian-American in one of the most notorious incidents in recent history killed 32 students and staff members at Virginia Tech. We can also add to the list Rodrick Shonte Dantzler, an African-American male who murdered seven people and then

himself (Citizens Crime Commission). Age and ethnicity can be ruled out as common elements, leaving location and time to consider. There is no definitive pattern when looking at where these crimes were committed. Jiverly Wong murdered 13 people before killing himself in Binghamton, New York, while Larry Gene Ashbrook carried out his assault on the Westwood Baptist Church over a thousand miles away in Fort Worth, Texas. This leaves the time of year that these crimes were committed.

Eric Harris and Dylan Klebold, in one of the few documented multi-shooter incidents, carried out a well-planned assault on Columbine High School, killing 13 in the month of April. Harris and Klebold then proceeded to take their own lives in a double suicide. Byran Uyesugi, a 40-year-old disgruntled employee, entered the Xerox Corporation building in Honolulu, Hawaii, shooting and killing seven before surrendering to police. This incident occurred in the month of November (Citizens Crime Commission, 2013).

Removing these elements leaves only three similarities; the gun, the gender of the shooters, and the mental status of the criminals involved. The knowledge that these crimes were carried out by men is no surprise. The majority of violent crimes in the United States are committed by men (Gun Control, 2013). The fact that a gun or guns were used in the commission of these crimes does not, in itself, warrant the removal of weapons from society. If this were the case we would need to remove all alcohol which causes more deaths annually than all firearms-related deaths.

The one commonality in all of these occurrences is the state of mind and mental health of the shooters. In all of the examples presented so far, there

were signs and indications that each individual had some sort of mental disorder. Each case has significant differences, but all suspects, as verified by family, friends, colleagues, and professionals showed signs of disturbing or anti-social behavior (Ollove, 2013). In two cases in particular, those of Eduardo Sencion and Seung-Hui Cho, disturbing signs of paranoia and isolationism were apparent long before they committed their crimes. As Cole (2007) states in his article " In hindsight, there were signs that Cho might be a threat to himself and possibly others, including complaints as far back as 2005 by two female students who reported receiving inappropriate messages from Cho" (Para. 4). Family of Eduardo Sencion had reported his violent and paranoid behavior to police two years prior to his shooting spree. Police had responded to an incident at his home but no actions were taken nor were any firearms removed from the home (Citizens Crime Commission, 2013). So the question becomes how to limit or deny access to firearms to those diagnosed with severe mental illness.

Across the nation, many states have begun to reassess their mental health policies and how they affect gun control. One state in particular is Maryland. In 2012, Maryland began a legislative task force to investigate the access of individuals with mental illness to regulated firearms (Maryland, 2013). Under current state law, access to firearms is denied to anyone who has been confined to a mental health facility for more than 30 consecutive days. The law also states that the individual must be determined to be dangerous to themselves or to others along with their mental illness in order to be denied access to firearms. The other question asked is what access law enforcement officers should have to mental health records. In an article by Gostlin (2011) <https://assignbuster.com/the-debate-over-gun-control-versus-mental-illness-essay-sample/>

he states “ Successfully reducing firearms-related violence requires effectively identifying dangerous individuals and keeping firearms out of their hands” (Para. 10).

Although this task force is ongoing and at times overreaching in some aspects, it is a step in the right direction. Other states are reevaluating their mental healthcare policies and questioning the cuts that have been made to these programs. New York is addressing the issue of mental illness and gun ownership through new legislation that targets those diagnosed with mental illness. Old legislation required a court order to prohibit firearms sales to individuals with a clinically diagnosed mental illness. Under new legislation backed by New York Governor Andrew Cuomo, a court order is no longer necessary. The new laws require only that a mental health professional inform local officials that a patient is likely to harm themselves or someone else (Ollove, 2013). Upon passage of the bill in January 2013, Cuomo stated “ People who have mental health issues should not have guns. They could hurt themselves.

They could hurt other people.”- These laws in New York almost mirror the federal laws accept for the fact that, on a federal level, this law still requires a court order to limit sales to an individual deemed mentally unfit. Some states like Colorado have considered legislation that would make it easier to involuntarily commit people, thus making it easier to take away their gun ownership rights (Ollove, 2013). There are those who disagree with this type of legislation, citing arguments that these kinds of laws would deter those who need help from seeking help for fear of having their information placed

on a database or reported to the FBI. In an article written by T. B. Cole (2007), he asserts that requiring mental healthcare providers to report individuals who either are a threat to themselves or to others will deter these patients from seeking the help that they need.

Cole's assertions are based on a federal bill (HR2640) which provides incentives for states to submit complete records of involuntary commitments to mental health institutions to the National Instant Criminal Background Check System (NICS). This assertion would be warranted if it were not for the stipulation in the bill that would require the removal of an individual's records from the NICS once the individual was determined to no longer be a threat to themselves or to others. (Para. 2) The real argument lies in reporting. As Jeffrey Swanson (2013) reports in an article written for the Journal of the American Medical Association (JAMA): In a nation with a constitutionally protected right to possess a firearm and an estimated 310 million firearms already in private hands, the real action in gun control is "people Control": Prohibit dangerous people from getting their hands on a gun. (Para. 4) The fear with this type of action is the fear of an overreaching government that violates the civil rights of an individual's right-to-privacy laws.

This argument becomes moot when, as Swanson indicates, the duty of a physician or mental healthcare professional or provider is the protection from harm of the patient and those to whom the harm may befall. No violation of rights is established by protecting society from a dangerous individual. Limiting weapons to law-abiding citizens is not a solution for

ending gun violence in the United States. Crisis-driven policies are made based on emotion and tend to have affects that can be damaging over an extended period of time (Swanson, 2013). It is clear that these crimes are committed by individuals who do not comply with the same standards of “normal and sane” that the majority of society adheres to. Creating laws that would have an impact on those without these violent inclinations would do little to curb the violence of those who do not or would not abide by these laws in the first place. Studies consistently show that 98 percent of registered gun owners will never use their weapons in a violent or harmful manner toward another human being (Gun Control, 2013).

In addition, the right to bear arms is a constitutionally protected right that cannot be infringed. The Second Amendment states, “ A well-regulated militia, being necessary to the security of a free state, the right of the people to keep and bear arms, shall not be infringed.” The meaning of this sentence has been under debate for many years. The most recent case to appear before the Supreme Court was District of Columbia v. Heller. On June 26, 2008, The United States Supreme Court ruled that U. S. constitutional Amendment number 2 guarantees an individual’s right to possess a firearm for lawful purposes including self-defense. The court also ruled that two of the laws in the District of Columbia, which required the ban of handguns and that guns in the home be disassembled or trigger-locked, were unconstitutional and violated the interpretation of the second amendment (Library of Congress, 2013).

The most recent case to appear prior to this case was in 1939 and dealt with the transport of unregistered firearms across state lines. Though there have been few cases presented to the Supreme Court on the matter of gun control, all cases agree that the right of an individual to possess a firearm is strictly protected under the Constitution. Through documented sources, it is obvious that there is a need for more stringent control of access to firearms by individuals with serious mental illness and anti-social behavior. Even without firearms, those with an inclination toward violence will find the means and the ways to carry out this violent behavior. Removing guns from all individuals will not solve this problem. The dilemma, therefore, is not a question of what weapon of choice is used by mentally ill individuals to commit violence, but how to prevent these individuals from gaining access to these weapons in the first place.

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