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Violence and Mental Illness: Unpacking the Myths

The Myth

A common portrayal of mental illness in the media is that persons with mental illness are antisocial, criminal, violent and dangerous. In drama – books, movies, television shows – persons with mental illness are often portrayed as dangerous ‘psychos’; mental illness is used as an explanation for antisocial and violent behaviour. In news reports, any hint or suspicion of mental illness is highlighted as a probable cause of violent or unpredictable behaviour.

This plays upon the public’s general fear of what they don’t understand, and of behaviour, however harmless, that does not conform to society’s norms. As a result, public perception that all people with mental illness are potentially dangerous has increased, even with recent improvements of the public’s awareness about mental health disorders.

The Truth

Persons with mental illness are in fact two and a half times more likely to be *victims* of violence than members of the general public. Persons with mental illness are *no more likely* than anyone else to harm strangers. There are some mental illnesses which may in fact decrease the likelihood of violence to others. The risk of violence is mainly confined to a small subgroup of people with severe and persistent mental illnesses and with specific kinds of symptoms which are not being appropriately treated.

For the most part, the indicators for violence among persons with mental illness are the same as for the general public: gender (male), childhood abuse, socioeconomic status, age, substance abuse, stressful and unpredictable environment with little or no social support. These factors are much stronger predictors of violence than mental illness alone. The strongest predictor of violence is a history of violence. While the link between mental illness, substance use and violence continues to be examined, we do know that substance use among people with mental illness seems to increase the risk of violence significantly. Within the general population, substance use increases the rate of violence by two and a half times, while within the population of people with mental illness, substance use increases the rate of violence by seven times.

What factors of mental illness may increase violent behaviour? The main indicator is lack of effective treatment for symptoms of some types of neurological impairment (lack of emotional and behaviour controls), or psychoses (delusions of control, command hallucinations). Most often, the violence is a result of a real or perceived threat to the person with mental illness rather than aimless aggression. With appropriate treatment and support, people with mental illness are no more dangerous than the general population.

Dealing with Potentially Aggressive Behaviour

So what should a person do when faced with potentially aggressive behaviour?

- 1 • Be aware that not all unusual behaviour is dangerous or violent. If behaviour is threatening, however, take the threat seriously and protect yourself by removing yourself from the situation and calling for help.
- 2 • Avoid touching the person, and allow maximum personal space. Do not stand between the person and an exit, but make sure that you have access to a safe exit also. This reduces the perception of you as a threat.

- 3 • Speak slowly, calmly and quietly; do not respond to insults or aggressive talk but do respond to other questions with short answers so that the person can understand and does not feel ignored. Often persons in psychosis are experiencing auditory hallucinations (hearing voices) and cannot hear or deal with more than short, simple statements or questions. It may be necessary to repeat yourself before the person can hear and understand you.
- 4 • Do not exhibit nervous or aggressive behaviour such as crossing your arms, pointing at the person, standing with your hands on your hips, or making abrupt or quick movements. Again, this reduces any perception that you are a threat.
- 5 • Explain what is happening – not in terms of the person’s own experience, but what you or others are doing to help them. If the person is hearing voices, tell them that you cannot hear them but understand that they do. It’s okay to ask if they are hearing voices and what the voices are saying; this may help the person’s anxiety. Explain who you are and who others are who may arrive. Explain that you are all trying to help.

The common misconception that persons with mental illness tend to be violent needs to be overcome, particularly with professionals such as police officers and ambulance service personnel who deal with persons with mental illness on a day-to-day basis. Awareness of the facts, understanding of what it is to experience a mental health crisis, and knowledge about the best responses for dealing with someone who may be exhibiting signs of a mental health crisis will go a long way to improve interactions with people with mental illness, for all concerned.

Building Capacity: Mental Health and Police Project (BC:MHAPP) is a project of the Canadian Mental Health Association’s BC Division, with a goal of improving interactions between police, emergency services, and people with mental illness. This fact sheet is produced as part of the BC:MHAPP Project. These fact sheets have been supported by gaming revenue from the Province of British Columbia. This project is supported by the Vancouver Foundation and the Provincial Health Services Authority. This fact sheet is one in a series of eight:

- Police and Mental Illness: Increased Interactions
- Criminalization of Mental Illness
- Violence and Mental Illness: Unpacking the Myths
- Police and Mental Illness: Models that Work
- Mental Health Crises: Frequently Asked Questions
- Hallucinations and Delusions: How to Respond
- Mental Illness and Substance Use Disorders: Key Issues
- Suicidal Behaviour: How to Respond

For more information on this project, please contact Camia Weaver, Provincial Co-ordinator for BC:MHAPP, CMHA BC Division, at info@cmha-bc.org or 604-688-3234.

