

Awareness of Mental Health Issues Crucial to Reducing and Preventing Violence

by Fannie LeFlore 6/24/07

As Police Chief Nannette Hegerty wrote in a recent article, "Stopping Homicides," it is very promising to know that momentum is building through the Milwaukee Police Department, Homicide Review Commission and various efforts by local leaders, professionals, community organizations, grassroots activists and concerned citizens who advocate to reduce and prevent violence. Yet, while the commission's data provides a foundation for knowing the who, what, when and where, we need to broaden our awareness about the whys of community violence. We can facilitate a more integrated approach to problem-solving by addressing mental health, the assumptions we make about people in general and many things taken for granted, in order to move beyond the obvious.

Many people think about mental health issues/ mental illness and picture a disheveled person talking to himself, walking down a street, motioning in the air. But statistics show that most people diagnosed with significant mental illness like schizophrenia and severe depression often turn inward in their suffering. They are no more likely to inflict acts of violence on other people than a typical corporate executive, homemaker or student. Consider recent situations nationwide.

In fact, at least theoretically, anyone is capable of violence. It often depends on the circumstance. While many like me view physical violence as legitimate only for self-defense, do we overlook how violence can be inflicted in other, more subtle forms that contribute to psychological damage for many in the community.

Sue McKenzie, Director of Programs for InHealth Wisconsin, a non-profit health education organization, said: "In my work, I have had the honor of interviewing about 75 people in the Milwaukee area, from teens to the elderly, about their experiences with depression. I have been struck by the sense of extreme frustration described by many, over not being able to "pull themselves up by their boot straps" and engage in life in a positive manner. Their own stigma and lack of knowledge about depression led them to simply increase their expectations of themselves without having the tools or support to deal with their depression. Many mentioned violence (words and/or actions) to self or others being the result of this frustration with how they felt and behaved, and how they thought they should feel and behave. Add to that the stigma and unrealistic expectations put on these people by others, and you understand the growing frustration that explodes into violence.

We are hearing more people talking about the idea that violence (their own or a loved one's) may be the result of depression and the stigma that keeps people from self-awareness and reaching out for assistance. It then becomes normalized and even expected from certain groups. I believe we need to help youth and adults name violence as a desperate act of someone who is hurting at some level. Maybe this would lessen the tendency to see violent people as powerful and even someone to idolize. Imagine if teens' response to a peer who is angry and out of control is to feel concern for their mental health rather than thinking that supporting a violent friend means getting violent with them. Teens want to talk about this issue! They tell us that they see depression in their friends before adults do, and that they really want to know how to be a good friend in such times."

Mental/behavioral health issues address three realms of human functioning: thoughts, feelings and action. Given this context, people who would never harm another's body can still participate in spreading "common-cold-type" mental health germs, such as wholesale negative assumptions and bias about entire groups of people, with resulting interactions that contribute to unprovoked hostility or extreme disrespect and disregard for the human dignity and rights of others.

The local Mental Health Matters for Violence Prevention project seeks to show that mental health/illness exists on a continuum. In other words, although hoodlums are creating the most visible chaos in our city, do the rest of us – and to what extent -- contribute to the problem behind the scenes, directly or indirectly. Certainly, we are not responsible for the thinking and behaviors of other people, and others must face consequences and be accountable for poor choices they make. But do we, in subtle ways, have a sense of entitlement to privileges, but seek to deny others access to resources even if they are willing to work hard to achieve a quality life? Do we treat people like stereotypes to support our own prejudices? Do we disown our own shadow and project all that is deemed bad about the human condition onto "those people?"

If so, as we explore solutions, we need to integrate a myriad of factors that require looking in the mirror. One thing we might ask ourselves, and come to terms with, is whether we walk our talk when it comes to truly helping communities most affected by crime and poverty. It can be easy to buy the hype that it is the responsibility of only police and politicians to prevent all violence. The reality is they can't be everywhere, and this brings up a crucial need to expand our perspective about what constitutes power. People who feel they do not have political power often overlook the personal power they can wield -- what each of us can actually do on a daily basis in our immediate environment.

Personal power develops from a willingness to examine ourselves, to gain clarity about and embrace our strengths as well as recognize our limitations, as we seek to change those things within our control individually and contribute to improving the community. You don't have to be an elected official or president of a company to make a difference. Whether a parent, friend, relative or co-worker, we each can make a positive impact – however small -- on another's life, just as others can do for us.

The American Mental Health Counselors Association (AMHCA), to which I belong as a professional member, is spearheading efforts nationwide to promote more public awareness of mental health as opposed to just mental illness. After all, "mental health" is a positive term that emphasizes wellness rather than illness, and also reflects an orientation toward people healing, growing and becoming more aware and conscious. Consider these insightful comments from some professionals, organizational leaders and community activists in the Milwaukee area:

Jenni Sevenich, Chief Executive Officer, Westside Healthcare Association, Inc., said: "People often talk about needing to take care of the whole self – body, mind and soul. We are encouraged to eat healthy, exercise, and get regular checkups for the body. It is acceptable to attend church, synagogue, or mosque, or just pray or meditate by oneself to take care of the soul. So why is there still a stigma attached to the practices that help us take care of our minds? People seem very concerned about the level of violence in our community and say we need to do something. We can make an effort to take guns off the street, but unless we address the issues

that make someone angry enough, depressed enough, or apathetic enough to want to shoot another in the first place, we are spinning our wheels.”

Yvonne Lumsden-Dill, Executive Director of the Women's Leadership Institute, Mount Mary College, said: “I was as surprised as the next person when I learned several facts about mental health and criminal activity. Many of our communities' criminal problems related to violence can be tracked to mental health problems. Yet, as a society we don't seem to take mental health problems seriously. We say things like...“ah, he is just crazy, or she is out of her mind.” And there is such a stigma related to poor mental health that people don't seek medical treatment for themselves or for loved ones. Until we can come to grips with this huge societal malady, it will be difficult to make a dent in this problem.”

Stephanie Harrison, Executive Director, Wisconsin Primary Health Care Association, said: “For far too long, mental health has been relegated to the back seat of the overall health care delivery system, which only perpetuates the stigma that patients feel when they experience difficulties in life and want to seek out help. More and more, research demonstrates that mental health has a profound impact on a person's overall health, and the health care industry is beginning to take notice.”

Yet, Wisconsin remains one of a handful of states that does not require parity for mental illness in insurance coverage (Milwaukee Journal-Sentinel, May 31, 2007). A strong need exists to reduce barriers to seeking counseling and other help in a nation where nearly half of all Americans have a psychiatric disorder at some time in their lives -- usually depression, problem drinking or some kind of phobia (Archives of General Psychiatry), and where one in every five Americans experiences mental health issues or mental illness in any given year (U.S. Surgeon General's Report). National statistics show that major depression and anxiety disorders can be as disabling for some people as chronic physical illness.

The *Diagnostic and Statistical Manual*, published by the American Psychiatric Association, cites five categories of psychiatric diagnoses: Adjustment, affective (mood), anxiety, behavioral and thought disorders, many of which include “common-cold-type” defense mechanisms and other symptoms and patterns of dysfunction that we may unconsciously use in daily actions, sometimes to extremes. As the comprehensive 1999 U.S. Surgeon General's Report on Mental Health defined it, mental health issues are marked by alterations in thinking, mood and behavior that cause distress or impair a person's ability to function.

As we increasingly understand the relationship between violence and mental health issues, we can become more effective with multiple interventions to reduce and prevent the various “whys” of violence, and factors that contribute to violence in its many forms.

The Summer 2007 Mental Health Matters for Violence Prevention project, sponsored by Community Intervention Programs, Inc. (CIP)/LeFlore Communications, LLC, offers a web-based repository of articles, referral and other resource information to promote mental health awareness and violence prevention solutions that can empower youth and adults. The general public can obtain information from the “Mental Health Matters” project website at www.leflorecommunications.com.

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