



California Association of Mental Health Peer-Run Organizations
870 Market Street, Suite 922, San Francisco, CA 94102
Phone 415-341-9460 Fax 415-421-2928

April 10, 2016

Honorable Reginald B. Jones-Sawyer, Sr.
Senate Committee on Public Safety, Chair
State Capitol
P.O. Box 942849
Sacramento, CA 94249-0059

Via Fax: 916-319-2159

AB 2607 (Ting) OPPOSE – An act to amend Sections 18150, 18170, and 18190 of the Penal Code, relating to firearms.

The California Association of Mental Health Peer-Run Organizations (CAMHPRO) is a nonprofit statewide organization consisting of consumer-run organizations and programs. CAMHPRO's mission is to transform communities and the mental health system throughout California to empower, support, and ensure the rights of consumers, eliminate stigma, and advance self-determination for all those affected by mental health issues by championing the work of consumer-run organizations.

Assembly Bill 2607 would amend existing law that authorizes a court to issue an ex parte gun violence restraining order. This bill expands the language of who can petition the court to bring an ex parte gun violence restraining order. Assembly Bill 2607 would allow an immediate family member, an employer, a coworker, **a mental health worker who has seen the person as a patient in the prior six months**, an employee of a secondary or postsecondary school . . . to file a petition request that the court issue an ex parte gun violence restraining order. . .”

Please know CAMHPRO is **NOT** taking a stance on an individual's rights to keep and bear arms.

CAMHPRO specifically takes issue with the language, “ **a mental health worker who has seen the person as a patient in the prior six months**,” may file a petition for ex parte gun violence restraining order. **This language stigmatizes mental health and those who suffer from mental health challenges as violent. The language also threatens the privacy of every person who is a “patient” of a “mental health worker.”**

It is a myth that mental health patients are violent. To allow a mental health worker who has seen a patient within the last six months to file for an ex parte gun possession restraining order perpetuates this myth.



Every significant research study carried out since the late 1990's has concluded that persons with mental illness are no more likely than matched controls in the community to commit violence:

- *“The prevalence of violence among people who have been discharged from a hospital and who do not have symptoms of substance abuse is about the same as the prevalence of violence among other people living in their communities who do not have symptoms of substance abuse.”ⁱ*
- *“After all, those of us diagnosed with a mental health disorder account for only 4% of the gun related homicides.”ⁱⁱ*
- On the other hand, *“The mentally ill are 60 to 120 percent more likely than the average person to be the victims of violent crime rather than the perpetrators.”ⁱⁱⁱ*
- *“The link between guns and mental illness is a link that needs to be debunked, because at least 95% of violent acts are committed by persons without serious mental disorders,”^{iv}*

An ex parte gun violence restraining order should be determined by an individual's actions, not based on what an individual has said to a mental health worker within the last six months.

If the author's concern is with an individual harming themselves or others with a gun, there are already laws in place that allow for protection against an individual who is in imminent danger of harming themselves or others.

This bill also seeks to violate a patient's rights. There are many federal and state laws in place to safeguard a patient's rights from being violated and to safeguard against a patient's mental health information from being misused, misconstrued, or inappropriately applied against them. This bill seeks to reach beyond the protections that were created for a patient's protection.

Much of society is diligently working to end mental health stigma and discrimination. Please do not support a bill that perpetuates mental health stigma and discrimination or threatens a patient's rights.

Please OPPOSE AB 2607.

If you have any questions, please contact me at 415-341-9460, or Heidi Strunk, CAMHPRO Advocacy Coordinator, at 916-212-3685.



California Association of Mental Health Peer-Run Organizations
870 Market Street, Suite 922, San Francisco, CA 94102
Phone 415-341-9460 Fax 415-421-2928

Sincerely,

Sally Zinman

Executive Director, California Association of Mental health Peer Run Organizations
(CAMHPRO)

cc: Honorable Members, Assembly Committee on Public Safety
(Via Fax 916-504-5460)

Honorable Assemblymember Ting
(Via Fax 916-319-2119)

ⁱ Appelbaum, P. S., Robbins, P. C., Monahan, J. (2000). Violence and delusions: Data from the MacArthur Violence Risk Assessment Study. *Am. J. Psychiatry*, 157:566-572.

ⁱⁱ Swanson, J., et al (2013). Preventing gun violence involving people with serious mental illness. in *Reducing Gun Violence in America: Informing Policy with Evidence and Analysis*, Webster, D. and Vernick, J. eds .Johns Hopkins University Press, Baltimore, MD 33-51.

ⁱⁱⁱ Mental Illness, Mass Shootings, and the Politics of American Firearms, Jonathan M. Metzl, MD, PhD, and Kenneth T. MacLeish, PhD, *American Journal of Public Health*, February 2015, Vol 105, No. 2.

^{iv} Mental Health Reform Will Not Reduce US Gun Violence, Experts Say, Rita Rubin, MA. *JAMA*. Published online December 16, 2015.
doi:10.1001/jama.2015.16421.