

# The Huffington Post – NY Gun Control Bill: A Missed Opportunity to Address Mental Health Issues

## FEATURED ATTORNEY



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The tragic shooting at Sandy Hook Elementary created a tipping point for America's fascination with guns. And while the focal point of the conversation has revolved around politics and gun control, behind the scenes, the mental health community has been hoping that this would also elevate awareness of another issue — less provocative than banning AR-15s and high-capacity magazine clips. Whether in a school or a workplace, many shootings could have been prevented not solely through stricter gun control laws but also through a higher level of mental health awareness. But as we learned in the days following Sandy Hook, funding for mental health issues has diminished over the years.

But what's worse than ignoring the mental health issues revolving around most shootings? Not addressing them properly.

On January 16, 2013, Governor Andrew Cuomo signed into law the "Secure Ammunition and Firearms Enforcement Act of 2013," now known as the SAFE Act. This law has been described by the Governor as strengthening the ban on assault weapons, regulations on ammunition and universal background checks. Additionally, however, and with seemingly little input from mental health professionals, both mental health attorneys and practitioners, the law significantly impacts the mental health field.

As a mental health law attorney representing mental health facilities, professionals, families and individuals, it is of great concern and question that the new law now requires "reporting" of those engaged in mental health treatment, creates multiple layers of bureaucracy, amends the AOT statute to add to an already underfunded and overburdened system and impacts therapeutic activities and confidentiality, so sacrosanct in this area of practice.

Instead of labeling and stigmatizing people with mental illnesses, legislation should have created funding and awareness that would help identify, intervene, evaluate and oversee the mentally ill.

For example, such funding needs to be directed to early identification by those closest to the individual with a mental illness — those who know him or her best: families and mental health professionals. By identifying individuals, we can then begin proactive and early intervention, as well as resources for evaluation and treatment plans. Also, funding would go towards oversight by professionals to assure compliance. The end goal of this process would ultimately be outpatient treatment programs and psychiatric housing to allow for independence and success in moving safely from a secluded stigmatized world into the community at-large.

Instead, it appears, based on reading the bill, that mental health issues were not part of the discussion and the fallout will be that reporting and transmitting to governmental agencies confidential information will do little to actually treat people with mental health issues. In fact, it actually may prevent the treatment of the mentally ill, as these requirements are so vague and so burdensome that those who are trained and live by confidentiality as a cornerstone of their practice may not feel comfortable handing over confidential information to the government, which would thus have a chilling effect on their ability to practice.

The focus must come back to mental health services and early intervention. Going underground, not seeking treatment, flying under the radar and continued stigma pave the way for tragedy. Yes, we need to control the gun availability aspect of these horrific events, but we also need to get control of a broken mental health system and fix it in an effective, realistic and thoughtful way, starting with funding for services as a priority above all.

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