



How Can Psychiatrists Be Part of the Solution?

The Violence Project: How to Stop a Mass Shooting Epidemic. Jillian Peterson and James Densley; Abrams Press; 2021; ISBN 9781419752957; pp. 240; \$28.00 hardcover

Mary K. Morreale¹

Received: 21 October 2022 / Accepted: 9 November 2022 / Published online: 23 November 2022

© The Author(s), under exclusive licence to American Association of Chairs of Departments of Psychiatry, American Association of Directors of Psychiatric Residency Training, Association for Academic Psychiatry and Association of Directors of Medical Student Education in Psychiatry 2022

Mass shootings within the USA, defined as “any event in which four or more victims (not including the shooter) are murdered with guns in a public location,” are increasing in both frequency and number of deaths per episode (p. 5). Although psychiatric illness alone is not a common cause of violence, multiple precipitating factors are associated with mass shootings where psychiatrists might be able to intervene. In their well-written, engaging, and interesting book, *The Violence Project: How to Stop a Mass Shooting Epidemic*, professors of criminal justice Jillian Peterson and James Densley address these factors, as well as a multitude of other areas where physicians, educators, and, truthfully, any member of the community can make a potential impact in reducing the risk of such an event.

The Violence Project: How to Stop a Mass Shooting Epidemic is based on the authors’ database of all mass shootings between 1966 and 2020 and includes coding for approximately 150 life history variables, an examination of social forces in the communities where these events occur, and interviews with incarcerated perpetrators, survivors, first responders, and experts in the field. The book’s first chapter, “Monsters,” starts with a vignette from an early interrogation of the Parkland High School shooter, in which the shooter is described in a humanistic light—the frame of his body is “so slight that it seems impossible it could even hold a semiautomatic rifle” —and he apologizes while in tears, collapsing into his brother’s arms (p. 1). This narrative sets the tone for the book and encourages the reader to approach these individuals not as monsters but as “boys and men we know. Our children. Our students. Our colleagues. Our community” (p. 3). It is through this openness that we,

as a society, can learn about the individuals who commit these acts and how to reach them before a crime occurs. The authors note that “nothing will change until we realize and understand that people who commit acts of mass violence are human beings, human beings like me and you” (pp. 3, 4), many of whom have been victims of abuse and violence at a young age, have mental illness that has gone unrecognized and untreated, and are in the midst of some type of crisis prior to the event, such as suicidal thinking or the loss of a relationship or job.

The second chapter, “America,” discusses factors within the USA that make mass shootings more prevalent than in any other country in the world. Although people tend to think of easy access to firearms as the main reason, the authors also discuss two sociological theories that help to explain this phenomenon. The first, introduced by Robert Merton following the Great Depression, is called the “strain theory” (pp. 23, 24) and posits that individuals, particularly lower-class men, are fed the “false promise” (p. 24) of the American Dream, where status and wealth are achievable through legitimate work. When they fail to achieve this dream, “resentment and rage” (p. 24) can develop, leading toward criminal acts including mass violence. The second, developed from Emile Durkheim’s work on lack of social integration and suicide, suggests that the American “mythical code of self-reliance” (p. 25) has led to isolation and increased suicide risk. The authors note that suicidal intent may be a reason that mass shooters choose their acts; interestingly, one third were found to be actively suicidal prior, 40% plan to die in the act, and it is rare that any mass shooter has an escape plan.

Chapters 3 and 4, “Trauma” and “Crisis,” consider the association between a history of traumatic events, acute stressors, and mass shootings. Approximately 70% of school mass shooters experienced childhood trauma; those

✉ Mary K. Morreale
mmorreale@med.wayne.edu

¹ Wayne State University, Detroit, MI, USA

with trauma killed more individuals than those without. The authors encourage universal trauma screening for children in both schools and health care settings and “trauma informed schools” (p. 47), where children are taught “social and emotional learning, which involves helping children develop their skills in communication, problem solving, conflict management, empathy, coping and emotional regulation” (p. 47). Given barriers to treatment once trauma is identified, the authors stress the importance of access to care and mention one specific program, the Nurse-Family Partnership, which provides at-home visits with a mental health practitioner and has successfully reduced abuse and neglect by almost 50%. Regarding acute crisis, the majority of perpetrators (80%) experienced some type of significant stressor within hours to weeks before their crime, including the end of a relationship, financial strain, and job loss. It is in this chapter that the authors discuss the association between mental illness and mass shootings and state what many of us likely already intuitively know, that “Just because someone has a mental illness, it doesn’t mean that their every action is related to that diagnosis or that their mental health symptoms directly caused all their behavior” (p. 59). For most mass shooters, neither psychosis nor psychopathology fits. The authors end this section of their book with a description of a four-step model based on their research that can be used for those in acute crisis: de-escalating oneself (deep breaths) and the space around (moving into a private and calming place); using nonverbal communication, such as sitting down to talk with an open body position; and active listening.

The next chapter, “Relationships,” discusses what to do when an individual leaks information about an intention to commit a mass shooting. School-based programs exist, such as the P3 Campus App, which allows teachers, students, and parents to report individuals of concern in an anonymous manner. The importance of developing a crisis response team for students who are reported is crucial, as is developing concrete resources, including mental health referral. The authors delineate four signs of crisis in individuals of concern, including disruptive behaviors (unruliness, argumentativeness, and low frustration tolerance), distressed behaviors (changes in performance, appearance, and emotional response), dysregulated behaviors (withdrawal, depressed mood, inability to complete tasks, paranoid thinking, writing or drawing about concerning themes), and dangerous behaviors (stalking, harassment, procuring weapons, harm to self or others, planning or rehearsing violence). As the title of this chapter suggests, the authors stress the importance of relationships to the individual at risk for violence, noting that shooters are typically stopped from committing violent acts not by security measures but by “someone saying something” when they “leak their plans” (p. 90).

Chapter 6, “Proof,” speaks to the contagious and ritualistic nature of mass shootings. These acts are considered by

some as “performance” crimes (p. 114), with Columbine often serving as the template. Mass shootings have become a way for shooters to gain notoriety and to be “seen and valued” (p. 115). The authors urge media outlets to adopt “no notoriety” policies, which limit use of the shooter’s name and stress the importance of technology corporations’ responsibility to eliminate posting and sharing of violent content. Chapter 7, “Hate,” addresses ideological shootings, such as white nationalism. The authors discuss “toxic online platforms” (p. 136) that encourage extremist views and bear little responsibility for posted content, providing an echo chamber for at-risk individuals. They recognize the difficulty that occurs with moderating these sites due to free expression laws and capitalistic forces and conclude with the following:

To stop mass shootings motivated by hate, we must embrace the complex reality that online activity is rooted in real world experience. The online and offline lives of mass shooters are not mutually exclusive, but rather one in the same. For any intervention to be successful, it must reach people where they are at, both in digital space and physical space. It must also reach them earlier, before lost souls ever go searching for hateful narratives to make sense of their lives, and before a mass shooting is ever on the horizon. (p. 143)

Chapter 8, “Opportunity,” discusses reducing access to guns, specifically high-capacity automatic rifles. The authors draw an analogy to interventions that reduce the means for suicide, such as blister packs for medication and barriers on bridges. They write, “... study after study finds that ready access to lethal weapons in the United States produce the opportunity for lethal violence to occur, including mass shootings with excessive casualties” (p.157). As we all know, such a reduction to access is politically difficult, and many loopholes exist in federal and state laws that make purchasing a gun quite easy, even for individuals with a history of domestic violence, mental illness, and previous felonies. For example, the Virginia Tech shooter had been court ordered into psychiatric treatment and should not have been able to purchase a firearm but was able to pass a background check due to the wording of a state statute, which allowed him to do so. Interestingly, only two states and the District of Columbia allow physicians to report children and adolescents who are of concern, which is certainly of interest to psychiatrists, who are often aware of patients’ potential for violence.

The Violence Project: How to Stop a Mass Shooting Epidemic ends with the chapter “Hope,” which synthesizes measures to reduce mass shootings. On an individual level, people can build relationships and mentor youth, safely store firearms, report members of their community who display concerning behaviors, and avoid spreading news that

increases mass shooters' notoriety. On an organizational level, institutions can establish trauma-informed practices and universal trauma screening and create anonymous reporting systems. On a societal level, people can teach school children social-emotional learning, elect politicians that support common-sense gun laws, hold social media companies accountable for dissemination of hateful content, and reduce stigma of mental illness while increasing access for treatment.

The Violence Project: How to Stop a Mass Shooting Epidemic is a valuable text for psychiatrists in that it highlights areas where we might focus our energy for developing and implementing interventions. Psychiatrists can also engage in the individual, institutional, and societal spheres mentioned above, paying particular attention to patients' history of trauma and violence, encouraging removal of firearms or limited access, and reducing stigma toward mental illness whenever possible. Psychiatrists can work with institutions within their communities to establish trauma-informed practices and appropriate screening and to develop expedient

referral for mental health care. On a societal level, psychiatrists can, of course, vote, but we can also serve within our national organizations and urge them to participate in the legislative process to reduce access to the deadliest firearms and hold social media companies accountable. As the authors end their book, "Exorcising the mass shooting monster will take all of us, working individually and collectively, to create the safe and connected world we want to live in" (p. 188).

Declarations

Disclosures The author has nothing to disclose and has no conflicts of interest.

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.