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## Communicating Threat

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### Background

Early warning systems (EWS) have been adopted by some universities and public school districts to identify students who may compromise school safety. These systems record retention data, including high absenteeism, failing grades, disciplinary violations, and low standardized test scores, information that may correlate with being “materially, socially, politically, and/or economically under-resourced” (Jones and Walton, 2018, p. 242). Some school districts use this data to label students with “mental health problems” and “antisocial behaviors”, though this data may just as likely indicate the effect of structural inequalities. In some states, students identified by EWS must be threat-assessed by school personnel and law enforcement. By linking social, economic, and racial privilege positively or negatively with mental health (MH) and the threat of violence so explicitly, identification by an EWS can be an act of marginalization that reinscribes injustices among students. This case study illuminates these injustices by showing how an EWS communicates that students may be threats to public safety. To do this, the case explores predictive analytics, algorithmic bias, and public safety policies in Florida school districts.

In this case, EWS normalize associations between academic achievement, MH, and violence by occluding the reasons behind these connections. Advocacy groups have noted that little causal evidence exists to link academic achievement data with student MH, or with a student’s potential for violence. Without causal evidence, the results the EWS provide are only speculative. Despite their speculative nature, school districts use EWS to justify actions against those it identifies. In one school district, for example, students identified by the EWS are put on a “watchlist” for

further surveillance. Used to communicate inferences about students' potential for violence, EWS instead become a tool for constructing the condition they purport to detect.

### **Presentation of the Case**

On February 14th, 2018, a student with a history of behavioral and disciplinary concerns shot and killed seventeen people, and injured seventeen more, at Marjory Stoneman Douglas High School (MSDHS) in Parkland, Florida. In the wake of this tragedy, the state of Florida launched an investigation into the causes of the shooting. The investigation revealed that the shooter had maintained previous contact with the state's mental health (MH) system until aging out of MH care at age eighteen. In response to the shooting, investigation, and calls for gun control reform, Florida's legislature proposed sweeping changes to state-level MH legislation. The processes mandated by the legislature included the requirement that school districts identify students with MH concerns and then assess the threat posed by these students.

### **Misconnections between Academic Achievement and Mental Illness**

In this case, legislative policies normalize the misconnection between markers of academic achievement and the label of mental illness. For example, a factsheet provided by the Florida Problem Solving/Response to Intervention (PS/RtI) Project, a collaborative effort by the University of South Florida and the Florida Department of Education, comments that "chronic absenteeism (missing 10% or more of school days) may be one of the first signs of risk for a number of negative outcomes (e.g., academic failure, *anti-social behaviors*, *mental health problems*)" (Florida Problem Solving/Response to Intervention Project Early Warning Systems Support," n.d., emphasis original). Used in this way, academic achievement data is co-opted to imply that students have "mental health problems" or "anti-social behaviors," though, again, causal data linking academic achievement with MH is lacking. Despite this lack of evidence, students who are identified with potential MH concerns may be referred for threat assessment.

### **Misconnections between MH and Violence**

Legislatures often promote MH legislation as an intervention to reduce incidents of gun violence in U.S. schools. These interventions commonly lead to "red flag" bills that receive bipartisan support. A 2017 Pew Research poll supports the apparent mis/connection between gun violence and mental illness: 89 percent of those surveyed were in favor of gun restrictions for those with mental illnesses (Parker et al., 2017). As the National Alliance for Mental Illness

notes, most people with mental illnesses are not violent (“Extreme Risk Protection Orders,” 2020). Yet, policies that link mental illness with the potential for violence risk labeling every person with a mental illness as potentially violent. Red flag bills continue to be passed despite lack of evidence for their efficacy (RAND Corporation, 2018; 2019). While these policies may aspire to satisfy public desire to respond to tragedy, they may not identify individuals who are most likely to be threats to public safety. As such, these policies risk normalizing a misconnection between MH and gun violence.

Research suggests that there *should be* no connection between mental illness and potential for violence. Yet this connection is perpetuated via laws, media, and public perception. Price (2011) offers one explanation: that mental disability is constructed as the cause of violence in an “effort to attach some rational cause to the killings” (p. 146). In an analysis of media articles about shooters, Price (2011) finds that many of them use any evidence related to MH, even the individual’s study of MH (p. 147), to construct a history implying that the shooter had a mental disability. Any instances of deviant behavior are used to support the implication that the person was mentally ill, which provides an explanation for the person’s other deviant behavior. In this case, the shooter’s medical records were reviewed by a commission appointed by the Florida legislature. They found that the shooter was “identified as having behavioral health issues as early as three years old; however, [the shooter] was never diagnosed with a serious mental illness” (p. 267). Despite this information, however, the report’s early description of the shooter constructs them as a person who was mentally ill and whose “violent tendencies” were present from early childhood. These markers of deviance operate to explain a deviant individual, helping the commission conclude that mental and behavioral issues should be addressed by school districts to protect school safety.

## **MH and Police Presence**

Florida MH legislation has received criticism for its treatment of children, with public attention focusing on police presence in schools and the increasing number of minors involuntarily examined under the legislation. Florida’s best practices for school safety specifically address the need to avoid a school-to-prison pipeline. Yet as Shapiro (2020) writes in an *Orlando Sentinel* commentary, almost 70% of involuntary MH admissions for children are initiated by law enforcement. As a *Tampa Bay Times* investigation (Anton & Pendency, 2019) finds, “officers hospitalized children who had a meltdown, refused an order or drew a troubling picture. Some kids vaguely threatened to hurt themselves. Other children exhibited behavior that was typical

for their development disabilities and identified in their federal education plans” (n.p.). In a report on police presence in schools sponsored by the Florida ACLU, Equality Florida, Florida Social Justice in Schools Project, Southern Poverty Law Center, and the League of Women Voters of Florida, Morton et al. (n.d.) overview racial and ethnic disparities in policing in Florida schools. About one county’s school disciplinary data, they found “more than half of suspended Black students were suspended due to subjective offenses, like not cooperating, class disruption, insubordination, or disrespect. Black students were four and a half times as likely to be arrested at school for disorderly conduct than their white classmates” (p. 17). The report also finds that racial disparities are particularly harmful for Black girls, who are “arrested nearly 6 times as often” as their white peers (p. 17). Not only does increased police presence in schools enhance the risk of discriminatory disciplinary practices against students who are perceived to have mental illnesses, the practice exacerbates policing of Black and Hispanic children as well.

### **Focus Questions**

- 1) In your opinion, what vulnerable populations are most at risk of being (mis)identified by EWS? How would you recommend bringing the precarity of these populations to the attention of school district personnel?
- 2) What human stakeholders authorize the use of EWS to identify students whose behavior may pose a threat?
- 3) How would you redesign EWS to be more equitable? Can an EWS be redesigned to be more equitable, or should its use be prohibited? Do you think that policies could be enacted to dictate the more equitable use of EWS or other predictive analytics? If so, explain what such policies could look like.
- 4) Can you think of other situations where predictive analytics normalized inferences about human behavior without causal evidence?
- 5) Why do you think school districts have adopted EWS to identify students whose behavior may pose a threat, even though there is a lack of causal evidence to link academic achievement, mental illness, and violence?

6) Have you witnessed a person identify mental illness as the cause of violence? In addition to the societal influences (media sources, public opinion, etc.) discussed in this case study, what other sources help normalize this misconception? Other than the markers of deviance mentioned in this case study, like academic achievement or studying MH, what markers of deviance have you seen used to imply that a person has a mental illness?

7) Why do you think societal influences (media sources, public opinion, etc.) use mental illness as a plot device when they are building the narratives of violent people? In the narrative of a person with mental illness, is mental illness a form of deus ex machina, used to bring the plot to a swift conclusion? How does this treatment of mental illness impact a person's agency?

## Thematic Reflection and Discussion

### Theme 1: EWS and Predictive Analytics

The determination that a student's behavior may pose a threat should be complex, and reliant on multiple factors: behavioral phenomena, interviews, response to interventions, etc. However, EWS or other similar predictive analytics allow users to bypass these complexities. When used to make decisions about a student's "mental health problems", EWS mediate diagnoses, standing in for the role of a healthcare provider. While the assessments and decisions made by a healthcare provider include room for medical uncertainty, the decisions produced by EWS do not. In this type of layman diagnosis, the designation of MH concerns (and thus, threat) is isolated from the processes by which MH concerns are enacted. The EWS becomes an instrument used to designate an individual as Other (Barad, 2007).

### Discussion Questions

1) Can you think of any other predictive analytics that claim to simplify or streamline decisions about human behavior? What are common categories of human behavior that predictive analytics seek to comprehend?

2) Given the lack of causal evidence between academic achievement, mental illness, and violence, do you think more research might address the issue of faulty predictive analytics?

### Theme 2: Algorithmic Bias

Technological warning systems and predictive analytics seem objective; yet the seeming objectivity of systems is threatened by socio-historical, racial, and sex role-related context, as

Noble (2018) writes about algorithms. In this case, context may include dominant narratives about mental illness/individuals who are mentally ill. These dominant narratives about mental illness may intersect with other dominant narratives; the data collected by EWS is likely to reflect social, economic, racial/ethnic, and gender inequalities (Bécares and Priest, 2015). These inequalities are likely to be rendered a sign of deviance as well. Given the ways that dominant narratives about mental illness intersect with those about race (Pickens, 2019), a system intended to single out students with MH concerns may also bring scrutiny to students whose “deviance” is belonging to a marginalized group.

### **Discussion Questions**

- 1) How might a predictive analytic system be designed to reduce algorithmic bias by contextualizing multiple possible causes of human behavior?
- 2) Assuming a technology could be designed to reduce algorithmic bias, how would you address training the users who operated the system?

### **Theme 3: Stigma**

School districts’ policies and protocols concerning EWS use, as well as legislative mandates requiring schools to identify and threat-assess all students with MH concerns, have the power to stigmatize students. Students identified by EWS may experience both the stigma of being perceived to have a mental illness and the stigma of being perceived as a threat by school district personnel. Stigma manifests as the data about identified students, which is entered into a state-level data repository without any expiration or deletion guidelines; so the state may possess information about a student’s MH condition or potential for violence—accurate or inaccurate—in perpetuity (Schaffhauser, 2019). For students who may have mental illnesses, stigma may result in poorer outcomes. For students mistakenly identified by the EWS, stigma may result in increased contact with school personnel and law enforcement as well as district and state surveillance.

### **Discussion Questions**

- 1) How might school districts’ protocols mandating threat assessment for students with potential mental illnesses prevent students from seeking MH care?

2) Stigma can be defined as a mark of disgrace or shame. How do EWS stigmatize students? Is there a way to de-stigmatize EWS identification?

#### **Theme 4: Policy**

Policy documents, constructed as a response in the wake of tragedy, can reveal insights about constituents' expectations for governing institutions. Policies can also help us understand more about public values and the actions they authorize in response to a crisis. In this case, the policies and protocols enacted by the Florida legislature illustrate prevailing public beliefs about mental illness and the role of governing institutions in intervening in the lives of mentally ill individuals. These dominant narratives about mental illness, expressed through school districts' protocols for EWS use, normalize the construction of individuals with mental illnesses as potential threats. This type of threat communication can influence public perception of risk. Multiple institutions have contributed to this perception of risk, including lobbyists, news media, and political figures. For example, until recently, the 1996 Dickey Amendment prevented federal funding of gun violence research (Rostron, 2018; Subaraman, 2019). The lack of research on the causes of gun violence may have contributed to further public uncertainty about its causes, leaving policies and protocols to manage the perception of risk and/or threat.

#### **Discussion Questions**

- 1) What role do policies and protocols play in enabling the use of discriminatory predictive analytics or other technologies?
- 2) How would revising a problem policy impact the other human and technological stakeholders in this case?

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