

TRIGGERING THE DEBATE

Faulty Associations Between Violence and Mental Illness Underlie US Gun Control Efforts



Jonathan M Metzl and Kenneth T MacLeish give a critical overview of the US gun control debate.

In the aftermath of the horrific December 2012 school shooting in Newtown, Connecticut, US President Barack Obama called for a national awakening on matters of gun violence. He told a national television audience after Adam Lanza killed 20 children and 6 adults with a military grade semi-automatic weapon, “We’re going to have to come together and take meaningful action to prevent more tragedies like this, regardless of the politics.”

The time seemed right for Americans to address the epidemic of gun violence – over 30,000 Americans die by gunshot each year. Yet much of the debate that ensued played out along familiar political fault lines. Gun-control advocates decried the ready availability of military grade weapons and ammunition magazines. Gun enthusiasts argued that tragedies like Sandy Hook are best prevented by arming more civilians and selling more guns.

Amongst the rancor, all sides seem to agree on one point: Lanza’s murderous violence resulted from mental illness. In the days after the shooting, media commentators rushed to uncover Lanza’s psychiatric history. “Was Adam Lanza an undiagnosed schizophrenic?” asked *Psychology Today*. Claims of Asperger’s syndrome followed. News outlets called for mandatory mental health “screenings” for gun purchases and lowering barriers that kept mental health records out of gun purchase databases. New York legislators passed a bill requiring that mental health professionals report “dangerous patients” to local officials. National Rifle Association President Wayne Lapiere demanded a “national registry” of persons with mental illness, while conservative commentator Anne Coulter claimed, “guns don’t kill people – the mentally ill do”.

Undeniably, persons who have shown violent tendencies should not have access to weapons that could be used to harm themselves or others. However, contentions that mental illness caused any particular shooting or that advance psychiatric attention might prevent these crimes, are more complicated than they might seem. Such statements stereotype a vast and diverse population of persons with mental illness and distract from more productive avenues to limiting gun violence.

Three central myths complicate assumptions that mental illness begets US gun crime.

Myth 1 – Mental illness causes gun violence

Many mass shooters suffer from psychological demons. Yet surprisingly little evidence supports the notion that aggregate groups of persons with “mental illnesses” are more likely than anyone else to commit gun crimes. Databases that track US gun homicides find that only 3-5 per cent of American gun crimes involve “mentally ill shooters” – a prevalence lower than in the general population. A convincing body of research also suggests that high profile mass shootings represent anecdotal distortions of the actions of persons diagnosed with psychiatric illnesses. Psychiatry professor Jeffrey Swanson contends that mass shootings denote “rare acts of violence,” and that homicides committed with guns against strangers by individuals with mental disorders occur far too infrequently to allow for statistical generalisations that would justify the surveillance, restriction and stigmatisation of the mentally ill.

Links between mental illness and other types of violence are similarly contentious among researchers who study such trends. The vast majority of people with psychiatric disorders do not commit violent acts – only about 4 per cent of violence in the US can be attributed to people with mental illness. Studies also suggest that the stereotype of the violent mad person represents an inversion of on-the-ground reality. Many serious mental illnesses reduce a person’s risk of violence over time, since these illnesses are in many cases marked by social withdrawal. Research also shows that individuals with severe mental illness are far more likely to be assaulted by others than to commit violent crimes themselves.

Taken together, current research suggests that linking “mental illness” to gun violence represents an oversimplification at best, and a distortion at worst. Evidence also suggests that reflexively blaming people who have mental disorders for violent crimes overlooks the statistical threats posed to US society by a much larger population – the sane.

Myth 2 – Psychiatric diagnosis can predict gun crime before it happens

Psychiatric diagnosis is far from a predictive science in matters of violence. Psychiatrists using clinical judgement are not much better than chance at predicting which individual patients will commit gun crimes and which will not. The lack of prognostic specificity is in large part a matter of simple maths: even the overwhelming majority of psychiatric patients who fit the profile of recent US mass shooters – gun-owning, paranoid men – do not commit crimes.

Complicating matters further, associations between violence and psychiatric diagnoses shift dramatically over time. For instance, most people in the US considered schizophrenia an illness of calm docility for much of the first half of the 20th century. From the 1920s to the 1950s, psychiatrists described schizophrenia as a “mild” form of insanity that impacted people’s abilities to “think and feel,” while popular magazines described middle-class “schizophrenic housewives”. Only in the 1960s and

1970s, did American society link schizophrenia with violence. Psychiatric journals suddenly described patients whose illness was marked by criminality and aggression, while FBI Most-Wanted lists in leading newspapers described “schizophrenic killers” on the loose.

We now recognise that this transformation was not a simple reflection of reality, but arose from changes in the how psychiatry defined mental illness in the first place. Prior to the 1960s, psychiatry classified schizophrenia as a psychological “reaction” that produced “regressive behaviour”. But in 1968, the official diagnostic manual of US psychiatry – the DSM II – redefined paranoid schizophrenia as a condition of “hostility,” “aggression” and projected anger. This change not only imbued the mentally ill with an imagined potential for violence, but also encouraged psychiatrists to define violent acts as symptomatic of mental illness.

So while it is tempting to turn to psychiatry for answers about mass violence, doing so may only reinforce the tenuous circular logic that links madness and violence.

Myth 3 – Look out for dangerous loners

Recent mass shootings in the US have been framed as the work of loners – unstable, angry, young, white men who never should have had access to firearms. “Adam Lanza Was a Loner Who Felt Little Pain” read a headline on CNN in the wake of the Newtown shooting. Lanza and other recent shooters undoubtedly led troubled solitary lives. But the seemingly transparent image of the disturbed loner is also a relatively recent invention.

In the 1960s and 1970s, many of the men depicted as being armed, violent and mentally ill were also, it turned out, African American. And, when the potential shooters were black, American society blamed “black culture” or black activist politics – not on individual, disordered brains – for the threats such men were imagined to pose. For example, FBI profilers famously diagnosed black political figures like Malcolm X and Robert Williams with schizophrenia, citing their attempts to obtain firearms and “plots” to overthrow the government.

Malcolm X, Robert Williams and other political leaders were far from schizophrenic. But fears about their political sentiments, guns, and sanity mobilised significant public response. Articles in the *American Journal of Psychiatry*, such as a 1968 piece titled “Who Should Have a Gun?,” urged psychiatrists to address “the urgent social issue” of firearms in response to “the threat of civil disorder.” And Congress began serious debate about gun control legislation leading to the foundation of US gun laws – the Gun Control Act of 1968.

One cannot help notice the irony. In the present day, the actions of “lone” white shooters lead to calls to expand gun rights: it would seem political suicide to argue for restricting the gun rights of white Americans or men. Meanwhile, members of largely white groups such as the Tea Party who advocate broadening of gun rights to guard against government tyranny – indeed the very same claims made by Black Panther leaders in the 1960s – take

seats in the US Senate rather than being subjected to psychiatric surveillance.

As we move forward

Complicating the associations between guns and mental illness in no way detracts from the dire need to stem US gun crime. Yet as we move forward in the aftermath of yet another horrific tragedy, we need to be cautious of focusing too heavily on questions of whether particular assailants meet criteria for particular diagnoses. Evidence suggest that mass shootings represent statistical aberrations that reveal more about particularly awful instances than they do about population-level actions. To use Jeffrey Swanson’s phrasing, we risk building “common evidence” from “uncommon things.” And we lose the opportunity to build common evidence about common things, such as substance use, past history of violence, availability of firearms, or other factors that are more strongly predictive of gun crime than are particular psychiatric diagnoses.

We must also learn from history that decisions about which crimes American culture diagnoses as “crazy” are driven as much by the politics and anxieties of particular cultural moments as by the actions of individually disturbed brains.

Of course, understanding a person’s mental state is vital to understanding their actions. But focusing so centrally on the pathology of individual assailants only makes it harder for the US to address how mass shootings reflect group psychologies in addition to individual ones. We in the US live in an era that has seen an unprecedented proliferation of gun crimes. Yet this expansion has gone hand-in-hand with a narrowing of the rhetoric through which US culture talks about the role of guns in our daily lives. Insanity becomes the only politically sane place to discuss gun control. Meanwhile a host of other narratives, such as the mass psychology of needing so many guns in the first place or the anxieties created by being surrounded by them, remain unspoken.

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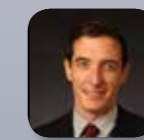
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