On Jan 8, 2011, a 22-year-old high-school dropout named Jared Lee Loughner allegedly opened fire at a “Congress On Your Corner” meeting outside a grocery store in Tucson, AZ, USA. Using a 9 mm Glock 19 semiautomatic pistol, Loughner shot US Congresswoman Gabrielle Giffords and then fired indiscriminately into the gathered crowd. Six people died and 19 were injured by the less-than-a-minute shooting spree, which ended when an injured bystander tackled Loughner as he attempted to reload.

Mainstream media outlets debated various theories in the aftermath of the horrific crime. Did a vitriolic political speech catalyse Loughner’s actions? Were readily available guns and ammunition magazines to blame? However, in fairly short order, the media focused on narratives that held mental illness responsible for the violence. Stories on CNN’s website focused on “Guns and Mental Illness” alongside pictures of Loughner looking shaved, glassy-eyed, and crazed. David Brooks, from The New York Times, suggested that Loughner suffered from schizophrenia while asking “How can we more aggressively treat mentally ill people who are becoming increasingly disruptive?” And TIME magazine asked, “Why Are the Mentally Ill Still Bearing Arms?”

Such rhetoric probably sounded familiar to many Americans. Similar stories appeared in the aftermath of other recent high-profile gun crimes, from Columbine to Northern Illinois University to Virginia Tech. In each case, media connected the psychological instability of shooters to broader calls to limit gun rights for the mentally ill. It is undoubtedly the case that some people with mental illness commit crimes. Indeed, last month a federal judge ruled that Loughner was not mentally competent to stand trial due to his “delusions, bizarre thoughts, and hallucinations”. However, the contention that mental illness caused any particular shooting is more complicated than it might seem.

While debates about “mental competence” and guns have played out in American psychiatric journals for decades, surprisingly little evidence supports the notion that individuals with mental illnesses are more likely than anyone else to commit gun crimes. Many scholars hold the association to be overstated. According to Columbia University psychiatrist Paul Appelbaum, less than 3-5% of American crimes involve people with mental illness, and the percentages of these crimes that involve guns are actually lower than the national average—particularly when alcohol and drugs are taken out of the mix. For Appelbaum, the focus on so-called mentally ill crime obfuscates awareness of a far more important set of risk predictors of gun violence: substance use and past history of violence.

Links between mental illness and other types of violence are similarly contentious among researchers who study such trends. For example, research by John Brekke and Cathy Prindle, professors of social work at the University of Southern California, shows that individuals with schizophrenia are more likely to be assaulted by others than to commit violent crime themselves. Such research suggests that people with mental illness might well have more to fear from “us” than we do from “them”. By blaming people who have mental disorders for violent crime, the threats posed to society by a much larger population—the same—are overlooked.

Further complicating matters, associations between violence and mental illness vacillate over time. Most people in the USA considered schizophrenia, to use David Brooks’s example, as an illness marked by genteel docility for much of the first half of the 20th century. From the 1920s to the 1950s, psychiatrists described it as a “mild” form of insanity that had an influence on people’s abilities to “think and feel”. New York Times articles told of “schizophrenic poets” who produced brilliant rhymes. Features in general magazines such as Ladies’ Home Journal described white middle-class “schizophrenic housewives” whose mood swings were suggestive of “Doctor Jekyll and Mrs. Hyde”, a theme that also appeared in Olivia de Havilland’s depiction of Virginia Stuart Cunningham in the 1948 Anatole Litvak film, The Snake Pit. Only in the 1960s and 1970s did American society link schizophrenia with violence. Case studies in leading psychiatric journals described patients whose illness was marked by criminality and aggression. FBI Most-Wanted lists in leading newspapers described crazed “schizophrenic killers” on the loose, while Hollywood films, like Samuel Fuller’s 1953 Shock Corridor, showed angry schizophrenics who rioted and attacked. Research done at the University of Michigan has recently shown that the emergence of “schizophrenic violence” in the 1960s and 1970s resulted, not from the increasingly violent actions of people with mental illness, but instead from changes in the diagnostic categories by which mental illness was defined. As but one example, the second edition of the Diagnostic and Statistical Manual of Mental Disorders, published in 1968, redefined paranoid schizophrenia as a condition of “hostility” and “aggression” and projected anger in ways that encouraged psychiatrists to conceptualise violent acts as symptoms of mental illness.

From a historical perspective, shifting connections between violence and mental illness also connect uncomfortably with shifting anxieties about race. In the 1960s and 1970s, many of the men depicted as being armed, violent, and mentally ill were, it turned out, African American. A 1966 Chicago Tribune headline read “FBI Adds Negro Mental Patient To ‘10 Most Wanted’ List” above an article that advised readers to remain clear of “Leroy Ambrosia Frazier, an extremely dangerous and mentally unbalanced schizophrenic...who has a lengthy
criminal record and history of violent assaults." Similar themes are found in case studies in medical and psychiatric journals, as well as in 1960s-era pharmaceutical advertisements. Also around this time, the US Federal Bureau of Investigation (FBI) trumpeted links between African American men, violence, and mental illness in ways that intensified fears about black activist groups. FBI profilers famously diagnosed Malcolm X with "pre-psychotic paranoid schizophrenia" and with membership in the "Muslim Cult of Islam" while highlighting his militancy and his "plots" to overthrow the government. The FBI hung Armed and Dangerous posters throughout the southern states warning citizens about Robert F Williams, the controversial head of the Monroe, North Carolina chapter of the National Association for the Advancement of Colored People and author of a manifesto, Negros With Guns, that advocated gun rights for African Americans. According to the posters, "Williams allegedly has possession of a large quantity of firearms, including a .45 caliber pistol...He has previously been diagnosed as schizophrenic and has advocated and threatened violence."

It turned out that Malcolm X, Robert Williams, and other leaders were far from schizophrenic. But fears about their anti-government sentiments, guns, and sanity helped mobilise significant public response. The government cracked down on protest groups. 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 Gun Control Act of 1968. One cannot help but notice how different the terrain is in the present day. White shooters with mental illness beget reaffirmations of gun rights by leading politicians and by the National Rifle Association. Meanwhile, groups that advocate anti-government platforms and support broadening of gun rights, such as the Tea Party, take seats in Congress rather than being subjected to police scrutiny.

Questioning the links between guns and mental illness should not detract from the horrifying nature of events that transpired in Arizona. That shooting, like many others, is so far beyond the boundaries of acceptable behaviour that insanity understandably seems the most apt descriptor. And, of course, society needs to do everything it possibly can to take violent weapons out of the hands of potentially dangerous assailants. Yet the certainty of diagnosis—who else but a crazy person would commit such a crime?—is belied by the shifting nature of the discourse surrounding guns and mental illness. Beneath seemingly absolute questions of whether particular assailants meet criteria for particular mental illnesses lie ever-changing categories of race, violence, and indeed of diagnosis itself. As history reveals, decisions about which crimes American culture diagnoses as "crazy", and which crimes it deems as "sane", are driven as much by the politics and anxieties of particular cultural moments as by the innate neurobiologies of particular assailants. Perhaps more importantly, the focus on mentally ill crime effaces narratives that, by default or by design, fall out of collective purview. Again, understanding a person's mental state is vital to understanding their violent actions. But focusing so centrally on individualised psychology isolates the problem onto lone "deviants" while making it ever-harder to address how mass shootings might reflect cultural as well as individual states of mind. We in the USA live in an era that has seen an unprecedented proliferation of gun crimes, and indeed of guns. Yet this proliferation has gone hand-in-hand with a narrowing of the lexicon through which American culture can, or is allowed to, talk about the problem. Ironically, the question of whether "the insane" should be allowed to "bear arms" becomes the only publically permissible way to talk about questions of 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 oft-unsigned.

This emphasis on insanity risks taking the USA farther away from real conversations about guns at the very moment when more cultural debate seems badly needed, whether or not these guns are allowed, regulated, or banned. As reckoning with tragedies such as Tucson progresses, it seems imperative to recognise that connections between violence and mental illness, like connections between violence and political discourse, are nuanced and complex. Ultimately, the ways a society frames these connections reveal as much about its particular cultural biases and blind spots as it does about the acts of lone, and obviously troubled, individuals.

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Further reading
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