

# Combat Veterans on Civilian Gun Rights

Matthew Bowen & Angelica Chang

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# Combat Veterans on Civilian Gun Rights

Matthew Bowen<sup>1</sup> & Angelica Chang<sup>1</sup>

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**Abstract** A dramatic rise in mass shootings in the twenty-first century has compelled divisive political and legal agendas predicated on the Second Amendment and mental health. Challenges to absolute autonomy of firearm possession have broad policy implications, and given the enormous cultural entrenchment regarding private gun ownership in the United States, arouse intense objections to government invasion on a fundamental right. While the related legislative process, criminal justice and mental health research has accumulated, there is a lack of any data on the perspective of the subgroup perhaps most qualified to opine on the issue. This paper presents the perspective of veterans of combat from World War Two, Vietnam and the Middle East Wars (Iraq and Afghanistan) on the scope of civilian gun privilege. Older veterans of both earlier wars were unanimously against unlimited firearm ownership while younger veterans were equally divided. Given that military veterans and particularly older ones are reliably very conservative politically, these findings might be unexpected. But for three exceptions all veterans endorsed strict policies on criminal and mental background checks. The discussion examines the core factor of combat experience as the basis for the findings and illuminates considerations for policy decisions.

**Keywords** Combat veterans · Gun rights

The 1999 Columbine school incident is commonly referenced as the event that harkened the twenty-first century trend of a

marked increase in mass shootings in the United States. A sequence of carnage most infamously characterized by the Beltway sniper, Virginia Tech, Aurora theater, Sandy Hook and most recently Oregon school massacres—duly illuminated by a sophisticated media—have gradually imbued the national consciousness with the sense of a profound public health epidemic. Moreover, within this brief century, FBI data reveal a near tripling of what they define as *active-shooter* incidents in only its second half (NICS Operations 2013).

## The Gun Debate

The fundamental distinction made in allowing civilian firearm ownership is whether it is a basic right or a privilege. Legislation reviewed suggests that the vast majority of nations fall into the latter category (Parker 2011). Internationally then, the *Weltanschauung* opposes civilians owning firearms unless certain conditions and requirements are met. Gun ownership as a privilege rather than a right manifests as significant policy differences. At the more conservative end of the spectrum among developed nations is Japan. Handguns are banned and the procedure to acquire a rifle—bolt action only—is very stringent. With a population of 130 million in 2011, more people were murdered with scissors than guns, at 9 and 7, respectively (Talmadge 2013).

In marked contrast, the United States has traditionally embodied the belief of uncompromised gun ownership as a right. As stated by the owner of a rifle shooting range in Japan: “In the U.S., people believe they have a right to own a gun. In Japan, we don’t have that right. So our point of departure is completely different.” Grounded in interpretation of the Constitution’s Second Amendment, the *right* to bear arms is the sine qua non of the gun rights position.

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✉ Angelica Chang  
ac4by@virginia.edu

<sup>1</sup> 3100 Lake Brook Blvd Apt 130, Knoxville, TN 37909, USA

**Gun Control** Nothing motivates action more than the serial slaughter of innocent children, college students or citizens *per se*, buttressed by the agonized appeals of their families and communities. Thus political and many advocacy groups have aggressively galvanized on behalf of compelling legislative action predicated on gun control measures. Their position is focused first and foremost on limiting categories of weaponry, followed by a more stringent process for obtaining firearms and restricting or disqualifying ownership based on criminal and/or mental health history.

**Gun Rights** Most notably by the very influential National Rifle Association (NRA), gun control advocacy encounters strong resistance. Objections are primarily twofold: 1) the belief of unrestricted gun ownership as an inalienable right fundamental to the American way and underpinned by the Constitution; 2) that firearm-related tragedy is solely a function of the individual wielding them and therefore a matter of identifying and disqualifying the mentally unfit from possessing guns. The latter point strongly resonates with public opinion shaped by media portrayals revealing near stereotypic profiles of the gun-wielding mass murderers. Thus it is the control of unfit persons rather than guns which underpins the counter-response to increasing restrictions on firearm possession, for any such measures are uncompromisingly regarded as totalitarian. As the NRA states on its website, their fundamental purpose is “to continue securing the future of freedom.”

In an ironic twist, the stance against gun control is perhaps most evident in a letter sent to Vice-President Biden in the aftermath of the Sandy Hook school massacre. That communication was composed by the Sheriff who only several years later would be at the center of the Umpqua Community College mass shooting in Oregon. He stated that he represented his law enforcement colleagues and community-at-large in asserting that “laws that would prevent honest, law abiding Americans from possessing *certain firearms and ammunition magazines*” must not be tolerated in response to the acts of criminals (*italics added*) (Regulating Guns 2008).

### Selective Legislative Responses

Europe and the Commonwealth nations have responded to their comparatively rare occurrences of firearm mass murder events by enacting measures intended to expand limitations on the class of weaponry available and the conditions of firearm possession (Parker 2011). Concurrently, no country has been more affected by public mass shootings than the United States, nor has any been more divisive and inconsistent in their legislative responses to them.

The first major federal firearms law passed in the twentieth century was the National Firearms Act (NFA) of 1934 and in

response to Prohibition-era gangster war that peaked with the Saint Valentine's Day massacre of 1929. The era was famous for criminal use of firearms such as the Thompson submachine gun (Tommy gun) and sawed-off shotgun. Under the NFA, machine guns, short-barreled rifles and shotguns and other adapted weapons fall under the regulation and jurisdiction of the Bureau of Alcohol, Tobacco and Firearms (ATF) (Regulating Guns 2008).

In response to the rapid succession assassinations of Robert Kennedy and Martin Luther King, Jr., President Johnson enacted the Gun Control Act of 1968. Rather than revise individual possession rights, it focused on regulating interstate commerce in firearms by generally prohibiting interstate firearms transfers except among licensed manufacturers, dealers and importers (State 1968). Twenty-five years later in response to the assassination attempt of President Ronald Reagan and severe brain wound of his press secretary James Brady, the federal Brady Act (H.R.1025 1993) focused on the shooter by disqualifying persons, most notably stipulating those who 1) were under indictment for or convicted of any crime punishable by a year imprisonment, 2) an unlawful user of or addicted to any controlled substance, 3) illegally or unlawfully in the country, or 4) “committed to a mental institution by a court or other administrative or lawful authority” and those “adjudicated as mental defective” (H.R. 1025 1993). The latter category is defined by federal regulation to include persons deemed incompetent to manage their affairs in guardianship proceedings, incompetent to stand trial, or not guilty by reason of insanity (Pinals et al. 2015). Indeed, the factor of mental illness gained the most attention and was a response to the enormously newsworthy factor of the assassin's fixation on a Hollywood celebrity as the motivation for the shooting. The act's mandate of an immediate background check requirement for purchasing was not in effect implemented until five years later via the National Instant Criminal Background Check System (NICS 2010).

At the state level, Virginia passed expedited legislation in 2007 in response to the V-Tech campus massacre (the worst in U.S. history) albeit with reform predicated solely on mental health. Soon after its 2012 Sandy Hook Elementary School shooting, Connecticut enacted a ban on assault weapons and large-capacity magazines. A federal judge ruled the measure did not violate gun owners' constitutional rights, opining: “While the act burdens the plaintiffs' Second Amendment rights, it is substantially related to the important governmental interest of public safety and crime contro.” (Regulating Guns 2008).

In proximal years between these reactive state measures, major municipalities attempted to establish handgun bans, but were overruled by the Supreme Court. In *District of Columbia v. Heller* 554 U.S. 570 (2008) the court ruled in a close and divisive vote that the citizenry have an individual right to possess firearms, irrespective of membership in a militia, “for traditionally lawful purposes, such as self-defense within

the home.” However, within the majority opinion was the key element that the right to bear arms is limited, and qualified: “Like most rights, the Second Amendment right is not unlimited. It is not a right to keep and carry any weapon whatsoever in any manner whatsoever and for whatever purpose.” Soon after, the *McDonald v. Chicago*, 561 U.S. 742 (2010), decision determined whether the Second Amendment applies to the individual states. The Court held that the right of an individual to “keep and bear arms” as protected by the Fourteenth Amendment and Second Amendment applies to the states. Quite notably, both Supreme Court decisions had a 5–4 vote, thus clearly reflecting the extreme lack of consensus in the nation per gun control v. gun rights.

### Mental Illness, Violence and Gun Law Reforms

States were very slow to contribute records of mental health adjudications and commitments to the NICS. Thus, by December 2006, records citing “mental defect” constituted only 6.9 % of all active records in the NICS registry (convicted criminals accounted for the great majority of excluded persons), and only .4 % of all NICS denials (NICS 2010). Indeed, only 23 states were contributing mental health records by mid-2007, and the data reported were neither uniform nor complete (Regulating Guns 2008). Subsequently, has the system been succeeding? Through the years from 2000 through 2013, the system processed over 50 million background checks on prospective gun purchasers. Yet, more than 99 % of gun-disqualifying mental health records archived in the NICS have not resulted in any denials of attempted firearms purchases by prohibited individuals (Swanson and Felthous 2015).

For the obvious reason of the viral media portrayals of the individuals in mass shootings, mental illness as a basis for firearm restriction is the realm where the two disparate sides meet. However, review of the best available national data (Appelbaum and Swanson 2010) beg whether the disproportionate emphasis on restricting firearms access by persons with mental disorders reflects sound public policy or is a manifestation of exaggerated public perceptions of the danger associated with mental illnesses. Only 3 %–5 % of violent acts are attributable to serious mental illness (Swanson 1996), and most of those acts do not involve guns (Monahan et al. 2001). Most studies concur that the added risk of violence, if any, conferred by the presence of a serious mental disorder is small (Appelbaum 2006). Moreover, there are no data to indicate whether the categories of persons with mental illnesses targeted by federal and state laws—that is, persons subject to involuntary commitment or found incompetent to manage their affairs—are actually at higher risk than other groups with mental illness. One of the strongest predictors of violence among persons with mental illness is a history of violent crime.

But having a violent criminal record would already disqualify an individual from purchasing a gun, irrespective of any coincident mental health adjudication (Pescosolido et al. 1999).

What is known about violence risk in populations can be apprehended several ways: absolute risk, relative risk, and attributable risk. The “absolute risk” aspect is that the vast majority of people with mental illness in the community are not violent. The “relative risk” aspect is that people with serious mental illness are, indeed, somewhat more likely to commit violent acts than people who are not mentally ill. And the “attributable risk” aspect is that violence is a societal problem caused largely by issues besides mental illness, such as excessive availability of firearms (Swanson 2011).

Two very salient considerations need be considered. One is whether people with mental illness are more likely to acquire, possess and carry guns. The National Co-morbidity Study-Replication examined rates of gun access, gun carrying, and safe storage among people with and without lifetime mental disorders in the community and found no statistically significant association (Ilgen et al. 2008). The second consideration is whether firearm violence is more a matter of harm to self or others. Suicides account for 61 % of all firearm fatalities in the United States in 2010 as recorded by the Centers for Disease Control and Prevention (CDC) (Injury 2015). In spite of such evidence, Gallup polling data from 2013 showed that 48 % of adult Americans blame the mental health system “a great deal” for mass shootings in the United States, whereas fewer (40 %) blame easy access to guns; an inadequate mental health system is perceived as the top cause of mass shootings (Saad 2013).

Indiana (Indiana 2014) and Connecticut (2011 Connecticut 2011) both have laws allowing law enforcement to remove firearms from individuals exhibiting dangerous behavior (but who may or may not have mental illness). Illinois passed a “concealed carry” law (IDHS 2014) that included extensive new requirements for its Firearms Owner Identification system. Thus persons who must be reported include individuals who have been admitted to a psychiatric hospital and those determined to have a developmental or intellectual disability (Illinois 2005). The effectiveness of such policies has not yet been studied. While both clearly well-intended and intuitively sensible, such laws also risk the unintended adverse consequences of deterring people with mental health problems from seeking care voluntarily, and reinforcing stigma associated with mental illness (Appelbaum 2013; Swanson 2013). Consistent with this view, the American Psychiatric Association position statement (Pinals et al. 2015) recommends against policies that mandate psychiatrists and other professionals to report risky patients to law enforcement authorities for consideration of firearms restriction, cautioning that such regimes may have a chilling effect on patients’ help-seeking and disclosures.

A meta-analysis of the literature on violence in patients with schizophrenia spectrum disorders in community settings

reported that the risk of violence was on average three to five times higher for men with schizophrenia, and four to 13 times higher for women with schizophrenia, compared with their counterparts without schizophrenia in the general population (Pinals et al. 2015). Thus, while persons with the most severe psychiatric disorders are inarguably more prone to violence, it is typically impulsive and episodic rather than reflecting the systematically planned singular event of mass killings. Moreover, as already noted, violent acts by those with severe mental illness do not involve firearms 95 % of the time.

If the public assumption that the most psychologically impaired people are most responsible for gun violence has proven statistically untrue, the question necessarily becomes what categories of emotional disturbance do reveal the greater likelihood of perpetration. Swanson and colleagues (2015) present new analyses from the National Co-morbidity Survey-Replication (NCS-R) estimating nearly 1 in 10 adults in the United States has both access to firearms and a significant problem with anger and impulsive/aggressive behavior. A number of common mental health conditions – including personality disorders, post-traumatic stress disorder, and alcohol use disorder – tend to be associated with this violence-prone mix of pathological anger and gun access. Persons with impulsive angry behavior who carried guns were significantly more likely to meet diagnostic criteria for a wide range of mental disorders, including depression, bipolar and anxiety disorders, PTSD, intermittent explosive disorder, pathological gambling, eating disorder, alcohol and illicit drug use disorders, and a range of personality disorders. However, only a small proportion of angry people with guns have ever been hospitalized for a mental health problem – voluntarily or involuntarily – and thus most would not be prohibited from firearms possession under the involuntary commitment exclusion. The NCS-R data provide timely evidence that the existing mental health-related criteria for gun disqualification are under-inclusive. The authors suggest that persons who pose a danger to others due to a pattern of impulsive angry behavior might be more effectively deterred by a policy of extending gun restrictions to persons convicted of certain crimes that correlate with violence risk, or by a pre-emptive gun seizure law that applies to “dangerous persons.” Behavioral risk-based approaches to firearms restriction, such as expanding the definition of gun-prohibited persons to include those with violent misdemeanor convictions and multiple DUI convictions, could be a more effective public health policy.

### The Combat Veteran Survey

As the basis for university classes, the senior author established the Combat Veterans Oral History Project and has conducted approximately fifty videotaped documentary

interviews over the last five years. Subjects are equally represented by World War Two (beginning with Pearl Harbor), Vietnam and the Iraq/Afghanistan wars, also with several Korean War veterans. Very recently in response to the continued occurrence of firearm mass murders, these veterans were revisited via telephone to participate in a survey on their opinions on civilian gun possession. Given the prior experience of a lengthy interview, rapport was already established and the subjects very forthcoming. Sixteen combat veterans each from World War Two (WW2), The Vietnam War (VW) and The Middle East Wars (Iraq & Afghanistan) ( $N = 48$ ). The survey process was structured as follows:

*In the new century we have had an escalation of mass shootings in this country. This anonymous survey for academic purposes seeks your opinion on the following four questions:*

*Do you believe that civilians in this country should continue to have the right to own high-capacity, rapid-fire weapons such as the AR-15, AK-47 Kalishnikov series, etc.?*

*Do you believe civilians should be allowed firearms for home defense (and if so with what limits, if any)?*

*Do you believe civilians should be allowed firearms for concealed carry (and if so with what limits, if any)?*

*Do you believe stricter background check policies on criminal and mental health history are needed for control of firearm access (and if so, by what means)?*

Tables 1, 2 and 3 present the results for the Yes / No component of the responses:

These data reveal that 100 % (32/32) of WW2 and Vietnam combat veterans opposed civilians having the right to possess rapid-fire high capacity weaponry. Their opinions then diverged somewhat with the oldest veterans (WW2) being more conservative on the right to possess arms for home defense at 81 % (13/16) or concealed carry at 43 % (7/16). All WW2 veterans in favor of allowance for home defense and concealed carry did so with the condition of limiting weaponry to lesser caliber revolvers (no greater than a .38) for handguns and traditional hunting weapons such as shotguns and bolt-action rifles in the home. Vietnam veterans were unanimously in support of home-defense arms (16/16) and in the great majority in favor of concealed carry rights at 87.5 % (14/16). Conditions were then also unanimously imposed with a similar belief in traditional hunting weapons in the home, but while also setting limits on round capacity at maximum of 10 but allowing in half the cases for semi-automatic handguns. For concealed carry this group agreed

**Table 1** WW2 combat veterans responses on civilian gun rights and policy

Subject	High-Capacity Rapid-Fire <sup>a/na</sup>	Home Defense <sup>a/na</sup>	Concealed Carry <sup>a/na</sup>	Criminal History <sup>C</sup>	Mental Health <sup>M</sup>
1	No	Yes*	Yes*	Yes	Yes
2	No	No	No	Yes	Yes
3	No	Yes*	No	Yes	Yes
4	No	Yes*	No	Yes	Yes
5	No	Yes*	Yes*	Yes	Yes
6	No	Yes*	Yes*	Yes	Yes
7	No	Yes*	Yes*	Yes	Yes
8	No	Yes*	Yes*	Yes	Yes
9	No	Yes*	Yes*	Yes	Yes
10	No	Yes*	No	Yes	Yes
11	No	Yes*	No	Yes	Yes
12	No	Yes*	No	Yes	Yes
13	No	Yes*	No	Yes	Yes
14	No	Yes*	Yes*	Yes	Yes
15	No	No	No	Yes	Yes
16	No	No	No	Yes	Yes

<sup>a/na</sup> Allow/Not Allow

<sup>C</sup> Greater or any control measures for background checks and restrictions based on criminal history

<sup>M</sup> Greater or any control measures for background checks and restrictions based on mental history / status

\*Conditional to limiting weaponry to hunting rifles / shotguns and lesser caliber revolvers in the home and lesser caliber revolvers only for concealed carry

with limiting to lesser caliber (no greater than a .38) revolvers only. The two older veteran groups were then again in unanimity in favoring stricter policy on background checks for both criminal (32/32) and mental health (32/32) history.

The considerably younger veterans of the Middle East wars were by comparison much more inclined to endorse a pro-gun posture. The group was equally divided on permitting rapid-fire high capacity weaponry (8 in favor / 8 against). Consistent with this more permissive trend they were unanimously in favor of retaining both home defense and concealed carry rights (16/16). All of those against rapid-fire high capacity weaponry further imposed limits on home defense and concealed carry weaponry similar to the older groups. Among those endorsing no restrictions on weapon ownership, home defense rights were unqualified while limits on concealed carry were endorsed by two. However, in these two cases semi-automatic handguns were favored and with greater round capacity than allowed for by the older (Vietnam) group had allowed for in the home.

**Content Analysis** Select descriptive comments from this extraordinarily unique population of veterans of heavy combat across three wars and generations illuminates their perspective. World War Two veterans rapid-fire high capacity weaponry: “God doesn’t intend for people to have such things in civilian life”... “There is no purpose at all for such weapons outside of war”... “Military guns are just for the military”...

Why would people need military weapons in civilian life?”... “For civilians to have weapons like that is pure crazy”... “It’s crazy what is going on with all these guns now”... “I do not think people should have those kinds of guns, it just makes for now good.” Vietnam veterans: “Veterans understand firepower and military weapons are not for civilian use”... “I cannot understand the desire for those guns outside of combat”... “No! They are attack weapons”... “Those weapons are only designed for combat circumstances”... “Average people having those weapons is crazy.” Middle East veterans *against* continued allowance of rapid-fire high capacity weaponry: “They’re only made as military hardware for killing people”... “They need to remain strictly in the hands of the military”... “They are designed solely for the purpose of slaughter”... “There’s absolutely no need for such destructive firepower outside of the battlefield”... “Nobody needs forty rounds to protect their bedroom window.”

From that half of the Middle East war veterans group *in favor of retaining* rapid-fire high capacity weaponry: “We cannot impose limits on the Second Amendment”... “I do not want to tread on the Second Amendment”... “We should retain our full rights as citizens but focus on restrictions on particular people”... “Criminals will get those guns no matter what.” Half of this sub-group belonged to recreational gun clubs wherein rapid-fire high-capacity “long guns” e.g., AR-15 s, etc., were used.

**Table 2** Vietnam War combat veterans responses on civilian gun rights and policy

Subject	High-Capacity Rapid-Fire <sup>a/na</sup>	Home Defense <sup>a/na</sup>	Concealed Carry <sup>a/na</sup>	Criminal History <sup>C</sup>	Mental Health <sup>M</sup>
1	No	Yes*	Yes*	Yes	Yes
2	No	Yes*	Yes*	Yes	Yes
3	No	Yes*	Yes*	Yes	Yes
4	No	Yes*	Yes*	Yes	Yes
5	No	Yes*	Yes*	Yes	Yes
6	No	Yes*	Yes*	Yes	Yes
7	No	Yes*	Yes*	Yes	Yes
8	No	Yes*	Yes*	Yes	Yes
9	No	Yes*	Yes*	Yes	Yes
10	No	Yes*	Yes*	Yes	Yes
11	No	Yes*	Yes*	Yes	Yes
12	No	Yes*	Yes*	Yes	Yes
13	No	Yes*	Yes*	Yes	Yes
14	No	Yes*	Yes*	Yes	Yes
15	No	Yes*	No	Yes	Yes
16	No	Yes*	No	Yes	Yes

<sup>a/na</sup> Allow/Not Allow

<sup>C</sup> Greater or any control measures for background checks and restrictions based on criminal history

<sup>M</sup> Greater or any control measures for background checks and restrictions based on mental health

\*Conditions ranging to limiting weaponry to hunting rifles / shotguns, semi-automatic handguns with a maximum of 10 rounds and lesser caliber revolvers in the home and for concealed carry

Tellingly, while all Middle East war subjects favored strict policy on restricting privileges from convicted violent offenders, unlike the older veterans they were not unanimously in favor of enhanced policy on mental health background checks and restrictions, with three subjects endorsing “No.”

**Data on Political Orientation and Demographics** Recent Gallup polling of the general population found only 23 % of Republican respondents favor gun laws being more restrictive (Swift 2014). Moreover, an earlier poll found that veterans of all ages are more likely to be Republican than are those of comparable ages who are not veterans (Newport 2009). These findings were confirmed three years later among a large sample of younger veterans in a Pew survey showing that in being significantly more republican than democrat, post-9/11 veterans’ political leanings are the reverse of the civilian public (Taylor 2011). Veteran status is just slightly above 10 % for men under age 35, rises slightly among men between 35 and 54, and then begins to rise sharply among men 55 years of age or older. Veteran status levels off at about the 50 % mark among men in their 60s, and rises again after that age point, peaking at the 70 % + level among men aged 80 or older (Newport 2009). 91 % of American veterans are male, with that percentage in the Vietnam and World War Two eras much higher than in the twenty-first century. The present survey was 97 % male as 31/32.

Most recently and specific to the issue of rapid-fire high-capacity weaponry, 70 % of Democrats back an assault-weapons ban, while slightly less than half of Republicans (48 %) favor this proposal (A Public Opinion 2015). The survey reported nearly two-thirds of women (65 %) favor banning assault weapons compared with 48 % of men. In regard to age, the trend is of increasing age equating with a more conservative view on assault weapons, with half (49 %) of young adults against assault weapons but nearly two-thirds (63 %) of the over 65 age group in favor of banning them. Finally, educational attainment correlates with attitudes toward assault weapons, wherein less than half of high school or less educated respondents favor banning assault weapons while two-thirds (66 %) of college graduates do.

In the current survey, none of the World War Two veterans had greater than a high school education and most of them less (the majority being reared on a farm during the Great Depression). Only two (12.5 %) of the Vietnam veterans had academic education beyond high school. Five (31 %) of the Middle East War veterans had degrees beyond high school.

### The Combat Factor

In both World War Two and the Vietnam War, approximately 10 % of veterans were engaged in combat to that most extreme degree of exchanging gunfire (on land, in the air, or at sea). In



**Table 3** Middle East War combat veterans responses on civilian gun rights and policy

Subject	High-Capacity Rapid-Fire <sup>a/na</sup>	Home Defense <sup>a/na</sup>	Concealed Carry <sup>a/na</sup>	Criminal History <sup>C</sup>	Mental Health <sup>M</sup>
1	No	Yes*	Yes*	Yes	No
2	Yes	Yes	Yes	Yes	Yes
3	No	Yes*	Yes*	Yes	Yes
4	No	Yes*	Yes*	Yes	Yes
5	Yes	Yes	Yes*	Yes	Yes
6	No	Yes*	Yes*	Yes	Yes
7	Yes	Yes	Yes	Yes	No
8	No	Yes*	Yes*	Yes	Yes
9	No	Yes*	Yes*	Yes	Yes
10	Yes	Yes	Yes	Yes	No
11	Yes	Yes	Yes	Yes	Yes
12	No	Yes*	Yes*	Yes	Yes
13	No	Yes*	Yes*	Yes	Yes
14	Yes	Yes	Yes*	Yes	Yes
15	Yes	Yes	Yes	Yes	Yes
16	Yes	Yes	Yes	Yes	Yes

<sup>a/na</sup> Allow/Not Allow

<sup>C</sup> Greater or any control measures for background checks and restrictions based on criminal history

<sup>M</sup> Greater or any control measures for background checks and restrictions based on mental health

\*Conditions ranging from limits of 6 to 20 rounds capacity

stark contrast—taking into account all branches of the service—over the course of the Iraq and Afghanistan (Middle East) Wars, troops who actually exchanged gunfire approximated less than .01 % (Lubin 2013). These figures reflect the vast difference in the nature of an “all out” war (WW2 and Vietnam) versus a contained conflict engaging a limited and comparatively quite ambiguous enemy. Still, what is known is that the very great majority of veterans in all of our modern wars did not experience gunfire exchanging combat. In stark contrast, all 48 participants selected for the current survey were veterans of the most extreme combat, and on that basis were initially selected and interviewed in-depth by the senior author as subjects for The Combat Veterans Oral History Project.

As a starting point for understanding the antipathy of this sample of combat veterans toward civilians retaining rights to military-intended weaponry, consideration need be given to the very well-established finding that violence begets violence. The key departure becomes a matter of that research being germane to civilian contexts. Indeed, the larger incidence of interpersonal violence in impoverished urban environments does not reflect the process of immersion in sustained and extensive killing in overseas combat and then reintegrating into the native civilian society. Nor, for that matter, does the consistent finding of enhanced aggression in younger males who developmentally consume more violent media, or *any* strictly civilian bred correlation with violent behavior. There are several key elements comprising the core

of what is unique about combat in the human experience, with those being: it is a phenomenon wherein killing occurs to an extent (and often in a manner) utterly *inconceivable* in civilian life; such killing is the central purpose of a cohesive group comprised of hundreds of thousands trained to accomplish that purpose; versus the multi-modal and longitudinal developmental arc for persons acquiring violent behavior in society, killing at war occurs for the individual combatant in a comparatively *very* condensed time frame and with no familiar prior or parallel psychosocial structures to enflame it; and, quite importantly, it occurs in an alien land and culture. As a result of these variables there is an extreme dissociation from one's civilian sensibilities while deployed, and upon returning stateside persistence of dissociation then fortified by cognitive dissonance given the luxury of now being able to contemplate what occurred. When in combat, as stated by a highly decorated World War Two veteran; “If you could actually think for one moment about what you were doing, you probably wouldn't do it.” Successful reintegration into civilian life requires the undoing of one's combat character, a typically quite long-term endeavor comprised of unconscious and conscious processes predicated for the very great part on a combination of restoring a semblance of physiologic homeostasis and approximating a resolution of moral wounds (Bowen 2015). On account of both the cultural *zeitgeist* and state of the mental health disciplines, for veterans of World War Two and Vietnam, those processes were almost exclusively the former.

That the veterans across three wars in this survey were in the large majority unconditionally against civilian rights to combat worthy weaponry suggests the lifetime effect of having experienced gunfire exchanging combat. Such combat creates to the most extreme extent a forum for the consequences of what high-capacity rapid-fire weaponry can do to human beings. The only remotely comparable manifests of this in civilian life have been the crack cocaine drug wars of the 1980s and early 90s, followed by the very increased incidence of lone killer mass shootings of more recent years. Still, those civilian forums are dwarfed by the magnitude of the combat experience, and, furthermore in contrast to combat, occur in a context of being enormously condemned rather than condoned. As factors shaping the desire to confine gunfire slaughter to foreign battlefields, they are enormous.

*Aging Age* is a consistent predictor of aggressive values and conduct in males, both in the aggregate and for individuals. The most common finding across countries, groups, and historical periods shows that violence against persons is a very young man's endeavor (Ulmer and Steffensmeier 2014). The main assertion of socioemotional selectivity theory (SEST) is that when limits on one's time remaining in life are perceived, present-oriented goals related to emotional meaning are prioritized in contrast with knowledge and/or future based priorities. When time is perceived as open-ended, knowledge-related goals are prioritized. The inextricable association between time left in life and chronological age ensures age-related differences in social goals (Carstensen 2006). Appreciation for the value and fragility of life is quite enhanced, and a sociocultural perspective that primed to the fragility of life increase motivation to derive emotional meaning in both the young and old (Fung and Carstensen 2014). Because the elderly are particularly confronted with their biologic mortality, they are of course more inclined to reflect the theory. This sample of combat veterans approximately aged ninety for World War Two and their later sixties for Vietnam were unanimously selective of the pointedly life preserving response of outlawing high-capacity rapid-fire weapons in the civilian realm. Their overall responses for that category were emotionally driven. By comparison, when deciding on policies for home defense and concealed carry, there process was considerably more cognitive as weighing rational limits on firepower that overall still allowed for gun privilege in those realms.

**Proximity to and the Nature of the Combat** That Middle East war veterans ranging in age from later twenties to early thirties were evenly split on the question of civilian rights to combat-worthy weaponry suggests a factor of their youth in contrast to their much older counterparts. Again drawing from the voluminous research of SEST, apprehending combat weaponry in civilian life evoked a consistently emotion-based view on behalf of life preservation for older veterans

compared to half the younger sample having a reasoned basis for arguing against restrictions. However, there are other salient considerations influencing the comparative tolerance of combat worthy weaponry among younger veterans. The first is the quite recent experience of combat; a mere decade or less versus forty-five to seventy five years for the older groups. This lends to the younger veterans being much more inclined to still be in combat mode within the core and complex neuroendocrine systems that overtake one's being at war and which imprint the post-traumatic stress disorder (PTSD) syndrome.

The next consideration for the younger warrior is the nature of their combat experience. Indeed, it is best condensed into a remark exclaimed by a World War Two veteran: "You don't know who your enemy is over there!" This uncertainty about who might be intending to kill you carries over into civilian life. The next factor is the lack of closure on account of the age of global terrorism. The wars experienced by the older veterans were physically left behind. World War Two ended with surrender, a phenomenon that has not occurred in an American conflict since. Vietnam ended by our complete withdrawal. Thus the older veterans returned stateside able to—geographically at least—leave the battlefield behind. In complete contrast, episodes of domestic occurring terrorism such as 9/11 and the attack on the marine corps recruiting station in Tennessee make clear that the 'enemy is among us' and hugely impairs the capacity to dull one's combat edge. The senior author has been informed by numerous Middle East veterans (*and* one of Vietnam) that they not only began to arm themselves in response to both the spate of mass killings and the Tennessee attack, but in many cases confide that they have resumed a sense of being primed for a firefight in their civilian life at large. To be sure, these phenomena dovetail with the last factor contributing to half the younger veteran sample polling in favor of retaining combat-intended firearms for civilians. All of those expressed concerns with the diagnosis of PTSD being a stipulation for disallowing firearm privileges. Furthermore, two-thirds (6/8) of the no restrictions subsample *have* the diagnosis.

## The Culture War

In his recent book, *Gunfight: The Battle over the Right to Bear Arms in America*, law professor Adam Winkler examines America's four-centuries-long political battle over gun control and the right to bear arms. His analysis reveals how guns—*not* abortion, race, or religion—are at the heart of America's cultural divide (Winkler 2013). The core of the NRA's support comes from white, rural and relatively less educated and older voters. That demographic equation reflects entirely the overwhelming majority of the sample of older veterans in the present survey. Moreover, white and relatively less educated e.g.,

less than a college graduate, also reflect the majority of the younger veterans in the sample.

The NRA polled one thousand members in 2013 and found that 89 % oppose banning the semi-automatic weapons otherwise referred to as assault weapons and categorized in the present survey as high-capacity rapid-fire. Thus in respect to the single most salient point of contention in the gun control versus gun rights debate, the NRA membership and our sample of combat veterans World War Two through the present are nearly at opposite poles, with the veterans 83 % in favor of banning. Again given the already described demographic and political synchrony between the modal NRA member and veterans of the most extreme military combat, the enormous discrepancy in their outlook on military intended weaponry in the civilian realm can only be accounted for by the prior analysis of the combat factor.

That the NRA membership—comprised of 4.3 million members—polls as it does is elucidated in the recent volume by sociologist Scott Melzer. Enlivened by a rich analysis of NRA materials, meetings, leader speeches, and unique in-depth interviews with NRA members, *Gun Crusaders* focuses on how the NRA constructs and perceives threats to gun rights as merely opportune leverage for a much broader anti-American agenda (Melzer 2009). Melzer portrays the NRA as possessed of an impassioned role as freedom fighters in a cultural war defending America's most fundamental individual rights and liberties, at once condensed into an emanating from their interpretation of the Second Amendment.

Socioemotional selectivity theory (SEST) seems again to aptly account for the polarity in views on high-capacity rapid-fire weaponry owned by civilians. Combat veterans—and in our sample entirely so when elderly—reference from the indelible feeling states imbued by an extraordinarily horrific experience of death and mortality that cannot be duplicated in American civilian life (wherein extended, large scale combat has not occurred in 150 years). In contrast, the NRA membership references primarily from the standpoint—emotionally charged though it may be—of a political process underpinning a fundamental cultural encounter. Certainly the networking, fundraising, lobbying, polling and voting that comprise the organization's activities are cognitive activities in service of an instrumental future outcome.

Perhaps the overriding impact of this study is that, unlike when other figures or groups adopt a position against civilian access to high-capacity rapid-fire weaponry, the NRA and pro-gun populace can ill afford to condemn decorated combat veterans of World War Two, Vietnam and the Middle East as Un-American. Nor, for that matter, is it feasible for the overwhelmingly pro-military, pro-gun constituency to accuse combat veterans of being anti-gun. Therefore, as a subgroup with the potential to mitigate the extreme polarity between the pro-gun and anti-gun movements, combat veterans opposed to civilian ownership of battlefield intended

weaponry are uniquely positioned. The general voting population primarily perceives gun violence and in particular mass shootings as a factor of mental illness rather than the allowance of the weaponry employed (Swanson et al. 2014). In opining otherwise that the primary issue in mitigating civilian gun violence is the class of allowable weaponry, combat veterans as the most experientially qualified voice on the consequences of weapons have the potential to influence attitudes while also possibly diffusing political polarity.

Our analysis also suggests the need to identify and poll other populations whose function lends to an exceptionally informed opinion. Objectively, law enforcement and emergency services medical personnel are best qualified in the civilian realm to offer an experienced view on the consequences of high-capacity rapid-fire weaponry. Subjectively of course, the close and even merely acquainted survivors of victims of firearm violence become very emotionally motivated to impose limits. Quite importantly for the purpose of mitigating such an embedded cultural clash, as with combat veterans, these other sub-populations likewise blend geographically, demographically and politically with the pro-gun population. While liberal politicians comprise a persona onto which the pro-gun movement can channel accusations and condemnation, similar oppositional attacks upon the motivations and worth of combat veterans, law enforcement, emergency medical personnel and the survivors of gun violence are comparatively if not entirely untenable. By providing empirical knowledge derived from informed and respected groups that also critically cut across party lines, social-science scholars have the potential to compel the development of policy less amenable to being reflexively challenged on entirely theoretical and political grounds.

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**Matthew Bowen** is an instructor in Military Science at James Madison University and a practicing clinical psychologist with combat veterans. He is founder and curator of the Combat Veterans Oral History Project.

**Angelica Chang** graduated from the University of Virginia with a degree in Cognitive Science and Psychology. She is a research assistant for the Combat Veterans Oral History Project currently pursuing an MBA degree.