STALKING (OBSESSATIONAL FOLLOWING): A REVIEW OF SOME PRELIMINARY STUDIES

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ABSTRACT. Obsessional following is a "stalking" behavior in which a person engages in an abnormal or long-term pattern of threat or harassment directed toward a specific individual. In a review of preliminary research during the past 20 years, the author finds 10 studies, all nonrandom samples of convenience, published between 1978 and 1995 in which obsessional followers charged with criminal behavior or investigated by law enforcement (N = 180) were identified. Aggregate data from these studies suggest that obsessional followers were likely to be males in their mid to late thirties with prior psychiatric and criminal histories. There was often a chronic history of failed heterosexual relationships and unemployment, but on average the subjects were more intelligent than other criminal offenders. Axis I mental disorders and Axis II personality disorders were common and varied. Approximately one-half of obsessional followers threatened the victims, but usually were not physically violent. Frequency of any personal violence, depending on the study, was 3–36%. Incidence of homicide was less than 2%. The author theorizes that obsessional followers, perhaps a subset of stalkers in general, evidence abnormal, "preoccupied" attachment patterns, their pursuit fueled by a disturbance in their narcissistic fantasy linking them to their victims. Such disruption is usually caused by an acute or chronic rejection that stimulates rage as a defense against shame.

IT IS DIFFICULT to ignore, if not be influenced by, the commercial media’s attention to an abnormal social behavior ominously called stalking. Notable forensic cases come to mind, including John Hinckley, Jr. (Caplan, 1987) and Prosenjit Poddar (Tarasoff v. Regents, 1976), both of which predated popular fascination with this behavior, which I clinically label, in some cases, obsessional following. Legal opinion has likewise proliferated (McAnaney, Curliss, & Abeyta-Price, 1993), but empirical data concerning the clinical characteristics of these individuals are remarkably scant. The mental health professional is left to his or her own anecdotal experience, or the speculation of other colleagues, to formulate treatment and risk management strategies, when obsessional following presents itself in clinical practice.

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The intent of this article is to review the preliminary clinical research on obsessional following published in scientific journals in the past 20 years. Although the studies are few in number, they begin to illuminate this behavior that occasionally leads to criminal prosecution. Discussion will include, in turn, the suggestive demographic characteristics, psychiatric diagnoses, pursuit characteristics, victim characteristics, violence risk (including threats), psychodynamics, and treatment of the obsessional follower.

METHODS

Defining a clinical population on the basis of one pattern of behavior is quite problematic, and obsessional following is no exception. I have eschewed the term stalking for several reasons: most importantly, to avoid mimicking its sensationalistic use by the popular media, and to reserve its proper use for the description of a statutorily defined criminal act, now codified in similar ways in all 50 United States. The legal definition of stalking is typically “the willful, malicious, and repeated following and harassing of another person that threatens his or her safety” (Meloy & Gothard, 1995, p. 258).

The term obsessional follower, and its use in this review, is drawn from two clinical studies of this population conducted by Zona, Sharma, and Lane (1993) and Meloy and Gothard (1995). It describes a person who engages in an abnormal or long-term pattern of threat or harassment directed toward a specific individual. An abnormal or long-term pattern of threat or harassment is defined as more than one overt act of unwanted pursuit of the victim that is perceived by the victim as being harassing. The term is not a diagnosis, but instead a pattern of behavior and inferred motivation.

The term obsession is likewise difficult. Psychoanalytic theory has traditionally used it to refer to an unwelcome, or ego dystonic thought that repetitively forces itself into consciousness (Hinsie & Campbell, 1974). The DSM-IV (American Psychiatric Association, 1994) essentially retained this definition, but added, “even in adults there is a broad range of insight into the reasonableness of the obsessions . . . any given individual’s insight may vary across times and situations” (p. 418). Zona et al. (1993) equated obsession with persistent ideas, thoughts, impulses, or images that are clearly ego syntonic, and disavowed its unwanted or alien quality. My emphasis on the term obsession is the repetitive and persistent nature of the idea, thought, impulse or image, in contrast to its relationship to the ego. The latter characteristic may, in fact, be more temporally unstable than its quality of preoccupation, and may vary according to both the personality and mood of the individual. Use of the term obsessional follower, moreover, is not meant to infer that a diagnosis of obsessive-compulsive disorder or obsessive-compulsive personality disorder (DSM-IV) is warranted.

Use of the term violence in this review refers to an intentional act of aggression that results in, or is likely to result in, physical injury to another person. When data are available on other kinds of violence, such as sexual or property, the differentiation will be made. The term erotomania refers to the delusional disorder, erotomaniac subtype, in which the individual falsely believes he or she is loved by another. Although the DSM-IV (American Psychiatric Association, 1994) precludes a diagnosis of delusional disorder, erotomaniac subtype, in the presence of schizophrenia or a mood disorder, I will refer to erotomania even if it is secondary to one of these diagnoses.

My review of the research focuses upon identification of all clinical cases, or studies, within which the subjects meet two criteria: First, they are clearly defined as obsessional followers (Meloy & Gothard, 1995; Zona et al., 1993); and second, all of the subjects had law enforcement contact or criminal charges arising from their obsessional following. Several

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1In the Zona et al. (1993) study, an unknown proportion of the subjects was investigated by the Los Angeles Police Department Threat Management Unit, but never criminally charged.
subjects from various studies were eliminated because they were exclusively treatment cases, the obsessional following was ambiguous, or the evaluation was prompted by a civil issue, such as commitment, and never resulted in contact with law enforcement. This decision was made to focus the review on the obsessional followers most likely to pose a risk management problem for the mental health clinician.

RESULTS

The review of the clinical research yielded 10 studies published between 1978 and 1995. The studies are listed in Table 1. The 10 studies were conducted by 19 different researchers in eight research groups. When specific subjects subsequently appeared in another publication, or samples were duplicated in different publications, they were not counted and the other publication is referred to in parentheses. All of the studies involved nonrandom samples of convenience, which limits their generalizability. On the other hand, cohorts were gathered from three large urban areas in the United States (New York, Los Angeles, and San Diego) and across three continents (Europe, Australia, and the United States), which lends a certain amount of external validity to the replicated findings of any one study. The studies depended upon retrospective data, which in some cases were only archival (Zona et al., 1993), and in other cases were a combination of archival and clinical data (Harmon, Rosner, & Owens, 1995; Meloy & Gothard, 1995). All of the studies were noncomparative, except for within group comparisons in the Zona et al. (1993) and Harmon et al. (1995) studies, and between group comparisons in Meloy and Gothard (1995). Typically in behavioral science the investigation of an arguably new or novel observation begins with single or multiple case studies, proceeds to noncomparative and larger samples, and matures with comparative studies of larger samples. Obsessional following is no exception: Eighty-seven percent of the aggregate sample was gathered in four studies published between 1993 and 1995 (Harmon et al., 1995; Meloy & Gothard, 1995; Mullen & Pathé, 1994a; Zona et al., 1993).

The total sample size (N = 180) is large enough to draw some preliminary findings concerning obsessional following, with some limitations. Most importantly, this review is not a meta-analysis because the studies and subjects are too few in number and, therefore, no inferential statistical methods can be applied to the data. Furthermore, incidence of obsessional following in the general population, or even in a clinical population, cannot be determined because the population characteristics from which these subjects were drawn are rarely described. Likewise frequency of violence in these subjects cannot be expressed as a base rate because the time frame within which the violence occurred was often unspecified. A violence frequency has not been given for the small sample studies because it would be statistically misleading.

Whether or not frequency of obsessional following is increasing in the population also remains unanswered because none of the studies, with one exception, addresses this issue. Harmon et al. (1995) found a nearly threefold increase in stalkers as a percent of referrals to the Forensic Psychiatry Clinic (0.6% to 1.7%) in New York City between 1987 and 1993. Although this finding is only suggestive, it is consistent with the change in legislation concerning stalking in the United States, of which the first law was signed in California in 1990.

The measurable psychological characteristics of obsessional followers also remain unknown, because there are virtually no published studies which have utilized any psychological tests. The one exception is Meloy's (1992) sample of six violent erotomanic or borderline erotomanic individuals, four of whom were tested using standardized psychological instruments, including the Rorschach and Minnesota Multiphasic Personality Inventory.

Perhaps the most important caveat in the application of this review to clinical work and further research is the likely underrepresentation of spouses or ex-spouses in these studies.
TABLE 1. Research Studies of Obsessional Followers Charged With or Convicted of Criminal Behavior

<table>
<thead>
<tr>
<th>Study</th>
<th>Population</th>
<th>Selection Criteria</th>
<th>N</th>
<th>Violence Freq.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goldstein (1978)</td>
<td>NY forensic pract.</td>
<td>erotomania</td>
<td>1</td>
<td>—</td>
</tr>
<tr>
<td>Taylor et al. (1983)</td>
<td>112 psychotic men in British prison charged with violence</td>
<td>erotomania</td>
<td>3</td>
<td>—</td>
</tr>
<tr>
<td>Goldstein (1986, 1987)</td>
<td>unknown</td>
<td>erotomania</td>
<td>7</td>
<td>—</td>
</tr>
<tr>
<td>Noone &amp; Cockhill (1987)</td>
<td>unknown</td>
<td>erotomania</td>
<td>3</td>
<td>—</td>
</tr>
<tr>
<td>Zona et al. (1993)</td>
<td>first Los Angeles PD Threat Management Unit cases</td>
<td>obsessional/erotomanic</td>
<td>74</td>
<td>2.7% (8% prop)</td>
</tr>
<tr>
<td>Leong (1994) [Leong &amp; Silva (1992)]</td>
<td>Los Angeles court ref.</td>
<td>erotomania</td>
<td>4</td>
<td>—</td>
</tr>
<tr>
<td>Mullen &amp; Pathé (1994a, 1994b)</td>
<td>Australian foren. pract.</td>
<td>“pathology of love”</td>
<td>14</td>
<td>36%</td>
</tr>
<tr>
<td>Meloy &amp; Gothard (1995)</td>
<td>300 referrals to a court clinic in San Diego</td>
<td>obsessional follower</td>
<td>20</td>
<td>25%</td>
</tr>
<tr>
<td>Harmon et al. (1995)</td>
<td>337 referrals charged with harassment or menacing to a court clinic in New York</td>
<td>repetitive stalking</td>
<td>48</td>
<td>21%</td>
</tr>
</tbody>
</table>

Total studies = 10
Total N = 180

Note. Bracketed studies report cases previously noted in the research.

This is probably a result of the exclusive focus upon erotomanic disorder in the early, small sample studies, and a selection bias on the part of law enforcement to arrest and prosecute the more “high profile” or “stranger” obsessional followers during periods of data gathering for the more recent and larger sample studies.

DEMOGRAPHIC CHARACTERISTICS

Seventy-two percent (N = 130) of the aggregate sample are men. Twenty-eight percent (N = 49) are women. The gender of one subject was unknown (Zona et al., 1993). The gender ratio is slightly less than one would expect given the predominance of males among violent offenders, a ratio that usually averages 10 to 1 (Wilson & Herrnstein, 1985). This difference is not
attributable to the predominance of females among those with erotomania, because most of the individuals with erotomania in this research review were males. Preliminary data suggest that three out of four obsessional followers who engage in criminal conduct will be males.

Racial characteristics were unreported for 57% (N = 102) of the subjects; therefore, no conclusions can be drawn. Twelve of the subjects were foreign born, excluding subjects from the Mullen and Pathé (1994a) study and the Harmon et al. (1995) study, which did not report such data. The finding that 10% of the obsessional followers where data were available were immigrants — and most of these subjects were in southern California — highlights the importance of considering this variable as a possible contributory factor to the genesis of this behavior, particularly in those with a diagnosis of erotomania. Meyers and Meloy (1994) emphasized this in a case study concerning a traditional Islamic male who grossly misconstrued the social behavior of a woman whom he subsequently pursued. Zona et al. (1993) found significantly more foreign born subjects in their erotomic subgroup. Immigration clearly does not predict such behavior, however, and most obsessional followers are not immigrants to the country in which they offend.

Obsessional followers are generally older than other criminal offenders. Meloy and Gothard (1995) found an average age of 35, which was significantly older than a random group of offenders with mental disorders. Their finding replicated exactly the mean age in the Zona et al. (1993) study. Mullen and Pathé (1994a) found the average age of their subjects to be 40 years, with a range of 28–50. Harmon et al. (1995) also found an average age of 40, with a range of 20–66. This consistent finding across the initial research suggests that chronic failures in social or sexual relationships through young adulthood may be a necessary predisposing experience for some obsessional followers. In fact, failed relationships appear to be the rule among these individuals. Meloy and Gothard (1995) found that half of their subjects had never married or were divorced, and three-quarters were without an intimate partner at the time of their evaluation. Zona et al. (1993) reported that only one out of seven subjects was married at the time of pursuit, and 72% of the erotomic subgroup had never married. Likewise, only 14% of the Mullen and Pathé (1994a) sample were married at the time of offense; only 6% of the Harmon et al. (1995) sample were married, and 63% had never been married. Raskin and Sullivan (1974) and Segal (1989) noted the isolated and lonesome existence of the erotomic individual, and the adaptive nature of these symptoms to ward off feelings of depression and loss. Obsessional following may be a courtship disorder for some individuals as the normative behavior of seeking a partner in a socially acceptable manner is subsumed by an abnormal, voyeristic, and unwanted pursuit (Freund, Scher, & Hucker, 1983).²

Although there are little data on intelligence and educational characteristics in this population, Meloy and Gothard (1995) did find their sample to be significantly more intelligent (although IQ data were missing for 45% of their subjects) and better educated than a random group of offenders with mental disorders. Most had a high school education. Meloy and Gothard used these findings to explain the resourcefulness and manipulativeness of many of their subjects. Harmon et al. (1995) reported that 40% of their sample were college graduates.

Obsessional followers are also likely to have prior criminal and psychiatric histories. Meloy and Gothard (1995) wrote, "[these] findings do not support the notion that stalking, or a similar pattern of unwanted following, is an aberrant behavior committed by an otherwise law-abiding and mentally healthy individual" (p. 261). Harmon et al. (1995) found that 46% of their subjects had a history of prior similar offending, while 64% of the Mullen and Pathé (1994a) sample had a history of unrelated offending. Almost two-thirds of the Meloy

²This theory would not apply to the persecutory/angry subgroup in the Harmon et al. (1995) study, or to other patients in which there was no evidence of an amorous interest in the object of pursuit.
and Gothard (1995) sample had prior inpatient or outpatient treatment; the majority had a prior criminal history. Zona et al. (1993) noted, however, that the majority of their "simple obsessional" (prior relationship) subgroup appeared to be first time offenders.

There are also suggestive data from two studies that obsessional followers are usually unemployed or underemployed. Meloy and Gothard (1995) noted that the majority of their sample had "very unstable work histories" (p. 259) at the time of their offense, although they did not quantify this information. Forty-three percent of the Mullen and Pathé (1994b) sample were unemployed. Harmon et al. (1995) and Zona et al. (1993) did not report employment data, but given the average length of pursuits, variety of contacts, and preoccupation with the victim (see below), it is reasonable to assume that employment will be significantly impaired or nonexistent. More data, however, are needed to draw further conclusions about work history, criminal history, psychiatric history, and intelligence.

**PSYCHIATRIC CHARACTERISTICS**

The single and multiple case studies (Goldstein, 1978, 1986, 1987; Leong, 1994; Meloy, 1992; Noone & Cockhill, 1987; Taylor, Mahendra, & Gunn, 1983) in this review had selection criteria that focused on a diagnosis of de Clerambault syndrome or erotomania: what we would now refer to as delusional disorder, erotomanic subtype (American Psychiatric Association, 1994). The only exception to this pattern is the small group study of Meloy (1992) which used the term *borderline erotomania* (Meloy, 1989) to describe a sample of individuals who stalked their objects, sometimes violently, but did not evidence clear-cut erotomanic delusions. His label has been more positively received by legal scholars (McAnaney et al., 1993) than by clinicians (Segal, 1990; Zona et al., 1993). The Zona et al. (1993) group were the first to use "major mental illness" as a dependent variable, with more refined diagnostic workups in subsequent studies (Harmon et al., 1995; Meloy & Gothard, 1995; Mullen & Pathé, 1994a).

Zona et al. (1993) found, in their file review, that major mental illness was present in 63% of the subjects in which it could be ruled in or out. In their "simple obsessional" subgroup, they found an equal likelihood of presence or absence of mental disorder, and had the impression of a predominance of personality disorder. Their "erotomanic" subgroup was, of course, 100% mentally ill, but one half of their "love obsessional" subgroup had missing data for presence or absence of mental illness.

These suggestive findings prompted Meloy and Gothard (1995) to clinically investigate the psychiatric diagnoses of a sample of obsessional followers and compare them to a random sample of offenders with mental disorders. Eighty-five percent of the obsessional followers had both an Axis I and an Axis II diagnosis at the time of evaluation for the study. The most likely Axis I disorder was substance abuse or dependence (35%), with a mood disorder in one of four subjects (25%). Axis I diagnoses were not significantly different from the random comparison group. The most likely Axis II diagnosis was a cluster B personality disorder that was not antisocial personality disorder (ASPD). The random comparison group of offenders with mental disorders were significantly more likely to have ASPD, and significantly less likely to have another personality disorder. Meloy and Gothard (1995) interpreted this from an attachment theory perspective, asserting that less antisocial personality disorder in obsessional followers made sense because ASPD was a disorder of chronic emotional detachment. An obsessional follower would be more likely to have an intense and pathological attachment to his object of pursuit, particularly in the face of continuous rejection. These findings parallel nicely the research of Dutton (1995) linking borderline psychopathology, attachment theory, and domestic violence.

Erotomania was present in 10% (n = 2) of the Meloy and Gothard (1995) sample, an exact replication of the proportion of pure erotomaniacs (n = 7) in the Zona et al. (1993) sample.
Delusional disorder, erotomaniac subtype, however, usually does not present in a pure, or primary form in any clinical sample. Rudden, Sweeney, & Frances (1990) found an additional mood disorder in one out of three erotomaniac subjects, and schizophrenia in almost one-half their hospitalized clinical sample. The pure or primary form of erotomania (De Clérambault, 1942) seems to appear in only one out of four cases when erotomaniac delusions are present. Taylor et al. (1983) found that depression coexisted with erotomania in their three cases; Leong (1994) noted the primary diagnosis of paranoid schizophrenia in his four cases of erotomaniacs; and Meloy (1992) found additional diagnoses of substance abuse, schizophrenia, mood disorder, and personality disorder in his six cases of erotomaniacs or borderline erotomaniacs who were violent.

Mullen and Pathé (1994a) reported a diagnosis of schizophrenia in one-half their sample of “stalkers,” and pure erotomania in almost one-third: a small group finding consistent with Rudden et al.’s (1990) sample of nonforensic erotomaniac patients. A mood or anxiety disorder was present in four of 14 subjects as a primary or secondary diagnosis. Rudden et al. also looked carefully at Axis II. Seventy-nine percent had a personality disorder diagnosis, quite similar to the Meloy and Gothard finding (1995). Almost half were cluster B personality disorders, and 29% were antisocial personality disorder. Half of the entire sample was diagnosed with narcissistic personality disorder or “marked narcissistic traits.” Paranoid, schizoid, and avoidant personality disorders were also diagnosed. A majority of the sample also exhibited “grandiosity” and “social incompetence.”

Harmon et al. (1995) found that 29% of their sample met criteria for delusional (paranoid) disorder (DSM-III), most likely the erotomaniac and persecutory subtypes. One-third of the female subjects were diagnosed with erotomania ($N = 6$), and five of these women knew or had prior relationships (usually employment) with their objects of pursuit. One of the two cases of homosexual obsession in their sample involved an erotomaniac female. The next most common Axis I disorder was schizophrenia (21%). Twelve of their subjects had a primary or secondary Axis II diagnosis (25%), but none met criteria for antisocial personality disorder. A mood disorder was only diagnosed in one case.

The psychodiagnostic picture of the obsessional follower that emerges across these studies is complex and varied, as one would expect when a population is defined by one pattern of behavior. Axis I disorders are common, including schizophrenia, mood disorders, and substance abuse, similar to other offenders with mental disorders. Erotomania is unlikely to appear in a pure or primary form, but will clearly be represented in a minority of obsessional followers, usually in a secondary form (symptomatic of another mental disorder). Axis II personality disorder is likewise expected, both as a primary and secondary diagnosis; but it is unlikely to be antisocial personality disorder. Identification of Axis I psychopathology in an obsessional follower should not preclude the further investigation of Axis II personality disorder or traits, often appearing as a mixture of dramatic, acting out, narcissistically tinged cluster B character pathology.

**PATTERNS OF PURSUIT**

The three cases of Taylor et al. (1983) document multiple and various contacts, including aggressive letters, unwanted following, property damage, annoying phone calls, and assaults. Leong (1994) also noted multiple and various contacts, including letters, telephoning, following, and various approach attempts. Goldstein’s (1978) first published case, a 39-year-old paranoid schizophrenic woman, included approach behavior, talking, and assault. His later cases (Goldstein, 1987) included stalking, telephoning, letter writing, gift giving, and various approaches to the object of pursuit. Noone and Cockhill (1987) documented letter writing, telephoning, various approach behaviors, and stalking of the victims.
The first systematic investigation of letter writing and approach behaviors, although not among a sample of obsessional followers per se, was conducted by Dietz and colleagues (Dietz, Matthews, Martell et al., 1991; Dietz, Matthews, Van Duyne et al., 1991), and focused on the characteristics of threatening and otherwise inappropriate letters sent to Hollywood celebrities and United States Congressmen. Letter characteristics were identified that were associated with an increased or decreased risk of an “approach” to the recipients of the letters from this large sample of subjects ($N = 300$). Implicit in the design of the Dietz studies was the assumption that various kinds of contacts would be initiated by a proportion of the letter writers, which proved to be true.

Zona et al. (1993) systematically investigated patterns of pursuit of their 74 subjects, which they rationally divided into three subgroups: erotomanics, love obsessionals, and simple obsessionals. The erotomanic subgroup favored letter writing, phoning, and visiting the home of the love object. This subgroup was also twice as likely to stalk their victims than the other two subgroups. The only type of contact that the erotomanics pursued less vigorously than the love obsessionals or the simple obsessionals was face-to-face, perhaps to prevent a loss of idealization of the victim.

The love obsessional subgroup, characterized by a primary psychiatric diagnosis or a fanatical love in which the object of pursuit was a stranger, also favored letter writing, but established phone contact at one-half the frequency of the erotomanics. One in five stalked their victims and attempted to visit their homes. The simple obsessional group, characterized by an actual, prior relationship with the victim that had turned “sour” or within which there was the perception of mistreatment, preferred phone contact. They were also more likely than the other two subgroups to achieve face-to-face contact, an important violence risk factor that I will later address.

Zona et al. (1993) confirmed an anecdotal finding from the earlier research: Obsessional followers will pursue a variety of methods to achieve contact with their victims, including letter writing, phoning, visiting a particular location (e.g., worksite), stalking, visiting their home, and achieving a face-to-face meeting.

Meloy and Gothard (1995) documented a pattern of pursuit which was quite consistent with Zona et al. (1993). Two-thirds of their subjects went to the victim’s home at least once, and almost one-half stalked their victims. Forty percent made contact by telephone, and 25% wrote letters. One in 10 visited the victim’s employment or sent gifts. Meloy and Gothard’s sample ($N = 20$) was too small to subgroup according to the Zona typology.

Mullen and Pathé (1994a) also found similar varieties of pursuit. Ninety-five percent approached their victims, 80% followed their victims, and 40% telephoned or sent letters. Harmon et al. (1995) likewise found that their subjects ($N = 48$) had multiple avenues of pursuit: 41% telephoned, 27% accosted, and 33% sent letters or gifts. The consistent finding across these preliminary studies is a pattern of multiple and various contacts with the victims, with letter writing and telephoning often accompanying a physical approach.

Duration of the obsessional follower’s pursuit of his or her victim is much longer than one would expect. It should be measured in months or years, rather than weeks. The earlier studies suggested this, and Meloy (1992) found that length of time between the onset of the obsession and the violence among his six subjects ranged from 1 week to 8 years, with a mean length of 5 years. This surprisingly long, but only suggestive, finding concerning duration of pursuit was consistent with the Dietz, Matthews, Martell et al. (1991) study showing a positive association between duration of letter writing and approach behavior toward Hollywood celebrities. In contrast, number of letters, not duration of communication, was associated with approach behavior to United States Congressmen (Dietz, Matthews, Van Duyne et al., 1991).

Zona et al. (1993) found duration of both the obsession and the pursuit to vary across their three subgroups. Duration of the erotomanic obsessions averaged 10 years; duration of the
love obsessions averaged 12 years. There was no information available for the simple obsessions. Active pursuit varied. Erotomanics attempted contact for an average of 19 months; love obsessionals, 9.7 months; and simple obsessionals, 5.1 months. The striking differential here is between length of the obsession and pursuit for erotomanics and love obsessionals. Zona et al. (1993) noted that some of the pursuit behavior in the love obsessional subgroup began when psychotropic medications ceased. Noone and Cockhill (1987) speculated that the erotomanic may seek contact with the victim when the delusion is dissipating or a more paranoid disorder is emergent. Taylor et al. (1983) inferentially offered the most cogent reason for the disinhibition of the obsession in Zona's first two subgroups when they discussed their own small sample:

All the men, even when depressed, had an air of grandiosity about them... these men were generally confident about being loved despite all the evidence to the contrary. It was only at moments when their belief was transiently threatened that they perpetrated physical assault on others. (p. 649)

Pursuit by simple obsessionals, although much briefer, is usually precipitated by a single event, described by Zona et al. (1993) as "a sustainable rage in response to a perceived narcissistic injury" (p. 901). It is likely the reality testing of the simple obsessional is better than the other two groups because a mutual relationship actually exists, but the common psychodynamic across all three groups which may trigger a pursuit is a threat to the narcissistic equilibrium of the obsessional follower.

The number of contacts in the Meloy and Gothard (1995) sample was greater than 10 for almost one-half the subjects, but there were missing data for one-third of the sample. Duration of pursuit in this study was likely shortened by arrest of the perpetrator, but was typically at least a year. Mullen and Pathé (1994a) found an average duration of 25 months, with a range of 1–96 months. Harmon et al. (1995) did not compute these data for their sample, but did note that almost one-half of their subjects had a history of prior offenses for the same charge, sometimes toward the same person, and sometimes toward others, with an average of four prior arrests.

Although impact of restraining orders on pursuit of the obsessional follower is a critical question, minimal data are proffered in these studies to suggest an answer. Harmon et al. (1995) found that almost one-half of their subjects ignored temporary restraining orders, and were more likely to do so if their pursuit was fueled by amorous or affectionate feelings rather than anger or the perception of persecution. Mullen and Pathé (1994a) note presence of restraining orders in 43% (N = 6) of their cases, most of whom were subsequently violent. They wrote: "when restraining or intervention orders were obtained they were seldom heeded, and in some cases paradoxically served to strengthen the resolve of the erotomanic" (p. 476).

**VICTIM CHARACTERISTICS**

The potential victim pool of the obsessional follower is a predictive question that has important implications for both clinicians who work with traumatized individuals and law enforcement agencies. Early studies (De Clérambault, 1942) surmised that most erotomanic individuals were women who pursued men, but Taylor et al. (1983) asserted that erotomanic individuals in a forensic setting were likely to be men pursuing women. Their hypothesis has usually been confirmed when broadened to include obsessional followers in general.

There are two exceptions to this finding. First, among those individuals with erotomanic disorder, there may be a predominance of women pursuing men, even in a forensic setting. Although the single and multiple case studies of erotomanic obsessional followers were usually
men pursuing women (Goldstein, 1978, 1987; Leong, 1994; Noone & Cockhill, 1987; Taylor et al., 1983), the larger studies found a significant number of erotomanic women pursuing men. Zona et al. (1993) found six out of seven erotomanics to be females. Mullen and Pathé (1994a) found that two of their five pure or primary erotomanic cases were females. Harmon et al. (1995) reported that all six of their erotomanic cases were women. Meloy and Gothard (1995), however, found that their two erotomanic cases were both men. These data can only suggest that the victims of erotomanic obsessive followers are more likely to be men than victims of obsessive followers with other disorders and motivations. It is also apparent that the proportion of erotomanics who are females is likely to be greater in nonforensic than in forensic samples (Rudden, Sweeney, & Frances, 1990). Second, in most cases of obsessive following, the victim is likely to be the opposite sex of the perpetrator. There are, however, reported cases of homosexual obsessive following (Harmon et al., 1995; Meloy, 1992; Zona et al., 1993), but these appear to be quite infrequent, probably less than 1%.

Various attempts to classify the victims of obsessive followers have been made. Zona et al. (1993) divided them into two groups: no prior relationship and prior relationship. The latter group included customer, acquaintance, neighbor, professional relationship, dating, or sexual intimate. They currently report that 65% of their victims (N = 200) had a prior actual relationship with the obsessive follower, a proportional figure that has increased since their first published study (Lt. John Lane, personal communication, August 1995). Mullen and Pathé (1994a) wrote that, “the majority of objects of affection had had some actual contact with the patient, albeit fleeting” (p. 471). Three of their victims were entertainers and were first seen in public. One had a brief sexual relationship with the perpetrator. Three were health care professionals who originally treated the pursuers. And most disconcertingly, four victims were initially just “seen in the street.”

Meloy and Gothard (1995) divided the victims into “stranger” and “former intimate,” with the latter referring to any sexual intimacy prior to obsessive following. They reported that 45% of the victims were strangers, but did not define their use of this term. Harmon et al. (1995) provided the most detailed breakdown of victim relationship prior to the obsessive following, which formed one axis of their classification system: personal, professional, employment, media, acquaintance, none, and unknown. One-half of their victims had a professional or employment relationship with the obsessive follower prior to pursuit. Thirteen percent had a personal relationship, and 13% were initially seen in the media. Eight percent were superficial acquaintances, and 8% had no discernable prior contact with the obsessive follower.

These various classification systems lend confusion to the relationship question in this review, and future studies could simplify this task by dividing victims into three groups: (a) those who were prior acquaintances, (b) those who were prior sexual intimates, and (c) those who were strangers. If the Harmon et al. (1995) data are regrouped according to this classification, the patterns become clearer: 58% were prior acquaintances, 21% were strangers, and 13% were prior intimates (8% were unknown). These groupings are mutually exclusive, and demonstrate some utility by showing consistency among studies (Harmon et al., 1995; Meloy & Gothard, 1995; Zona et al., 1993). It appears that a majority of obsessive followers will pursue prior acquaintances, and the rest will be divided, at some unpredictable proportion, between prior sexual intimates and complete strangers.

In most of the studies reviewed, the obsessive follower had one victim. Harmon et al. (1995) reported multiple victims for one-third of their sample, and Mullen and Pathé (1994a) found that 22% of their perpetrators had multiple victims. The “one victim” hypothesis, moreover, is not conclusory because the natural course of the obsessive following was usually interrupted with arrest and prosecution, and prior victims may not have been known to the researchers. There are also case studies that report sequential victims (Taylor et al., 1983).
and sound a cautionary note in assuming a one victim pattern. Further research will have to clarify the question of single or multiple victims, most likely a longitudinal study of a sample of obsessional followers, carefully tracked as they enter and exit criminal justice and mental health systems.

The most reliable data about age of victims of obsessional following is found in the Zona et al. (1993) study. The erotomanic subgroup victims averaged 41.7 years; the love obsessional, 34.1 years; and the simple obsessionals, 41.4 years. Data from other studies were not precise enough to draw conclusions, other than that the age range of the victims is extensive. For instance, Mullen and Pathé (1994a) described a 14-year-old victim and one that was over 50 years of age. Victims do appear, on average, to be older than one would expect in a general crime victim population.

There are virtually no data on the psychological toll that obsessional following takes on the victims. Mullen and Pathé (1994a) gathered the only systematic information in this area of victimization, and repeatedly noted disruption at home and work, marital friction, fear and distress, a need for psychiatric treatment, embarrassment, and occasionally a need to relocate. They wrote that victims, “describe their escalating fear as the stalking proceeds. It is the constant presence of the stalker which unnerves them, particularly when their sudden appearance reveals a knowledge of the victim’s plans and movements which they had believed was confidential” (p. 472). It is likely that victims of obsessional following would be vulnerable to symptoms of both anxiety and depression, and the psychological sequelae of trauma, both acute and chronic (van der Kolk, 1987). There is, as yet, no research to support this hypothesis.

**PATTERNS OF VIOLENCE AND THREATS**

Although stalking laws have often been passed in response to public outrage over a single or multiple homicide, violence research (Monahan & Steadman, 1994) would predict that most obsessional followers are not violent (see Table 1).

Zona et al. (1993) found that none of their “love obsessional” or “erotomanic” subgroups engaged in physically harmful acts, and only two of their simple obsessionals “acted to bodily harm their victim” (p. 900). Overall incidence of personal violence was 2.7%. Property destruction was more frequent, and 8% (N = 6) of their entire sample “destroyed the victim’s property” (p. 900).

Mullen and Pathé (1994a) reported a much higher frequency of violence in their study of erotomanic individuals who stalked their victims: 36% (N = 5) assaulted, another 43% (N = 6) sexually attacked, and 36% (N = 5) damaged property. Three of the latter subjects also assaulted, for an overall violence frequency of 50%. The most likely recipient of the violence was the stalking victim, and the “assaults” ranged from pushing and shoving to homicide (stabbing). The Mullen and Pathé (1994a, 1994b) data, however, should be treated with caution. Their sample size is small (N = 14), and there are inconsistencies in findings between their tables and narrative (e.g., number of victims, unrelated offense history).

Meloy and Gothard (1995) reported a 25% (N = 5) incidence of physical assault, but only two of these individuals were formally charged with assault. Most of the victims were the objects of pursuit. None of the physical violence involved a weapon. Harmon et al. (1995) likewise reported a 21% (N = 10) incidence of assault in which four out of five victimized their object of pursuit. Two of these attacks involved a knife; none involved a firearm. Most of the perpetrators used their hands to grab, strike, punch, or fondle their victim.

There were four homicides committed as a direct result of obsessional following by the 180 subjects in this research review, for an incidence of 2%. The weapons of choice were two knives, a .357 magnum revolver, and gasoline. This figure is likely elevated because two of these subjects were selected for study because of their violence (Meloy, 1992).
The relationship between threats and violence is controversial, characterized by much speculation and little research. One of the few clinical research studies ever done found that only 3% of individuals who threatened homicide actually committed the act, and another 4% committed suicide instead (McDonald, 1968). Dietz and colleagues (Dietz, Matthews, Martell et al., 1991; Dietz, Matthews, Van Duyne et al., 1991) found that threatening letters had no relationship to approach behavior when the victims were Hollywood celebrities, and diminished the risk of approach to a United States Congressman.

Threats to person, property, or both are common among obsessional followers. Table 2 outlines frequency of threats in the three largest studies reviewed (N = 142), the proportion of individuals who threaten that are subsequently violent, and the false positive rate. Approximately one-half of obsessional followers will threaten, and one-fourth of these subjects will act on their threat, for a mean false positive rate of 75%. Two studies further refine this relationship. Meloy and Gothard (1995) found a significant relation (p = .004) between threats and prior intimacy, and Harmon et al. (1995) found a significant relation (p = .05) between threats and assaults in their “affectionate/amorous” subgroup. The magnitude or strength of these relationships is unknown. Threats are likely to be underreported across these studies, however, which would tend to decrease the false positive rate.

The clinician should be careful, however, to avoid overlooking the false negatives: the obsessional followers who do not threaten, but are subsequently violent. Harmon et al. (1995) reported three such individuals (6% of their sample) and Meloy and Gothard (1995) found three (15% of their sample). The sensible approach would suggest that the subject’s history of threats and his or her relationship to subsequent violence is the best source of data for assessing future risk subsequent to a threat. Threats may inhibit, disinhibit, or have no relationship to actual violence in any one subject.

Although targets of the obsessional followers’ threats and violence are most likely to be the objects of pursuit, Mullen and Pathé (1994a) noted three other groups that may be at risk: third parties believed to be impeding access to the object, innocent bystanders, or the obsessional followers, themselves (suicide or attack by others). These observations are consistent with other opinions (Meloy, 1989).

The violence risk among obsessional followers in these preliminary studies leads to several tentative findings:

1. Approximately one-half of obsessional followers threatened, and were more likely to do so if there was a prior intimate relationship (Meloy & Gothard, 1995) or a real or imagined injury related to a business or professional relationship (Harmon et al., 1995).
2. Three-fourths of those who threatened were not subsequently violent toward person or property.

### TABLE 2. Incidence of Threats and Subsequent Violence (Person and Property) by Obsessional Followers

<table>
<thead>
<tr>
<th>Study</th>
<th>Threats</th>
<th>True Positive</th>
<th>False Positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zona et al. (1993)</td>
<td>45% (33)</td>
<td>25% (8)</td>
<td>75% (25)</td>
</tr>
<tr>
<td>Meloy &amp; Gothard (1995)</td>
<td>60% (12)</td>
<td>17% (2)</td>
<td>83% (10)</td>
</tr>
<tr>
<td>Harmon et al. (1995)</td>
<td>46% (22)</td>
<td>32% (7)</td>
<td>68% (15)</td>
</tr>
<tr>
<td>Mean</td>
<td>50%</td>
<td>25%</td>
<td>75%</td>
</tr>
</tbody>
</table>
3. Violence was committed by those who did not threaten, but this was unusual.
4. Frequency of personal violence varied between 3% and 36%. Most obsessional followers were not violent toward person or property. Incidence rates varied widely, and will likely do so in future studies until researchers control for duration of pursuit. The relation between this latter factor and violence risk is unknown.
5. Violence was usually limited to a physical assault and battery without a weapon, the victim being grabbed, punched, struck, or fondled by the obsessional follower.
6. Incidence of homicide was less than 2%.
7. The most likely victim of the violence was the object of pursuit, approximately 80% of the time.
8. Third parties perceived as impeding access to the object of pursuit were the next most likely victim pool.
9. Violence was usually “affective” (Meloy, 1988), perhaps fueled by narcissistic rage, the result of acutely or chronically perceived rejection.

**PSYCHODYNAMIC FINDINGS**

The reasons for obsessional following are not readily discernible through the quantification of data, but I would like to offer some thoughts concerning the psychodynamics of obsessional following after reviewing these preliminary studies. Patterns do emerge, and my assertions may be treated as testable hypotheses that may exist in any one particular case. Clinical interviewing, psychological testing, and scrutiny of the behavior of the individual independent of his or her self-report are likely to support or refute these clinical insights.

Obsessional following is a pathology of attachment for some individuals. It can be behaviorally described as proximity seeking toward an angry or frightened object that usually responds aversively to the act of pursuit. By definition, this is an abnormal attachment (Meloy, 1992). It fits most closely into the preoccupied attachment pattern developed by Bartholomew (1990) in his four-type model of attachment styles. Preoccupied individuals “actively seek to gain their attachment figure’s approval in order to validate their tenuous sense of self worth. Their feelings of unworthiness and strong approach orientation are expected to be associated with high levels of intimacy-anger” (Dutton, 1995, p. 153). This preoccupied attachment pattern is consistent with the obsessional thought of these subjects and the borderline (Kernberg, 1984) nature of their affects and defenses. The abnormal attachment behavior of obsessional followers suggests the need for clinical probes into the childhood and adolescent attachment histories of these individuals, with a particular focus on developmental disturbances during the differentiation and practicing subphases of separation-individuation (Mahler, Pine, & Bergman, 1975). These early patterns of behavior are likely to emerge in the transference during psychotherapy.

The obsessional follower may be either psychotic or nonpsychotic during pursuit. If psychotic, the primary symptom is likely to be a delusion characterized by erotomanic or persecutory beliefs. If nonpsychotic, reality testing is still likely to be seriously impaired and will be clinically evident in the obsessional follower’s confusion regarding the origin of feelings, thoughts, and impulses. Obsessional followers will often attribute their own internal stimuli to the victim, and vice versa, a marker for borderline personality organization (Meloy, 1992).

The psychopathology of obsessional following appears to be, in part, a maladaptive response to social incompetence, social isolation, and loneliness. What differentiates these individuals from others, however, appears to be their aggression and pathological narcissism. The acting out of their obsession in pursuit, and in a few cases eventual violence, is likely due to a disturbance in their narcissistic economy. A real event, such as acute or chronic rejection,
challenges the compensatory narcissistic fantasy that the obsessional follower is special, loved, idealized, admired, superior to, in some way linked, or destined to be with the object of pursuit. Disturbance of this narcissistic fantasy, imbued with both a sense of grandiosity and a feeling of pride, triggers feelings of shame or humiliation that are defended against with rage. Such intense anger also fends off any feeling of sadness because the capacity to grieve the loss of a whole, real, and meaningful person is not available to the obsessional follower. Instead, from a self psychology perspective (Kohut, 1971), a merging narcissistic transference is apparent, characterized by rage toward a selfobject and attempts to control it. These psychoanalytic formulations could apply to both “amorous” and “persecutory” motivated individuals (Harmon et al., 1995).

Borderline defenses serve this narcissistic economy well. Denial, splitting, initial idealization, eventual devaluation, projection, and projective identification are explicitly mentioned, or implicitly referenced, in many of the reviewed cases. Some neurotic defenses are also apparent, including minimization and rationalization, the latter most evident in a plausible, but false, explanation for pursuit.

Overt paranoia in the obsessional follower is likely to be directed toward third parties perceived as standing in the way of the object, and is usually both a projection of annihilatory rage (displaced from the object of pursuit) and a symptom of increased vulnerability. Paranoia in these cases may range from suspicious beliefs to overt delusion. Paradoxically, intervention by third parties (spouse, psychotherapist, police officer, attorney, corporate security, court, etc.) to help or protect the victim may exacerbate paranoid beliefs by providing a vehicle which can carry the paranoid projection. This may be unavoidable, but should be noted as a social triangulation that may increase the risk of violence.

The most obvious interpersonal dynamic in obsessional following cases is a principle gleaned from behavioral psychology. Any real contact between the victim and the perpetrator is likely to increase frequency of subsequent approaches. Such contact is an intermittent positive reinforcer, and attempts should not be made by the object of pursuit to reason with such an unreasonable individual.

CLINICAL TREATMENT

Although none of the studies reviewed offers any treatment outcome data, two recommendations seem apparent. First, given the varied psychopathology in these cases, careful differential diagnosis of both Axis I and Axis II disorders is necessary for treatment and risk management, supplemented by both psychological testing and history gathering independent of the self report of the patient. This will minimize successful attempts on the part of the patient to malinger or dissemble symptoms, often influenced by the nature of the criminal or civil litigation that is pending. Appropriate treatment should then address the diagnosed mental and/or personality disorder (Gabbard, 1995).

Second, clinical attention should also be directed toward active risk management of the patient if he or she presents a danger toward the object of pursuit. This usually entails consultation and often collaboration with criminal justice professionals, including officers of the court and law enforcement personnel. Although most individuals who obsessionally follow will not be violent, incidence of violence appears to be high enough to warrant concern, and necessitates a carefully documented and periodic violence risk assessment of the patient.

FUTURE DIRECTIONS AND CONCLUSIONS

The clinical investigation of obsessional following, completed through the review of 10 preliminary, nonrandom studies published between 1978 and 1995, and yielding 180 subjects, provides tentative findings concerning various demographics, psychiatric diagnoses, pursuit
patterns, victim characteristics, violence risk and its relationship to threats, and psychodynamics of these individuals. Attempting to characterize the prototypical stalker, however, is premature and may be impossible given the heterogeneity of the subjects in these initial, and small sample studies. What obsessional followers do is less varied than who they are. Future research concerning obsessional followers is clearly necessary, and should develop larger samples of individuals in different geographical areas with appropriate comparison groups to support, or challenge, the findings in this clinical review.

Research content areas that await study include victim reactions (both adaptive and maladaptive), psychological test characteristics of the obsessional follower, the longitudinal course of obsessional following, immigration as a stressor, epidemiological studies, precipitants of both pursuit and violence, differential risk factors between personal and property violence, psychiatric and psychological treatment, and effective risk management.

REFERENCES


