

Contemporary Threat Assessment: A North American Perspective

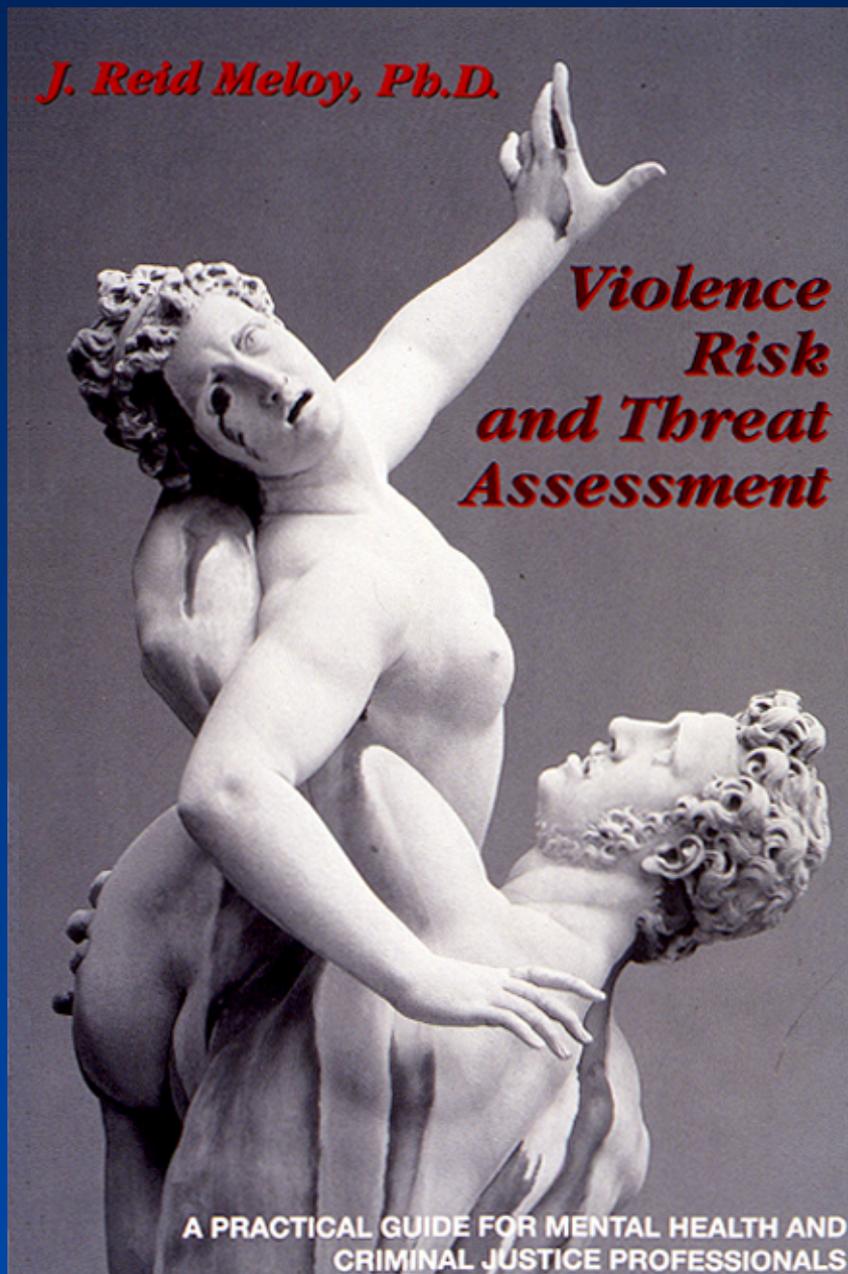
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*Violence
Risk
and Threat
Assessment*

A PRACTICAL GUIDE FOR MENTAL HEALTH AND
CRIMINAL JUSTICE PROFESSIONALS



Violence defined:

- An intentional act of aggression toward another human being that physically injures, or is likely to physically injure, that human being.



FBI Uniform Crime Report 2013

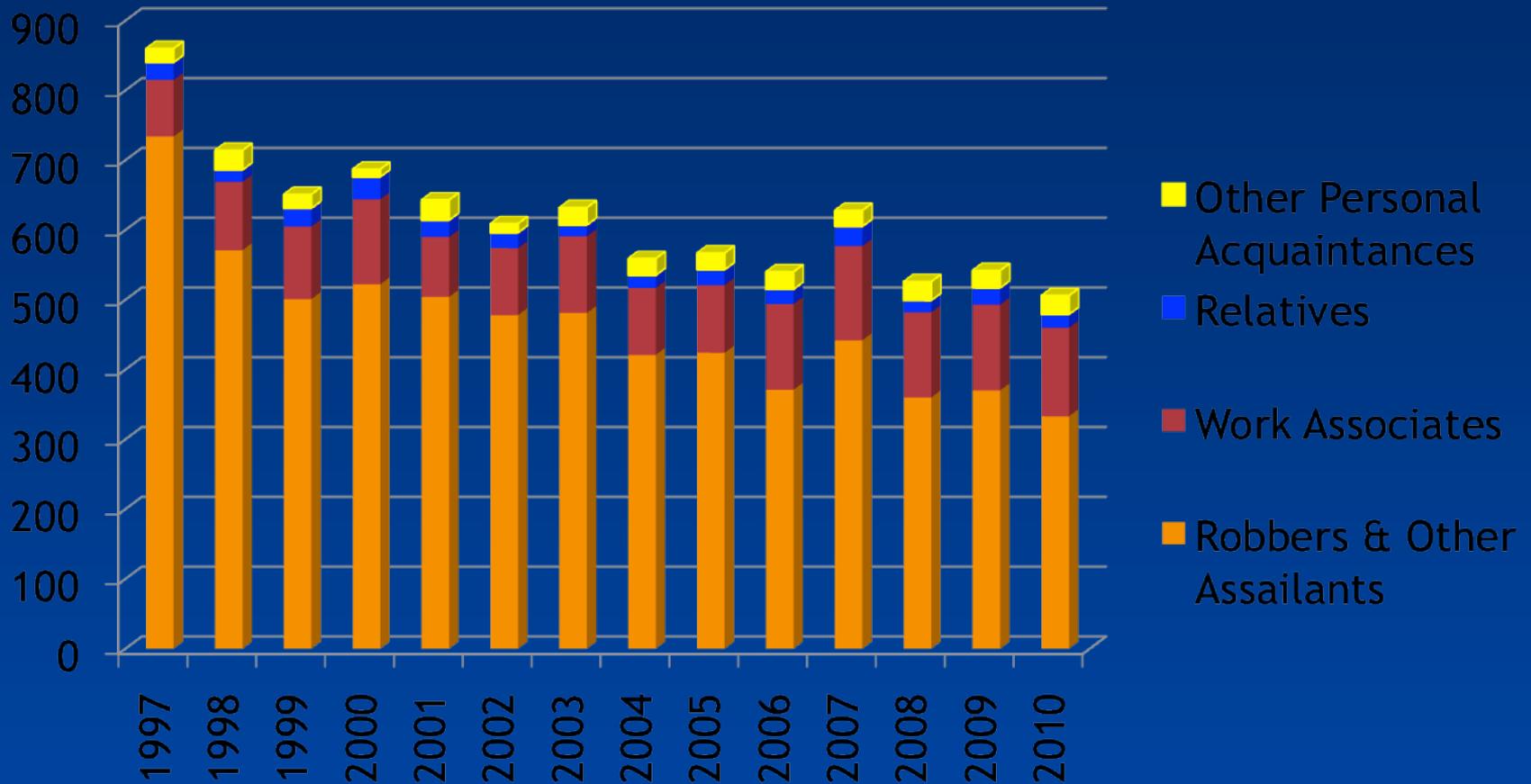
Violent Crime Offense Figure

Five-Year Trend, 2009-2013

Estimated
number of offenses

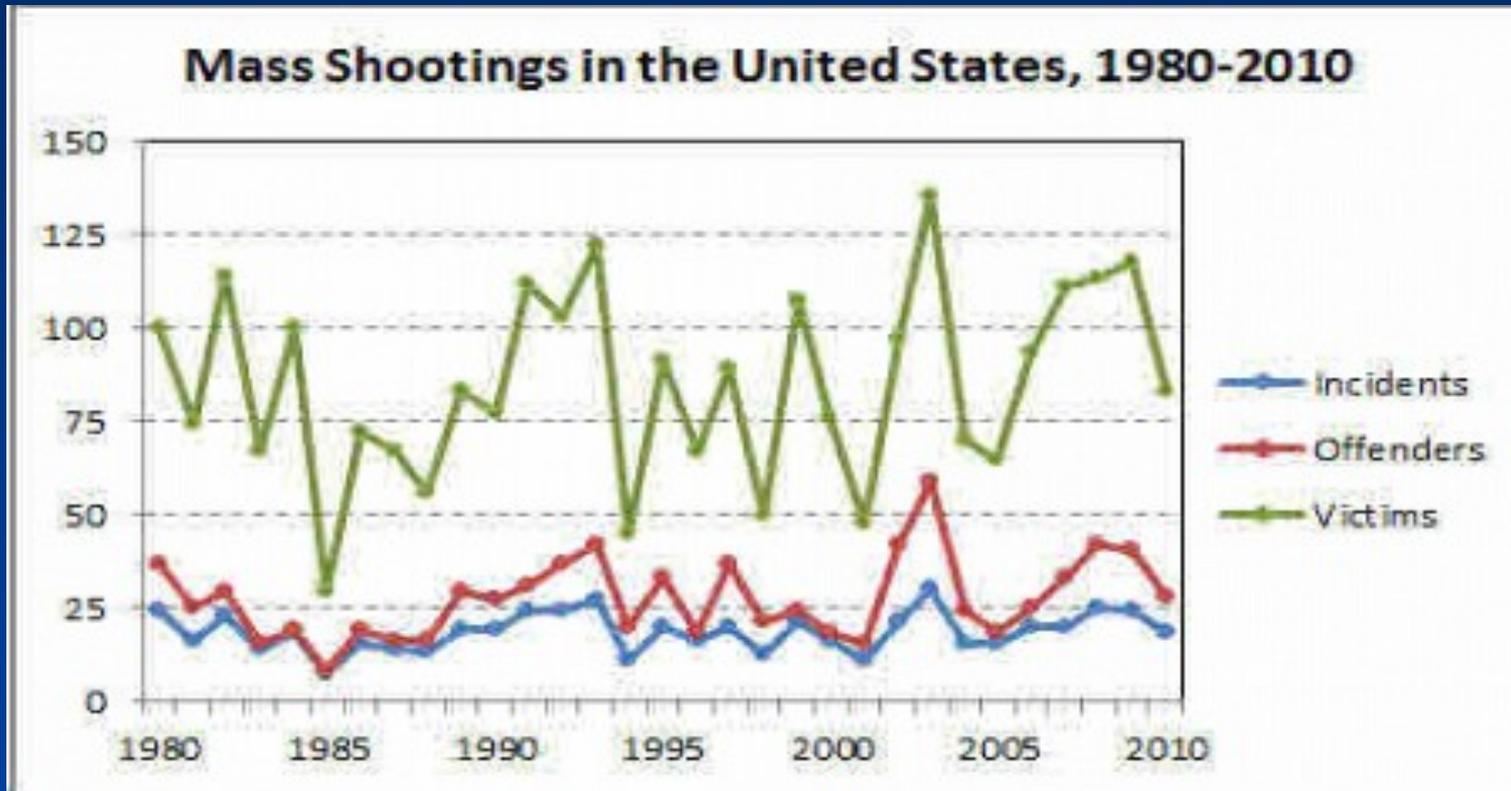


Workplace Homicides by Perpetrator Relationship to Victim, 1997-2010



SOURCE: Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2010 Data

Frequency was stable over 30 yrs



FBI Active Shooter Study 2014

- “An individual(s) killing or attempting to kill people in a populated area.”
- 11.4 incidents annually (N=160)
- 6.4 2000-2006
- 16.4 2007-2013
- 150% increase
- Consistent with Harvard public health study



2005-2010 Homicides in 37 States

• Residences	9847
• Street	4455
• Parking lot/garage	1209
• Outdoors	629
• Restaurant/bar	533
• Store/gas station	492
• Public building/business	288
• Hotel/motel	211
• School/College	49

• FBI NIBRS Reporting System



Borum et al., 2010, Educational Researcher, 39:27-37

- “Any given school can expect to experience a homicide about once every 6,000 years.”
- 125,000 schools / 21 deaths per year
- Your school is very safe for your children



Is violence homogeneous?

- No



Two modes of violence

- Targeted or intended violence (predatory)
- Emotional or reactive violence (affective)
 - Substantial scientific research since the mid-twentieth century involving animal and human subjects
 - Behavioral, physiological, neuroimaging, neuropsychological, psychological, and biochemical differences
 - Reliable and valid measurement instruments

Emotional or reactive violence

- Also known as affective or impulsive violence
- The most common violence among people
- A reaction to an imminent threat
- Accompanied by intense anger and/or fear
- Preceded by intense autonomic arousal
- Driven by the emotional centers of the brain
- Purely defensive
- One goal: make the threat go away
- Often preceded by direct verbalized threats



Targeted or intended violence

- Also known as predatory or instrumental
- Tactical planning
- Purposeful, opportunistic
- Emotionless; no autonomic arousal
- Often involves research and preparation
- End point of a pathway to violence
- Directed by the higher cortical areas of the brain
- Purely offensive: no imminent threat
- Many goals: power, dominance, revenge, sex, money, ideology
- Usually no direct threat beforehand









Annie Le, Sept. 8, 2009, Yale University— affective violence and sexual arousal



Fact Pattern

- 24 yo PhD student in pharmacology
- Disappeared Sept. 8, body found Sept. 13
- Body upside down inside wall with bra pushed up and underwear pulled down
- Blunt force trauma; bloody clothes hidden
- Death by traumatic asphyxiation (strangled)
- Raymond Clark, 26, lab technician, pled guilty, admitted to fact of attempted sexual assault; no motivation information; history of temper, volatility
- Sentenced to 44 years in prison



Johanna Justin-Jinich, May 6, 2009,
Middletown, CT—predatory violence and
stalking



Fact Pattern

- 21 yo Wesleyan student
- Met Stephen Morgan at NYU during summer, 2007
- Emails and meals on few occasions together
- Began to harass her, saying she was not that attractive and Jewish people are greedy
- Did not attempt to press charges against him
- Kills her with 7 rounds from 9 mm pistol while wearing a wig and eyeglasses as she worked in a CT coffee shop **2 years later**
- Eluded police, then surrendered



Fact Pattern

- Wrote in journal the day of attack, “I think it okay to kill Jews, and go on a killing spree at this school...Kill Johanna. She must die.”
- Told father day before he was moving to R.I.
- Cleared out most of belongings in guest bedroom
- Churchgoing family, privileged upbringing, prep school, unblemished stint in US Navy, then adrift
- Found NGRI in 2011, paranoid schizophrenic



Cornell et al., 1996, J
Consulting Clinical Psych,
64:783-790

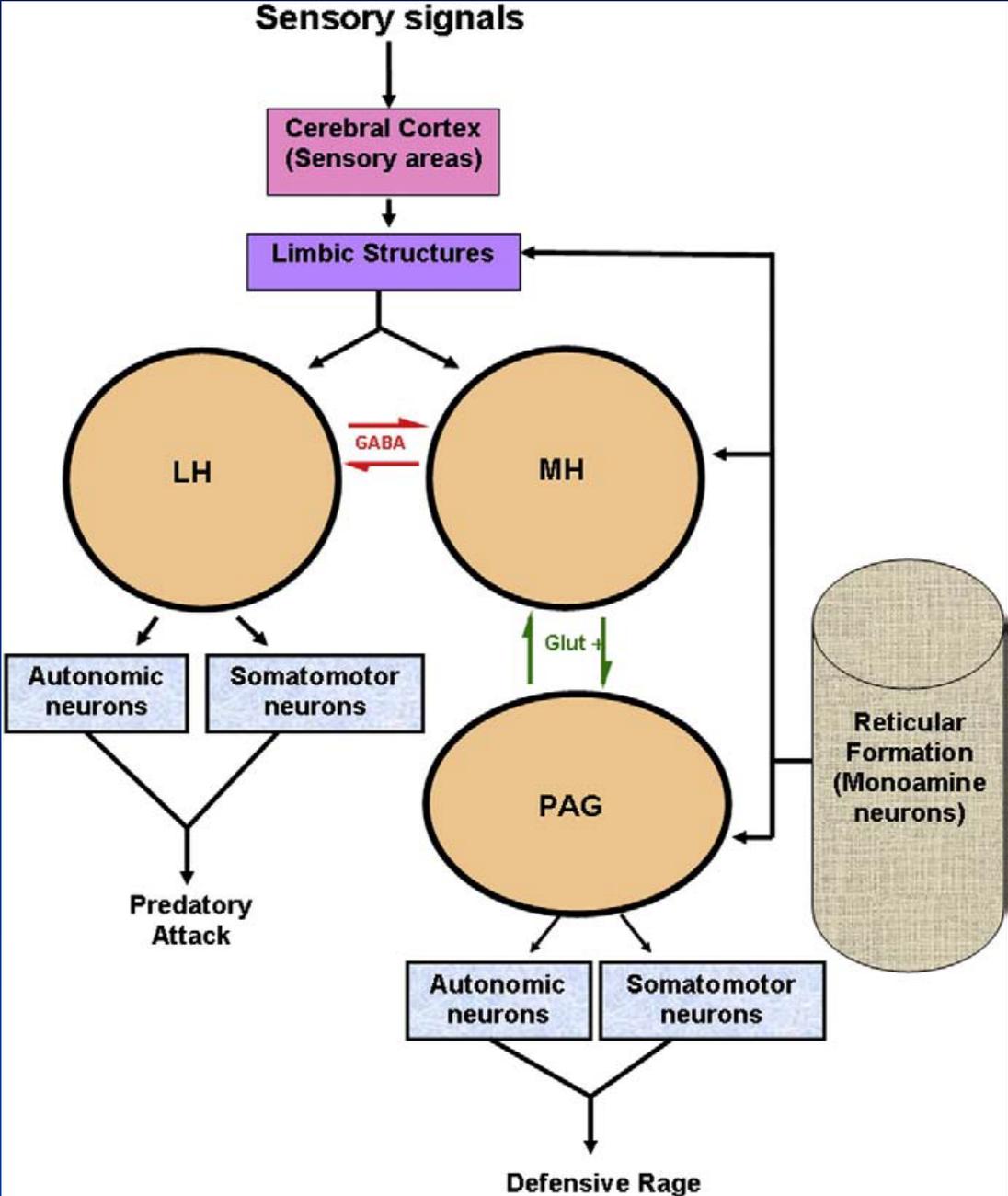
- Instrumental aggression
 - Motivated by goals other than emotion
 - Planning/preparation
- Reactive/Hostile aggression
 - Provocation
 - Arousal of hostility



Siegel A, Victoroff J.

- Understanding human aggression: new insights from neuroscience. Int J Law Psychiatry, 32:209-215, 2009



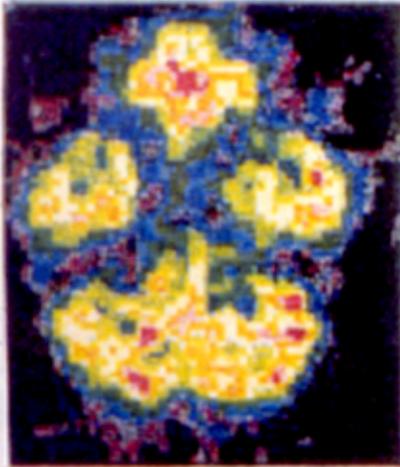


Hanlon et al., Criminal Justice and Behavior, 40:933-948, 2013

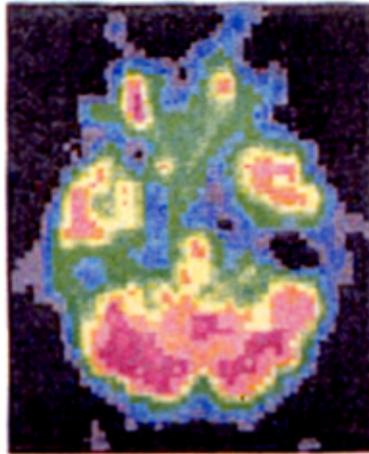
- Affective murderers performed more poorly than predatory murderers across multiple neurocognitive domains:
 - Intelligence
 - Memory
 - Attention
 - Executive functions



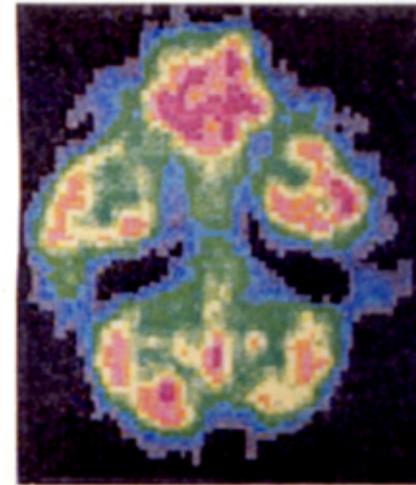
Raine et al., Behavioral
Sciences and the Law,
16:319-32, 1998



CONTROL



AFFECTIVE



PREDATORY

- 41 comparisons, 15 predatory, 9 affective murderers

Meloy, J.R. Australian and New Zealand Journal of Psychiatry,
40:539-547, 2006

- “Empirical basis and forensic application of affective and predatory violence”
- Observational measures
- Self report instruments (IPAS)
- Extensive scientific foundation
- Available at www.forensis.org

Static vs. Dynamic Factors

- Static (status) factors do not change over time, and are not affected through intervention or interdiction (criminal history, drug history, weapons history, psychopathy, etc.)
- Dynamic (state) factors do change over time, and can be affected through intervention or interdiction (drug use, weapons possession, psychotic symptoms, etc.) Can be fast or slow.

What are the initial clinical questions?

- What is the mode of violence I am concerned about?
- What am I trying to do?
 - Long term prediction: focus upon static (historical and dispositional) factors
 - Short term risk management: focus upon dynamic (clinical and situational) factors



Are there differences between threat assessment and violence risk assessment?

- Operational context
- Dynamic emphasis
- Idiographic (case-driven) approach: inductive
- Very low base rates
- Risk management rather than prediction
- Subject and potential victim
- Predatory (instrumental, targeted, intended) violence
- Likely urgency



Are there similarities?

- Practiced by professionals with diverse backgrounds
- Goal is to prevent violence
- To assist decisions and actions of others
- Evaluations are a process over time
- Process should be structured and guided
- Violence is result of decision-making affected by perpetrator, target, and circumstances



Reactive vs. Intended Violence

- Reactive (emotional, affective, defensive) violence is more common, treatable, and usually less dangerous
- Intended (targeted, predatory, offensive) violence is less common, typically untreatable, and more dangerous



Long term prediction (HCR V3)

- History of problems with:
 - Violence
 - Other antisocial behavior
 - No stable and positive relationships
 - Seeking or obtaining legal employment
 - Substance dependence or abuse
 - Major mental disorder
 - Personality disorder (esp psychopathy)
 - Traumatic experiences (adult and childhood)
 - Entrenched violent attitudes
 - Poor treatment or supervision response



Short term risk management (HCR V3)

- Recent problems with:
 - Insight into mental disorder, aggressiveness, need for treatment
 - Violent ideation or intent
 - Symptoms of major mental disorder, esp positive symptoms and persecutory delusions
 - Instability (affective, behavioral, or cognitive)
 - Treatment noncompliance and nonresponsiveness



Warning Behaviors for Targeted Violence (Meloy et al., 2012)

- Pathway
- Fixation
- Identification
- Novel Aggression
- Energy Burst
- Leakage
- Last Resort
- Directly Communicated Threat



Data Gathering

- Official records>
- Self-report>
- Collateral informants
 - Steadman et al. (1998) Archives General Psychiatry, 55:393-401 (table 3)

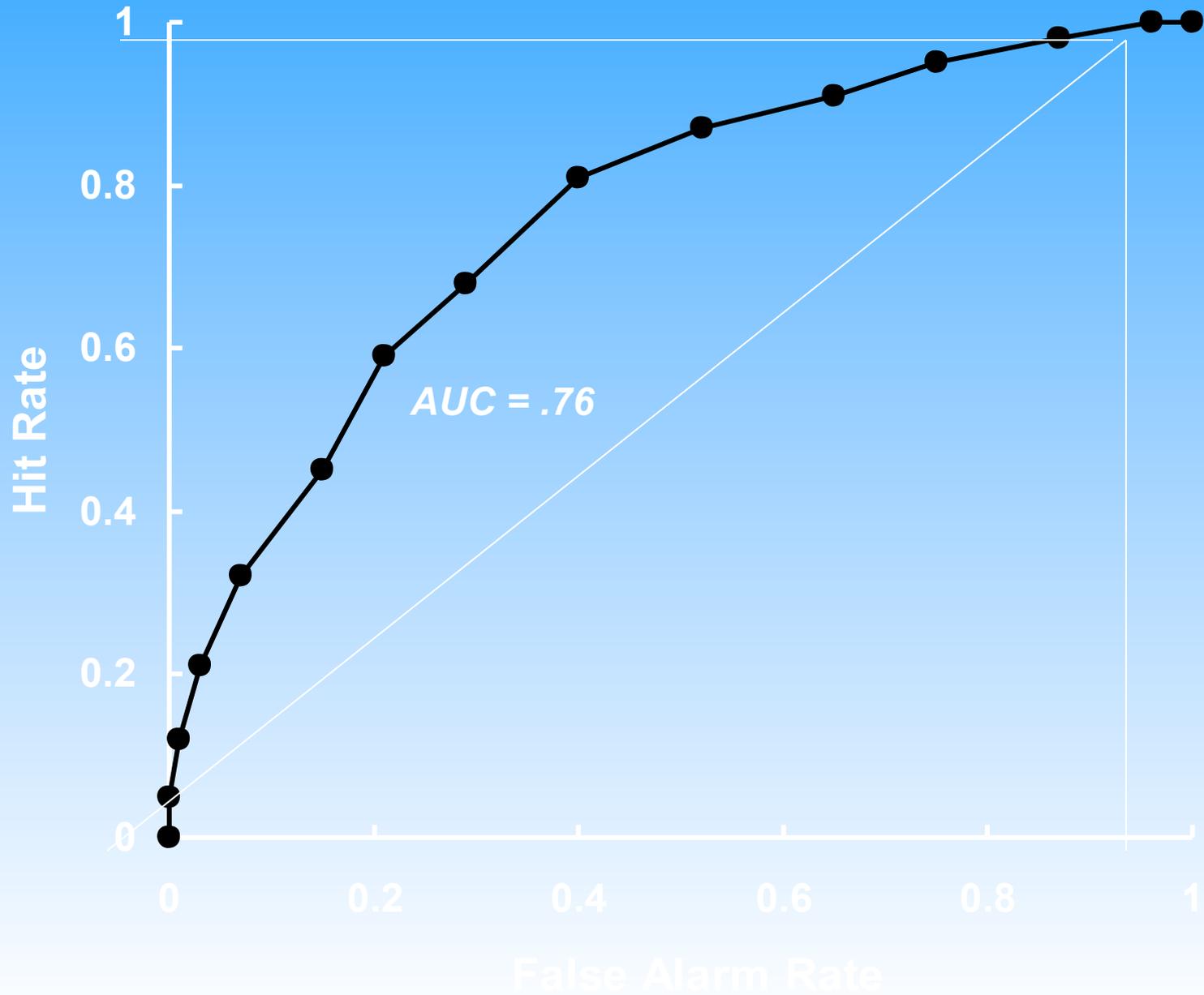


Can we predict violence?

- Only moderately well using current actuarial and structured professional judgment instruments
- ROC = 0.75
- *Unstructured* judgment is poorest predictor of risk (confidence negatively correlates with accuracy)



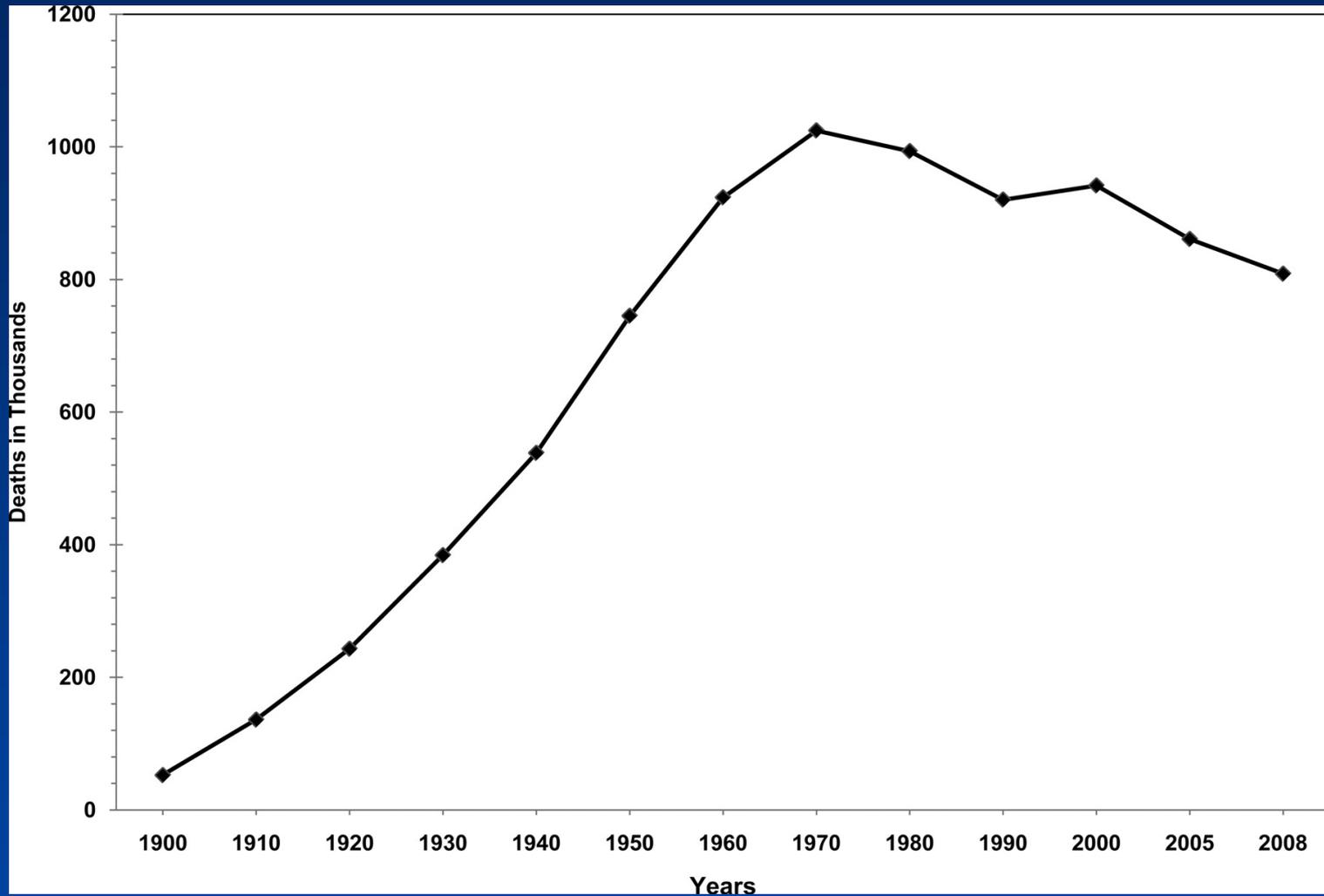
Receiver Operator Characteristic



Can we risk manage without predicting? Of course

- Prevention does not require prediction.
 - Medical corollary: management of risk factors for cardiovascular problems without predicting which patient will have a cardiac event (primary care)
 - The paradox: one never knows if any one patient would have experienced a heart attack (or committed violence) without the intervention
- 

Deaths attributable to cardiovascular disease (United States: 1900–2008).



Writing Group Members et al. *Circulation* 2012;125:e2-e220

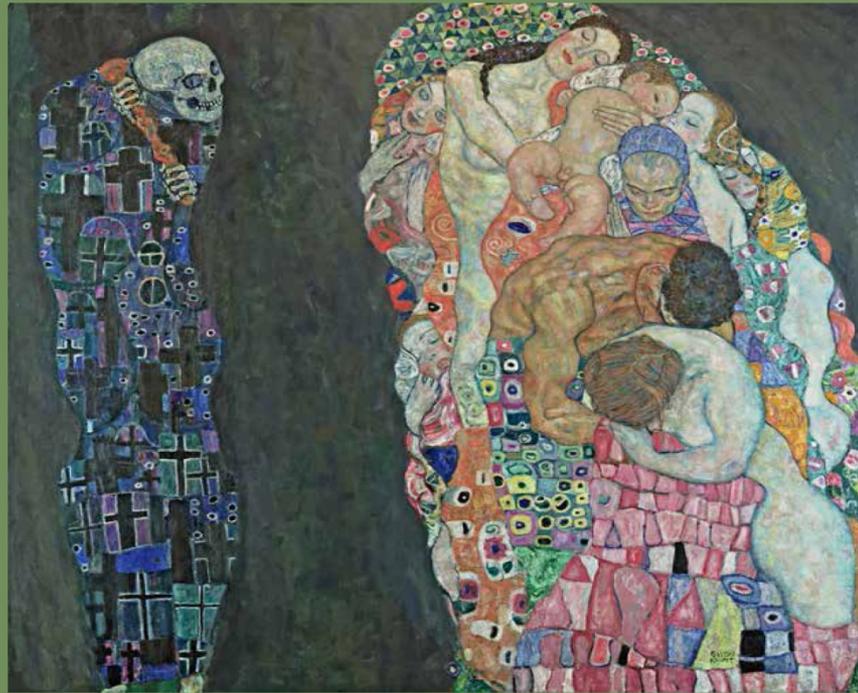
Therefore, we risk
manage behaviors of
concern in the present,
rather than trying to
predict the future



Clinically manage Lethality Risk if Concerned

- Proximity to a firearm
- Voluntary or involuntary removal
- Always inquire concerning safe storage in the home





INTERNATIONAL HANDBOOK OF THREAT ASSESSMENT

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Thank You

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