Foundations of Threat Assessment and Management

Andre Simons and J. Reid Meloy

In June of 2014 a Seattle Pacific University student tackled and pepper-sprayed an active shooter on campus who had killed one person and injured two others ("1 dead, others hurt," 2014). In April of 2015 in Washington State, a North Thurston High School teacher confronted and overpowered a 16-year-old school shooter who had fired two shots inside the high school ("Teacher Tackles Shooter," 2015). In the summer of 2015, a heavily armed gunman opened fire on a high-speed train traveling from Amsterdam to Paris before being challenged by passengers, two of whom were US soldiers ("The Men Who Averted," 2015"). These disruptions were heroic, incredibly brave, and saved countless lives. The right people were in the right place at the right time; they recognized the signs of the attack and made the decision to challenge the offender.

Violent acts such as active shootings sometimes are disrupted in this way—when vigilant

bystanders recognize an attack and bravely intercede to confront the offender. These types of heroic acts that stop catastrophic attacks, however, are relatively rare. In colleges, K-12 schools, businesses, and law enforcement agencies there are professionals who work daily to detect and prevent these horrible acts from ever occurring in the first place. These less-publicized but equally impactful disruptions are carried out by *threat assessment* and *threat management professionals*. They include law enforcement officers, mental health care providers, and other security stakeholders collaborating in a structured effort to accurately assess and then mitigate the risk of violence. As events such as targeted shootings in public areas increase in frequency and impact (Blair & Schweit, 2014)—in contrast to the 30-year general downward trend in criminal violence (Decrease in 2014, 2015)—it is important for law enforcement, mental health, and criminology professionals to understand how threat assessment and threat management can be useful tools for thwarting violence.

Threat assessment and management (TAM) is broadly defined as the set of investigative and operational techniques used by law enforcement professionals to identify, assess, and manage the risks of targeted violence and its potential perpetrators (Fein, Vossekuil, & Holden, 1995). It has also been described as the process of gathering information to understand the threat of targeted

A. Simons (✉)
Federal Bureau of Investigation, US Department of Justice, Washington, DC 20535, USA

J.R. Meloy
University of California - San Diego, School of Medicine, La Jolla, CA 92093, USA

violence posed by a person (Meloy, Hart, & Hoffmann, 2014), and determining the level of targeted violence risk posed by an individual or group toward a specific target (Association of Threat Assessment Professionals, 2006).

TAM may be a relatively new concept for many professionals. "The primary role of law enforcement professionals in violent crime has historically been reactive, rather than preventative. Most investigators are called upon to investigate violent crimes *after* they have occurred …." (Borum, Fein, Vossekuil, & Berglund, 1999, p. 324). In contrast, the primary objective of TAM is to detect and disrupt acts of violence *before* they occur. This contradicts the outdated concept of "police paralysis," where law enforcement action only occurs in response to a violent act. This reactive posture is no longer acceptable, or even reasonable, in a world with terrorist attacks, school shootings, and other violence, where preattack behaviors are often observable. Recognizing that holistic criminal justice includes both reactive and proactive strategies for mitigating violence, this chapter will focus on the use of TAM as a method for preventing terrible acts such as active shootings, assassinations, and other targeted violence attacks.

In many ways, law enforcement officials practice some form of threat assessment each day, whether during interviews of subjects on the street or during routine traffic stops. When a subject is first contacted, the law enforcement officer evaluates verbal and nonverbal behaviors and constantly looks for any indicators of imminent violence or predatory intent. The officer may probe to assess the subject's stability, ability to comply with set boundaries, and history of violence. After determining the potential for violence, the vigilant officer or investigator takes actions to mitigate the risk of escalation and prevent an attack. In a similar manner, a TAM professional engages in a process of analyzing behavior in an effort to interrupt the trajectory toward a violent act.

Perhaps the most important concept to understand is that TAM is not a method of *predicting* future violence. No law enforcement officer, psychologist, profiler, or TAM professional can definitively ascertain if or when an individual

will commit an act of targeted violence. Rather than trying to predict future violence, TAM professionals are engaged in the deliberate and structured effort to *prevent* these acts. Prevention does not require prediction.

Some have compared TAM interventions to public health approaches, similar to how seat belts and speed limits prevent injuries without predicting who will crash a car (Miller, 2014). Perhaps no analogy better highlights this concept than the cardiologist and the patient at risk for experiencing heart failure. When meeting with a patient, no competent cardiologist would be audacious (or foolish) enough to advise the patient that he or she is guaranteed to experience a heart attack within the next several months. Such predictions would be enormously problematic and continually disproven to a degree that the cardiologist's credibility would be jeopardized. At the same time, a good doctor would never tell a sincerely concerned patient, "I can't help you until you've had a heart attack. Come back after you have one." Instead, a competent cardiologist would seek to prevent the heart failure from ever happening in the first place by assessing the patient's risk factors (e.g., diet, family history, smoking, lack of exercise, alcohol intake) along with any presenting symptoms (e.g., elevated blood pressure, elevated lipid levels in the blood, fatigue, occasional chest pains). By blending the most relevant research findings with his or her own clinical experience, the cardiologist can assess the level of risk to the patient and identify appropriate interventions. The interventions (e.g., medication, lifestyle changes, surgery) vary in their intensity, may be multipronged, may change over time, and are implemented in order to reduce the overall risk of heart failure. The doctor's priority is therefore proactive prevention, not prediction. There is little doubt patients are better served if heart failure is prevented rather than simply responded to.

The authors suggest this example elegantly demonstrates many of the core concepts involved in the successful detection and disruption of targeted violence through TAM. A professional using TAM evaluates the presenting risk factors and warning signs (or "symptoms") that indicate an individual is on a trajectory toward a violent

attack. Like the cardiologist, the TAM professional must rely upon research and experience to accurately assess the individual's risk factors and warning signs across multiple spectrums; this assessment then informs the development of interventional strategies to mitigate the potential the individual will act out violently. The interventions may vary in intensity and intrusiveness, but all are ultimately designed to reduce the risk of a violent attack. Like the good cardiologist, prevention is the primary objective. With this in mind, the authors suggest that TAM currently represents the most promising avenue for the detection and disruption of acts of targeted violence; it is an emerging cornerstone in the education of the modern law enforcement, mental health, and criminology professional.

History of Threat Assessment and Management

The practice of TAM has evolved over time and has taken its cues from violence risk assessments conducted by psychologists and other mental health professionals (Meloy, Hart, et al., 2014). For many years, methods for assessing risk of general recidivism and violence have been utilized for determining relative risk of a specific person during the adjudicative process (Borum et al., 1999). These methods have frequently relied upon the "clinical" process (face-to-face evaluations by mental health professionals) or the "actuarial" approach (the use of statistical probabilities to predict future behaviors) (Monahan, 1981). Recognizing that subjects may present with highly individualized historical, clinical, and contextual issues (Monahan, 1996), TAM has evolved and currently relies upon "structured professional judgment," a process that utilizes clinical and/or operational expertise within a structured application or protocol (Douglas, Cox, & Webster, 1999; Grove & Meehl, 1996) which does not provide an actuarial estimate of risk.

The field of TAM also has been influenced by trends in violent behaviors, including stalking, workplace violence, school massacres, campus attacks, assassinations, and other acts of intended or targeted violence. There are several specific attacks that have shaped our understanding of predatory (i.e., instrumental, intended, targeted) violence (Meloy, 2006) and contributed to the development of TAM:

- Actress Rebecca Schaeffer was stalked by Robert John Bardo for nearly three years. On July 18, 1989, he appeared at the front door of her apartment in West Hollywood and shot her to death. Schaeffer's death helped prompt the 1990 passage of America's first anti-stalking laws in California and prompted the Los Angeles Police Department to form the Threat Management Unit (Dunn, 2014).
- Between 1970 and 1981 there were four attempted assassinations of public figures, including presidential candidate George Wallace, President Gerald Ford (on two occasions), and President Ronald Reagan. These attacks and others prompted the US Secret Service's (USSS) research on violence and protective intelligence culminating in the publishing of the landmark Exceptional Case Study Project (Fein & Vossekuil, 1999).
- In April of 1999, Columbine High School students Eric Harris and Dylan Klebold attacked their school using makeshift bombs and guns, killing 13 and injuring 21 before committing suicide ("Columbine High School," 2015).
- In April of 2007, Virginia Polytechnic Institute student Seung-Hui Cho attacked individuals within two separate buildings on campus, killing 32 and wounding 17 before killing himself ("Columbine High School," 2015).
- In December of 2012, Adam Lanza shot his way into Sandy Hook Elementary School in Newtown, Connecticut. Once inside, he killed 20 children and six adults before killing himself (Connecticut Department of Emergency Services and Public Protection, 2013).

At first these tragic incidents seem to be unconnected attacks with little in common. However, each features an offender or offenders who engaged in *targeted violence*, a methodical, predatory, and deliberate effort to carefully craft a plan of violence against a person or institution

followed by a calculated attack (Fein et al., 1995; Meloy, 1988, 2006). These offenders planned their attacks over days, months, and sometimes years. At some point in their trajectory from thought to action, each decided that violence was the best—or perhaps the only—solution to their particular grievance or perceived problem. Another shared trait between these seemingly disparate offenders is their display of preattack behaviors that gave clues as to their violent intent. Oftentimes such clues are observed by others but are not immediately recognized as indicative of an imminent attack (Fein et al., 2002).

Each of these incidents—and many other acts of stalking, assassinations, and shootings—have been scrutinized and studied by TAM professionals in an effort to learn about offenders' psychological and behavioral trajectories in the lead up to their respective attacks, often with a particular focus on identifying observable behaviors. This research has propelled the development of the field of practice of TAM as law enforcement and mental health care professionals work to refine methods for detecting and disrupting similar attacks. For instance, the attack at Columbine High School, which had been preceded by a number of school shootings throughout the USA, prompted a "general recognition of the need for school-based threat assessment" (Mohandie, 2014, p. 126) and sparked a national conversation on police tactical responses and preventative TAM strategies. Similarly, the attack at Virginia Tech spurred the Virginia Commonwealth's General Assembly to mandate in 2008 that all institutions of higher education in Virginia have threat assessment and management capability (Virginia Law, n.d.). Several review panels convened after the 2007 attack concluded that "having a threat assessment and management (TAM) process was critical for enhancing early identification and intervention with situations that posed a risk of violence or significant disruption to the campus environment" (ASME Innovative Technologies Institute, 2010; International Association of Campus Law Enforcement Administrators, 2008; National Association of Attorneys General, 2007, as cited in Deisinger, Randazzo, & Nolan, 2014, p. 107).

Since that time other states have mandated that colleges and universities have threat assessment teams accessible as a resource for detecting and disrupting targeted violence on campus (Illinois General Assembly, n.d.; Office of the State Department of Education, 2014; OLR Bill Analysis, n.d.). The spread of TAM as a remedy to the increase in targeted violence attacks was also demonstrated in 2013, six months after the attack at Sandy Hook Elementary School, when the Virginia Commonwealth's General Assembly became the first state legislature in the USA to require that all K-12 schools in Virginia have TAM capability (Virginia Law, n.d.). As more corporations, workplaces, schools, colleges, and law enforcement agencies recognize the value of TAM and acquire prevention capabilities, it becomes increasingly important and relevant for law enforcement, mental health, and criminology professionals to understand basic principles, key terms, and ways in which TAM can help to prevent violence.

Key Terms

To develop a working understanding of TAM and the core concepts involved, professionals should be familiar with the following key terms and definitions:

- *Threat*—a perceived possibility of harm; or a statement conveying an intention to cause harm (Meloy, Hart, et al., 2014).
- *Violence*—any actual, attempted, or planned injury of other people; it is intentional, nonconsenting, and without lawful authority (Meloy, Hart, et al., 2014).
- *Affective violence*—reactive, impulsive, defensive, emotional violence, preceded by autonomic arousal, caused by a reaction to a perceived threat, and accompanied by intense feelings of anger and/or fear (Meloy, 1988, 2006). This is the most common mode of violence.
- *Predatory violence*—instrumental or offensive violence characterized by the absence of autonomic arousal and emotion, the absence of an imminent threat, and involving planning

and preparation before the attack (Meloy, 1988, 2006). This is a typically more dangerous and less common mode of violence.

- *Targeted violence*—the operational term for predatory, instrumental, or offensive violence. Perpetrators preconceive their violence (focused on individuals, groups, or locations) and engage in behaviors that precede and are related to their attacks. They consider, plan, and prepare. These behaviors are often detectable, which provides an opportunity for disruption of the intended violence by utilizing a comprehensive, multidisciplinary approach for assessment and intervention (Fein & Vossekuil, 1998; US Department of Defense, 2012).
- *Structured professional judgment*—an organizing methodology for conducting threat assessments that relies on clinical and/or operational expertise within a structured application or protocol; it operationally defines risk factors, allows for idiographic (case specific) risk factors, and focuses on threat management and prevention (Grove & Meehl, 1996).
- *Precipitating events*—Events, circumstances, and contextual stressors that can increase the likelihood of a targeted violent act or strengthen commitment to the violent plan (e.g., divorce, termination, financial crisis, and substance use). Often it involves a loss of love or work.
- *Stabilizers and buffers*—Variables or values that can mitigate the likelihood of an act of violence (e.g., supportive family members, mental health treatment, fear of losing a job or going to jail, loss of reputation, and anticipated guilt).

Threat Assessment and Management Process

In a landmark effort, the Exceptional Case Study Project (ECSP) was published in 1999 by the USSS (Fein & Vossekuil, 1999). After conducting an in-depth analysis of 83 assassinations and attempted assassinations of public figures and elected officials, the USSS discerned that prevention of these acts of targeted violence flowed from three distinct yet highly interconnected phases: identification, assessment, and management. As a follow-up to the ECSP, in 2002, the USSS collaborated with the US Department of Education to produce the Safe Schools Initiative (Fein et al., 2002), a very useful document created to guide TAM professionals or law enforcement officers in conducting threat assessments and management efforts in K-12 settings. In studying assassins and schools shooters, the USSS and the US Department of Education subsequently identified six core principles that serve as the foundation for the threat assessment process. They include:

1. Targeted violence is the end result of an understandable, and oftentimes discernible, process of thinking and behavior.
2. Targeted violence stems from an interaction among the individual, the situation, the setting, and the target.
3. An investigative, skeptical, inquisitive mindset is critical to successful threat management.
4. Effective threat management is based upon facts, rather than on characteristics or "traits."
5. An "integrated systems approach" should guide threat assessment inquires and investigations.
6. The central question in a threat assessment inquiry or investigation is whether a person poses a threat, not whether the person has made a threat (Fein et al., 2002).

These principles frequently serve as the foundation for TAM professionals and teams when they address a threatening person or communication. When an incoming request for a threat assessment is received, a TAM professional should apply the accepted best practices within the field of TAM, which suggest that a team approach is preferable to addressing the threat as an individual assessor or manager. The "Lone Ranger" approach is ill advised. As the American National Standard for Workplace Violence Prevention and Intervention (ASIS, 2011) noted, "an important maxim that applies to both prevention and incident management is the notion that no one 'goes it alone.'" (p. 16). Thus, a typical interdisciplinary TAM team will involve law enforcement officials, mental health care professionals, security officials, human resource

specialists, legal counsel, and other experts as needed, depending on the context of the situation. The current authors understand that assembling a TAM team may not always be feasible; however, we nevertheless strongly encourage the use of a TAM team when possible.

When a new threat is received, the law enforcement officer or TAM professional first should conduct a triage to appropriately consider the urgency and imminence of the potential threat. With the understanding that each threat must be considered individually and within the totality of the unique circumstances that present, the authors recommend that an effective triage (Deisinger et al., 2014; Meloy, 2011) consists of the following questions:

1. Are there indicators the subject has developed and/or operationalized plans for suicide?
2. Are there indicators the subject has developed and/or operationalized plans for violence toward others?
3. Are others around the subject frightened, anxious, and/or concerned the subject will use violence against them or others?
4. Does the person have access, or are they trying to gain contextually inappropriate access, to a weapon such as a firearm or explosives, often through clandestine or deceptive means?
5. Is the subject demonstrating any last resort warning behaviors, such as the preparation of a legacy token or other final preparatory acts?

The goal of this screening is to quickly determine if violence is imminent—therefore necessitating immediate protective or law enforcement intervention—or if the circumstances allow for more information collection and evaluation over time by the TAM team (Deisinger et al., 2014). If the triage determines that violence is imminent and plans for an attack are highly operationalized by the offender, immediate interventions (such as arrest, emergency physical security measures such as "lockdowns," or other urgent measures) should be considered. If the triage determines no imminent or immediate threat exists, the TAM may proceed to gather additional information regarding the potential offender. Once the triage

is conducted, an initial assessment can be generated and assigned appropriately based on the level of concern for significant and/or imminent violence.

Any law enforcement official or TAM professional assigned to investigate threat cases quickly learns that threat assessment generally involves two distinct genres: the assessment of threatening communications and the assessment and management of persons who may become violent. Both have very different requirements and challenges for the law enforcement professional.

Threatening Communications

As previously noted, one of the core foundational concepts of threat assessment is that oftentimes there are many differences between those who *make* threats of violence and those who *pose* a threat of violence (Borum et al., 1999; Calhoun, 1998; Calhoun & Weston, 2003; Dietz, Matthews, Martell, et al., 1991; Dietz, Matthews, Van Duyne, et al., 1991; Meloy, 2000). Offenders who have committed acts of targeted violence—such as active shootings or assassinations—rarely, if ever, issued a direct communicated threat to their intended target prior to attacking (Meloy & Hoffmann, 2014). When considering the predatory nature of targeted violence, this should not be surprising. A threatening communication typically sparks a predictable response which includes heightened security, increased vigilance, and additional barriers between the offender and the target, all of which are undesirable to an offender who truly wants to commit violence (Simons & Tunkel, 2014). In cases involving acts of targeted violence, it is rare to find an offender who wants to directly alert a target *before* an attack happens, thus sacrificing the element of surprise and compromising his plans.

Yet, as frequently demonstrated, threatening communications can be extremely disruptive, problematic matters that demand police attention and drain investigative resources. Law enforcement and TAM professionals are routinely called upon to evaluate threatening communications,

particularly with the proliferation of social media and the ubiquitous nature of online connectivity. For instance, in 2015 numerous airline flights were disrupted by short threats that were broadcast via Twitter; these communications prompted the rerouting of planes mid-flight and caused widespread anxiety ("Twitter Terror," 2015). In 2012, several major universities and institutions of higher education in the USA and abroad received anonymized, rerouted electronic threats that prompted mass evacuations and necessitated costly safety sweeps by law enforcement and other campus safety professionals ("String of Bomb Threats," 2012). Additionally, the use of letters containing white powder continues to represent a unique and disruptive challenge to victimized businesses as well as the hazardous materials first responders who must dedicate extreme caution and significant time. It is likely that such threats used by offenders to provoke fear, anxiety, and to harass or intimidate the victim recipient, will increase as options for diverse and anonymous methods of delivery continue to expand.

When evaluating threatening communications, a TAM professional will examine the mode of delivery, characteristics of the victim, context of any relationship between the threat author and the victim recipient, and possible motives. He or she will also look for evidence of operationalization of a plan; search for indicators of the author's resolve for violence; and assess for signs of imminent acting out (Simons & Tunkel, 2014). Generally, a thorough and thoughtful assessment of a threatening communication will help answer two primary concerns: (a) how does the victim recipient react to the communication (e.g., evacuation of a facility), and (b) who is the likely author of the communication?

While direct threatening communications are rarely indicative of future violent intent in matters involving targeted violence, all communicated threats are initially taken very seriously because any individual may act subsequent to his threat (Meloy, Sheridan, & Hoffmann, 2008). Additionally, there is substantial evidence to suggest that threatening communications issued between intimate or former intimate partners may be highly correlated to future violence; this originally was theorized by Calhoun and Weston (2003) and is referred to as "the intimacy effect."

Persons of Concern

The more daunting challenge for the TAM professional may be the identified *person of concern*, an individual who has or is currently demonstrating behaviors suggestive of potential future violence. A person of concern typically comes to the attention of law enforcement or TAM teams because he or she has made statements, generated communications, or behaved in such a way that others have grown anxious or frightened. Once identified, law enforcement and TAM professionals must attempt to accurately and fairly assess the individual's propensity for violence, balancing the safety needs of the community with the individual's constitutional rights, including his right to privacy.

This process of assessment relies heavily upon the examination of the constellation of the person's behaviors, and specifically seeks to determine if there is evidence to indicate that he or she is moving from an idea to action (Calhoun & Weston, 2003). The objective of the TAM professional or team in conducting this assessment is to determine: (a) if the behaviors and conditions demonstrated by the person of concern are consistent with preattack preparations, and (b) if the subject appears to be moving toward or away from an attack (Fein et al., 1995).

To assess the person of concern and their efforts to operationalize any contemplated plan of attack, it can be helpful to understand a theoretical model commonly referenced in TAM literature and practice: the "pathway to violence" (Calhoun & Weston, 2003; Fein et al., 1995; Meloy, Hart, et al., 2014). Originally conceptualized by the USSS in their examinations of assassins and school shooters, the stages for this model were further described by Calhoun and Weston (2003). The model suggests that attackers first develop a profound *grievance*, a sense of anger and resentment at an undeserved injustice that is perpetrated upon the subject by a person or

institution. The grievance often may be exacerbated by an underlying robust but ultimately fragile narcissism laced with a sense of entitlement, privilege, and/or ability that is susceptible to compromise and "bruising" when unrecognized by others. Real or perceived insults to the subject's self-identity may result in an ego-dystonic state where the subject's rage and violent fantasy (*ideation*) provide the only compensatory relief to his sense of humiliation. As described by Dietz (1986), Hempel, Meloy, and Richards (1999), and Knoll (2010a, 2010b), a warrior or "pseudocommando" mentality begins to saturate the offender's thoughts while simultaneously inflaming his narcissistic grandiosity. The subject is unable to find satisfaction or repair outside the violent fantasy.

> "For the pseudocommando, revenge fantasies are inflexible and persistent because they provide desperately needed sustenance to his self-esteem. He is able to feel better by gaining a sense of (pseudo) power and control by ruminating on, and finally planning out his vengeance" (Knoll, 2010a, 2010b, p. 90).

Undoubtedly many persons of concern experience a profound grievance and harbor ideas of violence without actually moving on to commit a violent act. However, it appears that some offenders become so enthralled by the violent ideation and psychologically intoxicated by the compensatory relief it provides to their fractured ego, that they lose the desire or ability to pursue other, healthier means of resolution. "Toxic levels of envy and narcissism … can fracture the personality, hold it hostage and in thrall, by being fueled by triumph and contempt" (Knoll, 2010a, 2010b, p. 703). The developing pseudocommando must hold fast to his "hatred of anything such as growth, beauty, or humanity which is an advance over a bleak, static interior landscape" (Knoll, 2010a, 2010b, p. 710). The subject, having fully embraced the idea that violence remains the only remedy for the grievance, decides to pursue the operationalization of his violent fantasy. Referenced as a "violent action imperative" (Mohandie & Duffy, 1999), the subject determines that all alternatives have evaporated, and violence remains the only option. This flawed

perception may have been demonstrated by Kip Kinkel, who attacked at Thurston High School in Springfield, Oregon, in May of 1998, killing two classmates before being overpowered by students and staff. During a police interview after the attack, Kinkel kept repeating the phrase, "I had no choice. I had no other choice." (Kirk, 2000). It is often during the ideation phase that subjects begin to exhibit a fascination with previous attacks and attackers, demonstrating recognition of the notoriety that often accompanies high profile acts of targeted violence (Meloy, Mohandie, Knoll, & Hoffmann, 2015).

It is crucial for the law enforcement officer to understand that ideas of violence without action are often protected under the First Amendment as freedom of speech and—generally speaking—may not constitute a criminal act. However, these violent fantasies sometimes serve as the springboard for the offender who decides that real, operationalized violence is the only option, and as a result these fantasies cannot be ignored by the TAM professional or team.

Once the evolving offender escalates beyond ideation into action, he or she begins to engage in *research and planning*. Research and planning may be described as the offender's first steps toward bringing a plan to fruition, bridging the gap between an idea and an act. Examples of research and planning can include selecting the target, photographing targeted areas (e.g., classrooms, hallways, theaters); charting out areas for explosive devices; ordering weapons, ammunition, or ballistic armor online; or practicing with weapons with the goal of killing persons (versus improving marksmanship). Research and planning differs from ideation in that the offender is now taking concrete steps to get ready for an attack. When viewed in totality, there is evidence the offender has dedicated effort and energy toward a goal and is taking steps to accomplish the goal.

The offender then may graduate to the step characterized as *preparation*. In this phase, he or she accumulates all of the necessary weaponry, ammunition, clothing, tools, or other practical materials needed for an attack. Simultaneous to the logistic preparation, he or she is now becoming psychologically ready for the attack.

An offender may be at heightened risk for an imminent attack if he or she demonstrates behaviors consistent with the next phase, *breaching*. To be in close physical proximity to the targeted institution or person an offender must circumnavigate or overcome any barriers or obstacles that exist between him and the target. Without routine or normal access to a targeted facility, an offender may breach by conducting a "dry run" penetration test, such as intruding into a facility where he or she has no legitimate access for the express purpose of collecting intelligence on security countermeasures. Another example of breaching is an offender who, commensurate to the attack, surreptitiously smuggles weapons into a classroom or theater and then waits to attack.

The final phase is, of course, the *attack* itself. In this moment an offender lashes out in a destructive, nihilistic fashion in an attempt to completely dominate the targeted institution or person. For the offender the attack typically represents the manifestation of two desired states: perceived infamy and notoriety resulting from inevitable media coverage of the attack, and a sense of robust—albeit transient—omnipotent control. As originally described by Freud (1914) and forensically applied by Meloy (1988), the offender's depleted narcissism fuels an overwhelming desire for omnipotent control over the target. Although the offender may consciously realize the attack will result in his or her arrest or death, the momentary control experienced during the attack is perceived as not only restorative, but transformative. Paradoxically, as Bion (cited in Grotstein, 2007) noted, the narcissistic defenses have been *reduced* to omnipotent control, and at a terrible cost to the offender and others.

As familiar as TAM professionals should be in understanding conceptual models such as the "pathway to violence," it is equally important for them to recognize that pathway behaviors may not be demonstrated in every situation or by every potential offender. In exploring typologies to identify patterns of behavior consistent with preattack behaviors and violent intent, Meloy and colleagues formulated a model of risk factors based on research and experience (Hempel et al., 1999; Meloy, Hoffmann, Guldimann, & James,

2012; Meloy, Hoffmann, Roshdi, & Guldimann, 2014; Meloy & O'Toole, 2011). In this model of "Warning Behaviors," the pathway to violence is one pattern of proximal behaviors that a TAM professional or team should consider when conducting an assessment. Meloy's model of Warning Behaviors include:

1. *Pathway warning behavior*—any behavior that is part of research, planning, preparation, or implementation of an attack (Meloy et al., 2012. These are the final stages of the pathway as enunciated by Calhoun and Weston (2003).
2. *Fixation warning behavior*—any behavior that indicates an increasingly pathological preoccupation with a person or a cause (Mullen, Pathe, & Purcell, 2009). It is measured by (a) increasing perseveration on the person or cause, (b) increasingly strident opinion, (c) increasingly negative characterization of the object of fixation, (d) impact on the family or other associates of the object of fixation if present and aware, and (e) angry emotional undertone. It is accompanied by social or occupational deterioration.
3. *Identification warning behavior*—any behavior that indicates a psychological desire to be a "pseudocommando," (Dietz, 1986), have a "warrior mentality" (Hempel et al., 1999), closely associate with weapons or other military or law enforcement paraphernalia, identify with previous attackers or assassins, or identify oneself as an agent to advance a particular cause or belief system (Meloy et al., 2015).
4. *Novel aggression warning behavior*—an act of violence that appears unrelated to any targeted violence pathway warning behavior and is committed for the first time. Such behaviors may be utilized to test the ability (de Becker, 1997) of the subject to actually do the violent act and may be a measure of response tendency, the motivation to act on the environment (Hull, 1952), or a behavioral tryout (MacCulloch, Snowden, Wood, & Mills, 1983). When homicide occurs within this warning behavior, it may be "proof of kill"

(G. Deisinger, personal communication, February 2011).

5. *Energy burst warning behavior*—an increase in the frequency or variety of any noted activities related to the target, even if the activities themselves are relatively innocuous, usually in the hours, days, or weeks before the attack (Odgers et al., 2009).

6. *Leakage warning behavior*—the communication to a third party of intent to do harm to a target through an attack (Meloy & O'Toole, 2011).

7. *Last resort warning behavior*—evidence of a "violent action imperative" and "time imperative" (Mohandie & Duffy, 1999); increasing desperation or distress through declaration in word or deed, forcing the individual into a position of last resort. There is no alternative other than violence, and the consequences are justified (de Becker, 1997). The subject feels trapped (S. White, personal communication, October 2010). Within this pattern there may be observable changes in behavior such as the preparation of a *legacy token*—a communication (e.g., video and manifesto) created by the offender and delivered or staged for discovery (Simons & Tunkel, 2014). In creating a legacy token, the offender attempts to: (a) claim credit as the mastermind and primary attacker, (b) articulate the motivations and reasoning behind the attack so others may fully understand the offender's grievance, and (c) perpetuate the media cycle of coverage that inevitably emerges in the aftermath of the attack. The legacy token, particularly if delivered via social media or online, helps the offender achieve a degree of notoriety or infamy that he or she desperately craves, even when paired with the realization it will be gained posthumously. A disturbing trend in legacy tokens that follows social media technological advances is the self-recording of targeted violence as it occurs. This was observed in the attack by Vester Flanagan on a reporter, a camera operator, and an interviewee in Roanoke, Virginia, in the fall of 2015. He self-recorded his double homicide and then uploaded the gruesome video to Twitter and Facebook during his flight and final hours of his life before he committed suicide (Ingram, 2015). This *innovation* in legacy tokens may portend imitations by others, including the Internet broadcasting attacks *in real time* via various social media platforms and applications. Such "instant legacy tokens," propagated through viral views, reposts, and the media, provide a tantalizingly immediate and stimulating gratification for the offender as he chases infamy and recognition.

8. *Directly communicated threat warning* behavior—the communication of a direct threat to the target or law enforcement beforehand. (Note again that this particular feature is infrequently linked with assassins or active shooters, and more commonly associated with intimate and former intimate partners). In one study, five of the warning behaviors (pathway, fixation, identification, novel aggression, and last resort) were able to significantly discriminate with large effect sizes between a sample of German school shooters and other students of concern (Meloy, Hoffmann, et al., 2014).

When conducting a threat assessment, the TAM professional should be alert for dramatic changes in behavior that may indicate preattack preparation. For instance, an interesting finding has emerged in the relationship between alcohol/drugs and the two modes of violence. Intoxicating drugs such as alcohol are very common in cases of affective violence, but very infrequent in cases of predatory or targeted violence. Why? In affective violence, alcohol often disinhibits the impulsive behavior; in predatory violence, alcohol may cloud the consciousness of the perpetrator and reduce the probability of a successful attack. The attacker wants a clear mind to enhance his "predatory acuity" (Meloy et al., 2012). TAM professionals assessing a subject's potential for targeted violence therefore should be alert for any sudden or inexplicable cessation of alcohol or drug use, as the person of concern may be "cleansing" in order to prepare for the impending attack. Such cleansing was demonstrated by George Sodini, who shot and killed female gym members at an aerobics class in Pittsburgh, Pennsylvania in 2009.

Sodini wrote in his online blog on Monday, August 3rd, the day before the attack: "*I haven't had a drink since Friday at about 2:30. Total effort needed. Tomorrow is the big day*" ("*Full text*," 2009).

The evaluation of warning behaviors and other factors helps the TAM professional evaluate the motivation and intent of the person of concern, while gaining insight into the direction of energy and effort toward an attack, or away from it (Fein et al., 1995). At the end of the assessment, the TAM professional or team should be able to answer the following questions (Fein et al., 1995):

1. Does it appear more or less likely that violent action will be directed by the subject against the target(s)?
2. How close is the subject to attempting an attack?
3. What might change in the person of concern's life to increase or decrease the risk of violence?

Threat Management

Threat management is the process of developing and implementing plans to mitigate the threat of violence posed by a person (Meloy, Hart, et al., 2014). The interplay between threat assessment and threat management is a dynamic and continuous process—the threat assessment forms the basis for the threat management strategy, which, once implemented, begins to influence and modify the assessment, which in turn shapes the next intervention (Meloy, Hart, et al., 2014). Successful management of a threatening situation generally requires substantial time and effort. As eloquently described by the US Secret Service and the US Department of Education in *Threat Assessment in Schools* (Fein et al., 2002), the management of these situations comprises three related functions:

1. Controlling/containing the situation and/or person of concern in a way that will prevent the possibility of an attack;

2. Protecting and aiding possible targets; and
3. Providing support and guidance to help the person of concern deal successfully with his or her problems. (p. 63)

Once assessed, the challenge for TAM professionals in addressing a person of concern is how to operationalize the assessment via the development and implementation of a meaningful threat management strategy. In effective threat management, the TAM professional or team exploits information derived from the assessment to remove, suppress, reframe, or minimize threat-enhancing factors (e.g., job or academic stress) while simultaneously enhancing or amplifying threat-mitigating factors (e.g., mental health care treatment, support systems). Examples of threat management strategies with varying levels of intensity (Calhoun & Weston, 2003) include:

- Waiting, watching, and monitoring (low intensity);
- Routine but informal voluntary "status-check" meetings with law enforcement or
- security personnel (low to moderate intensity);
- Voluntary counseling via Employee Assistance Programs, campus counseling
- centers, or other outpatient mental health care services (low to moderate intensity);
- Disciplinary actions, such as relocation or boundary-setting measures to modify
- behavior (moderate intensity)
- Temporary suspension/exclusion from a facility or institution (moderate to high intensity);
- Mandated mental health evaluations to assess "fitness for duty" or formally
- evaluate for violence risk (moderate to high intensity);
- Termination, exclusion, and/or expulsion (high intensity);
- Arrest or involuntary emergency mental health care hold (high intensity);

Each intervention impacts and influences the subject and thereby modifies the original threat assessment. The ongoing management of a person of concern necessitates that the TAM professional

continuously monitor and consider the impact the threat management strategy has upon the subject. While each threat management strategy hopefully reduces the overall level of concern, the TAM professional must be vigilant for a threat management strategy that potentially exacerbates the situation by increasing the subject's propensity for violence. For example, a paranoid and delusional individual who believes the government is targeting him with radio waves may not respond favorably to routine interviews and welfare checks from uniformed law enforcement officers representing a local, state, or federal government agency.

Clinical/Mental Health Issues

The relationship between mental illness and targeted violence remains a complex and oftentimes confusing area for TAM professionals. There has been voluminous research over the past 40 years by distinguished academics on this topic; some studies indicate mental illness does not increase general violence risk (e.g., Elbogen & Johnson, 2009; Monahan et al., 1981) while other studies suggest it does increase violence risk (e.g., Douglas, Guy, & Hart, 2009; Mullen et al., 2009). Often, the disparity in findings is a result of definitions, sample selection, and timeframe measurements. For example, is the independent variable a diagnosis of severe mental illness (e.g., schizophrenia or bipolar disorder), noncompliance with medications in those with severe mental illness, the presence of psychosis, or the length of time between the onset of psychotic symptoms and the violent act? Are samples drawn from psychiatric clinics, hospitals, or communities? Are they random or nonrandom? Did the researcher measure violence over the course of hours, days, weeks, months, or years? Are the data collected through self-report, official records, collateral contacts, or all three? Are we studying violence among the mentally ill, or mental illness among those who are violent? While each of these variables can affect the findings, we can arrive at some preliminary conclusions: (a) psychosis, as a generic term that refers to a loss of contact with

consensual reality and the creation of an internal, idiosyncratic, and bizarre reality, does account for a small proportion of the effect size when considering increased risk of violence; (b) other variables, most notably drug use and psychopathy, increase violence risk at a much greater magnitude; (c) the mentally ill will show greater frequencies of violence when they use illicit drugs compared to those without a mental illness who use illicit drugs; (d) the findings in nomothetic (large group) studies should anchor each risk assessment, but final opinions should be individualized, and structured professional judgment instruments should be utilized to do so; and (e) there remains much work to be done in exploring a possible link between mental illness and targeted violence, as the history of violence and mental illness research has often neglected to distinguish between affective (emotional, reactive) violence and predatory (targeted, intended, instrumental) violence (Meloy & Hoffmann, 2014; Viding & Frith, 2005).

The relationship between mental illness and targeted violence consequently remains unclear. An expert panel convened in 2013 by the American Psychological Association found that although many highly publicized shootings have involved persons with serious mental illness, persons with serious mental illness commit only a small proportion of firearm-related homicides; the problem of gun violence cannot be resolved simply through efforts focused on serious mental illness (Webster & Vernick, 2013). This finding is supported by the observation that in the USA approximately 82 individuals per day were killed by a firearm between the years 2003 and 2012; of these, 61% were suicides (Wintemute, 2015). But what about mass killers or active shooters, especially those who kill in public spaces? Are those in this very small group of offenders more likely to have a mental illness?

In exploring the prevalence of mental illness among mass killers, Meloy et al. (2004) examined the psychiatric histories of 30 adult mass murderers and 34 adolescent mass murderers (with mass murders defined as the killing of three or more persons during a single event). Fifty percent of the adult subjects and 23% of the

adolescent subjects had a psychiatric history. The adults typically met criteria for paranoid schizophrenia, delusional disorder, or major depression. Sixty-three percent of the adolescents who killed in schools had depressive symptoms at the time of the crime. However, only 6% of the adolescents evidenced signs or symptoms of psychosis (behaviors that inferred the presence of delusions, hallucinations, or loss of contact with consensual reality) at the time of the mass murder. This finding is in stark contrast to the 40% of adult mass murderers who were judged to be psychotic and the additional 27% who exhibited behaviors suggestive of psychosis. Only one-third of the adult mass murderers showed no evidence of psychotic symptoms at the time of the killings (Meloy et al., 2004). In a more recent and much larger study of mass murderers (N = 235), Stone (2015) found that approximately 20% were psychotic at the time of the killings, a much lower figure than the older studies of Hempel et al. (1999) and Meloy et al. (Meloy et al., 2004; Meloy, Hempel, Mohandie, Shiva, & Gray, 2001). Stone wrote, "all told at least 33 of the 46 cases can be viewed as disorders within the schizophrenic spectrum" (p. 77). Most of these cases had a decidedly paranoid dimension to them.

How do these figures compare to the general population? Statistics compiled by the National Institute of Mental Health (NIMH) suggest that approximately one in five adults (18.5%, translating to roughly 43.8 million Americans) experience mental illness in a given year. Additionally, 1 in 17—about 13.6 million people—live with a serious mental illness such as schizophrenia, major depression, or bipolar disorder (NIMH, n.d.-b). Approximately 20% of adolescents ages 13–18 experience severe mental disorders each year (NIMH, n.d.-a). For the TAM professional or team, the challenge becomes how to interpret the data in the overall, holistic context of the situation.

Generally, the TAM professional should look for evidence or hallmarks of depression—hopelessness, desperation, and/or despair and paranoia—when evaluating a person of concern or a threatening communication (Fein et al., 2002).

The presence of these indicators may suggest the individual has lost the energy, will, or ability to consider alternatives to violence. He may attribute his problems and plight to others, sometimes in the manner of an active conspiracy against him. Evidence of contemplated or attempted self-harm, suicide, or other self-destructive behaviors should be carefully considered by the TAM professional as a threat-enhancing characteristic: suicide risk positively correlates with homicide risk, although most suicides will not result in an accompanying homicide.

The TAM professional must carefully consider each case individually, assessing the impact that any mental illness may have on the person of concern in their particular circumstance and situation. For the overwhelming majority, a properly managed mental illness will not increase or impact their propensity for violence. For others, the mental illness may inhibit or repress the individual's ability to effectively leverage coping mechanisms against contextual stressors.

Access to Firearms

While intense public discussions concerning access to firearms emerge in the aftermath of each tragic attack, there are two findings that are not in question: first, firearms are a weak predictor of violence in general; and second, firearms can be a strong predictor of lethality risk when in reach of a person of concern to a threat assessor. The TAM professional or team needs to approach this topic not from a political perspective, but from that of evaluating a potential offender's operationalization of a violent plan. As noted by the authors of the *Safe Schools Initiative* (Fein et al., 2002): "…when the idea of an attack exists, any effort to acquire, prepare, or use a weapon or ammunition, including bomb-making components, may be a significant move in the attacker's progression from idea to action" (p. 24). Firearms continue to be the most commonly used weapons in mass attacks, with approximately 80% of workplace homicides and 54% of college campus attacks involving the use of guns (Drysdale, Modzeleski, & Simons, 2010; Harrell, 2011).

It is valuable for a TAM professional or team to specifically consider the *contextually inappropriate* use or attempt to access firearms that may be inconsistent with the subject's past history. For example, a subject in crisis with no previous interest in firearms who suddenly develops an urgent need for a high-capacity rifle may represent a much different level of risk when compared to the longtime gun enthusiast who does not deviate from his or her routine firearms behaviors. Individuals planning and preparing for an act of targeted violence, particularly against multiple targets, may often accumulate weapons *in secret*; the gun enthusiast, on the other hand, will openly purchase a new firearm with great pride and cannot wait to show it to his best friend who appreciates his collection. Meloy et al. (2004) also found (anecdotally) that mass murderers in the planning and preparing stage purchase multiple firearms over time, each one of increasing caliber, and each purchase will be made sooner than the last. At least one study indicated that an average of three firearms typically are brought to the scene of a mass murder (Hempel et al., 1999). TAM professionals and teams should look for other contextually inappropriate behaviors related to firearms such as an unexplained, sudden, and urgent interest in acquiring or accessing firearms; unexplained and sudden escalation in any firearms practice; and/or the incorporation of violent fantasy into firearms-related activities (e.g., using targets featuring pictures of specific persons familiar to the subject, staging targets on the ground).

Careers in Threat Assessment

There are many growing career opportunities for law enforcement or criminal justice professionals within threat assessment and management, including:

- *Police and federal law enforcement*: Several local police agencies, such as the Los Angeles Police Department, have TAM teams who routinely address issues of targeted violence. Many federal law enforcement agencies, such as the FBI's Behavioral Analysis Unit, the USSS's National Threat Assessment Center, the US Marshals Service's Behavioral Analysis Unit, and the US Capitol Police's Threat Assessment Section provide threat assessment and management services for matters involving potential acts of targeted violence. TAM teams or units often hire experienced investigators/agents and analysts who then receive extensive training in TAM principles, processes, and management strategies. Additionally, the Department of Defense and the Department of Homeland Security have initiated several TAM programs such as the Threat Management Unit (TMU) at the Naval Criminal Investigative Service and TMU at the US Coast Guard Investigative Service, respectively.
- *Psychologists, psychiatrists, and mental health care practitioners*: Psychologists, psychiatrists, school counselors, and other mental health care practitioners are increasingly involved as core members of a TAM team. While not every potential attacker has a mental disorder, some do, and many will be struggling with contextual stressors that can overwhelm their coping mechanisms and mental wellness. Having a psychologist, psychiatrist, or other mental health care professional can increase the team's effectiveness, particularly when developing and implementing threat management strategies. Additionally, mental health care providers functioning as members of an Employee Assistance Program (EAP) can provide counseling to employees of concern as part of a remedial or corrective plan (ASIS, 2011). As University of Virginia psychologist Dr. Dewey Cornell noted, "We don't intervene because we predict someone is dangerous, we want to intervene because they're troubled or there's conflict or people are worried about them. Prevention becomes a bonus or a secondary gain from dealing with the underlying issue." (Miller, 2014).
- *Chief Security Officer/Private Corporate Security*: most major corporations have developed internal policies and regulations concerning workplace violence and the prevention

of violent acts on facility grounds. In recognizing the importance of prevention, some companies have aggressively developed TAM teams to proactively intervene when an employee provokes anxiety and concern among colleagues. TAM teams in the corporate environment are often led by the Chief Security Officer, Global Director of Security, or other security personnel that have specific training and experience in TAM matters.

- *Human Resource Professionals*: in the continuing effort to prevent violence in the workplace by employees and former employees, human resource professionals represent a crucial component for any functioning TAM team. "Human Resources will often contribute key skills to incident management including—but not limited to—escalating the report to appropriate personnel, conducting or assisting in the investigatory process, communicating with affected or involved employees, and providing input as the organization attempts to address and resolve a report through the imposition of disciplinary action or other remedial or preventative measures" (ASIS, 2011, p. 8).

- *Research Analysts*: many universities, government agencies, and nonprofit organizations are engaged in research regarding targeted violence, the causes and motivations behind the acts of violence, and the methods for detection and disruption. As TAM continues to grow as a professional field of social science, the need for research regarding behavioral indicators of violence will likely increase.

- *Cyber Analyst/Social Media Analysts*: there is a growing focus in TAM on the assessment of social media for content and sentiment analysis and indicators of violent intent. Not surprisingly, there are many examples of offenders who expressed leakage of violent intent via social media interactions prior to or immediately commensurate to the attack. The tragic attack in Roanoke demonstrates the growing fascination with and use of social media concurrent to an act of targeted violence. Whether used as a platform to express leakage or as a podium from which to announce and glorify the attack, social media appears to have a growing prominence in attackers' quests for infamy and notoriety via violence. The thorough examination of a subject's social media—conducted with respect to privacy and First Amendment freedom of speech—may help inform a TAM assessment and develop insight into the subject's grievances, plans for violence, and movement from thought to action.

Conclusion

Law enforcement officials, mental health care professionals, and criminologists increasingly are involved in the effort to accurately assess and manage persons of concern who may be planning an act of targeted violence. These TAM professionals do not attempt to predict violent behavior but instead work diligently and collaboratively to prevent these acts from occurring. TAM teams and professionals first triage and assess a person of concern using structural professional judgment to determine if the person is on a pathway toward a violent act. This assessment is highly contextualized and focuses on a holistic evaluation of the person's historical, clinical, dispositional and situational factors (Elbogen & Johnson, 2009; Monahan et al., 2001). The assessment drives and informs the development of a dynamic threat management strategy that varies in intensity and intrusiveness depending on the person and the situation.

With the continued rise in the number of active shootings in the USA it is very likely that as you read this chapter, someone who is filled with rage is contemplating an attack, planning a shooting, and preparing to inflict catastrophic violence against an unsuspecting classroom, workplace, or community. The prevention of such acts may well rely upon the dedication of a skilled legion of law enforcement and mental health professionals who combine research and experience to assess and manage these potential attackers away from devastation, guiding them off the pathway to violence and on to a more positive trajectory.

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