Targeted Threats: An Examination of Thematic Content and Approach Behavior Displayed by Mentally Ill and Non-Mentally Ill Contactors

Charles D. Darrow
University of Nebraska-Lincoln, charlesdarrow@gmail.com

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TARGETED THREATS: AN EXAMINATION OF THEMATIC CONTENT AND APPROACH BEHAVIOR DISPLAYED BY MENTALLY ILL AND NON-MENTALLY ILL CONTACTORS

by

Charles D. Darrow

A DISSERTATION

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TARGETED THREATS: AN EXAMINATION OF THEMATIC CONTENT AND APPROACH BEHAVIOR DISPLAYED BY MENTALLY ILL AND NON-MENTALLY ILL CONTACTORS

Charles D. Darrow, Ph.D.

University of Nebraska, 2013

Advisor: Mario J. Scalora

Threat assessment involves a set of investigative and operational techniques used to identify, assess, and manage the risks of targeted violence and other problematic approach behavior. The threat assessment approach continues to be refined through empirical research conducted in an effort to identify and better understand the risk factors for engaging in such behaviors, which accounts for the transition to a more dynamic evaluative process. Pertinent is the examination of thematic content utilized by subjects who engage in threatening behavior toward identifiable victims. In targeted threat assessment, thematic content examination involves the analyses of what the threatening individual is saying to the target. For example, if the threatening individual includes language in his threat that has a decidedly religious or political theme, it is considered one relevant theme inherent to that communication between the contactor and target. This study sought to examine the thematic differences and similarities across three groups of a total of 419 subjects who engaged in threatening communication against specified targets: (a) non-mentally individuals, (b) mentally ill individuals who do not display threat/control override symptoms, and (c) mentally ill individuals who do display threat/control override symptoms. Results suggested that non-mentally ill subjects were more likely than their mentally ill counterparts to directly threaten targets and to focus the content of their grievances on policy driven issues as opposed personally relevant issues. Consistent with prior literature,
mentally ill subjects who did not display threat/control-override symptoms were far more likely to engage in problematic approach of targets than either of the other two groups. Interestingly, mentally ill subjects without threat/control-override symptoms were more likely than either of the other two groups to communicate their beliefs in a manner suggestive of intense resolve.
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Along my journey through graduate school, I have had the good fortune of working with some of the finest clinicians the forensic field has to offer. I would like to thank those supervisors who took an interest in guiding me through many experiences that helped shape me into the clinical psychologist that I have become. I would also like to extend my gratitude to the fine psychologists I worked with during my internship at the U.S. Medical Center for Federal Prisoners. My professional growth while at the USMCFP in Springfield, Missouri has represented the capstone of my graduate education, which would not have been possible without working with so many great people… and some of the most supportive and genuinely good fellow interns.

I would be remiss to not acknowledge my family and friends who provided me with assurance and strength throughout some of the most difficult years in graduate school. Through long nights of studying, cramming for final exams, and time away from home, my family and friends have been a constant source of inspiration. I am fortunate to say that those friends and family outnumber the pages of this document, which means I could not possibly name them all. However, despite the roles each of them played during my journey, their many sacrifices have not gone unnoticed.

I proudly come from a family of farmers in the State of Nebraska. As the first person in my family to attend college, I had the good fortune of a supportive family. I would like to extend a special “thank you” to my father who is perhaps the most deserving of such praise. It is because of his many sacrifices and efforts that I ever had the opportunity to realize my dream of becoming a clinical psychologist. He has eagerly, but gently pushed me to realize my dreams. I only hope that one day I will be able to honor his legacy, and the legacy of my family, through devotion to doing what is right, but not always easy.
Dedication

This study, from its inception through its completion, was conducted with the members of law enforcement in mind. It is through their hard work, endless hours, and thankless dedication that make our homes, communities, and nation a safer place.
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Chapter 1 - Introduction

Each year, political figures receive an immense amount of correspondence, including those of a harassing and threatening nature. Media outlets in the form of newspaper, television, and most recently the internet and other electronic outlets (e.g., twitter), provide a worldwide stage whereby public official’s stance on issues are broadcast and critiqued. Due to the highly controversial issues that political figures deal with on a daily basis at local, state, and federal levels, many of the reactions from citizens become impassioned. The unavoidable result of this process is the emergence of inappropriate, harassing, and threatening contacts sent to political figures. For some subjects, the boundary between threatening communication and actual physical approach with the intent to harm the political figure is breached. The focus of this review is to highlight the importance of comprehensive threat assessment analysis as it relates to the investigation of threatening or otherwise inappropriate contacts sent to political members. Moreover, there is a need to understand the level of threat posed by individuals presenting with serious mental illness and how the symptomology of those subjects relates to their threatening contact and approach behavior. A comprehensive review of threat assessment techniques as well as the role of mental illness and communication patterns by such subjects related to targeted violence is examined.

The goal of threat assessment is to identify persons who are at a higher risk of committing violence, specifically the degree of risk that individual poses, toward a specific person or persons and to intervene to prevent physical harm (Borum, Fein, Vossekuil, & Berglund, 1999). The process of identifying subjects who pose threats before they complete an act of harm is dynamic. Due to the dynamic factors that act as catalysts (e.g., drug abuse) or mediators (e.g., medication compliance), the end result of a subject’s threats are altered. The
inherent complexity of assessing one’s threatening behavior to predict harmful approach precludes the notion of building a diagnostic profile to identify subjects who will commit acts of harm against political figures (Borum, Fein, Vossekuil, & Berglund, 1999). Borum and colleagues (1999) concluded that it is vital for investigator to make a clear distinction between those who make threats and those who pose a threat. Historically, studies have shown that those subjects who pose a threat via intimidating language and indirect threats create the highest level of concern on behalf of law enforcement, in contract to those making direct threats (Borum and colleagues, 1999).

The manner in which harassing or threatening subjects come to the attention of law enforcement varies tremendously. One of the most direct methods of contact a threatener can make is through direct contact with the target in the form of letters, emails, faxes, telephone calls, delivery of packages, etc. Another way in which threatening subjects come to the attention of law enforcement may include statements made to third parties (Schoeneman, Scalora, Darrow, & Zimmerman, 2010). For example, family members or friends hearing what they perceive as a legitimate threat they may go on to report the subject to law enforcement. Many of the methods utilized by subjects to intimidate or make known their grievances to a specific target have long been documented as those stated above, but with the introduction of the World Wide Web, there is another potential layer of anonymity, which may include postings to web sites, blogs, and online chat forums (Schoeneman et al., 2010). In a report issued by the Congressional Management Foundation in 2005, it was determined there was a stark increase in the number of contacts received by Congress that is directly attributable to the public’s use of the internet. According to Fitch & Goldschmidt (2005), statistics on how the public contacts Congress has changed dramatically over the past few decades. Whereas communication with Congress was
heavily weighted on the side of postal letters in the mid-1990’s, the introduction of internet communication has decreased the amount of post received by Congress, but as a result, there has been a dramatic surge in the amount of internet based communication received by Congress. Closely related to the study of mental illness and violence is the burgeoning field of threat assessment, which examines threatening behaviors that precede acts of targeted violence. Some of the research in this area has spotlighted the need for a greater understanding of factors related to targeted violence such as subject characteristics, mediating factors, contextual factors, target preparedness, and treatment compliance. The utility in bringing these factors together in each incident of targeted violence is to shed light on the dynamic features of each mentally ill person and to draw from that a discernable pattern of behavior that may inform future predictions of violence.

Threat Assessment

The commission of violence, perpetrated by one human being against another, has long established roots that transcend time and culture. Although various fields such as law enforcement as well as psychology and sociology have long studied the phenomena of person to person violence, the United States Secret Service (USSS) coined the phrase “targeted violence”, which they defined as “situations in which there is an identified (or identifiable) target and an identified (or identifiable) perpetrator” (Fein & Vossekuil, 1999, p. 332). This systematic approach to defining violence perpetrated against a specific individual diverges from, but also shares characteristics with, the field of risk assessment. While each field strives to assess threats of harm directed toward persons, the field of threat assessment attempts to specifically predict and identify threats posed to a specific individual while examining the motivations for such threats posed in an effort to predict and subsequently prevent future violence.
Some of the first empirically derived and systematic work regarding public figure-directed violence came from the work of Dietz and colleagues (1991). Dietz et al. compiled data regarding threats made against high profile public figures, both celebrity and political. Regarding findings related to threats made against political figures, Dietz and colleagues found a negative relationship between those who threatened political figures and those who physically approached. These findings essentially refuted commonly held assumptions by law enforcement that those individuals who actively threaten political figures actually pose a threat of harm and go on to commit acts of physical violence against their targets. Moreover, the absence of threatening behavior does not equate to an absence of targeted risk or violence (Dietz et al., 1991; Coggins, Pynchon, & Dvoskin, 1998).

Born out of a need to abandon historical law enforcement mores that were reactive and arrest based, the science of threat assessment has emphasized a need to be more than just reactive to acts of violence. Instead, one of the central precepts of threat assessment is the proper analysis of information that ultimately leads to the prevention of violence against specific persons. The shift from reactive to proactive threat assessment developed over time and acts of violence splashed across television screens was part of the driving force behind changes in state and federal legislation. As various acts of violence were perpetrated, whether in schools, places of business or against political leaders, the need to examine threatening behavior became more apparent, which in turn generated studies in the area of threat assessment (Coggins, Pynchon, & Dvoskin, 1998; Borum, Fein, Vossekuil, & Berglund, 1999; Meloy, 1998). In contrast to traditional activity, through which law enforcement investigates an incident, submit findings, apprehend suspects, and assist in the development of evidence for prosecution, Fein et al. (1995), portrays threat assessment as not only investigative, but also operational procedures designed to
identify, assess, and control individuals who actually pose a threat of violence to an identifiable person or persons. As such, members of law enforcement must not only alter their conceptual framework with regard to the examination of threats posed, but also collaborate with mental health practitioners to develop a comprehensive threat assessment evaluation. The collaboration of mental health professionals and law enforcement ensures that the person posing a threat against another can be investigated using multiple skill sets in an effort to determine the elements necessary to increase the likelihood of an attack. In doing so, there should be a detailed examination of behaviors and patterns of conduct so that operational plans can be developed to shield the target, or if deemed necessary, intervention by law enforcement (Swanson, Chemalin, & Territo, 1984; Borum, Fein, Vossekuil, & Berglund, 1999; Fein, Vossekuil, & Holden, 1995).

While threat assessment shares some commonalities with traditional risk assessment, it is necessary to understand what threat assessment does not attempt to do. First, threat assessment is not interested in developing a psychological profile or descriptive profile to assist law enforcement to apprehend the individual in question (Fein & Vossekuil, 1998). Threat assessment is a construct that consists of multiple dynamic factors looking at motivations, environmental catalysts, among other variables, that contributed to the subject’s threatening behavior. Unlike profiling, which stems from a criminal investigator’s need to create a list of characteristics of the person who likely committed the crime based upon clues from a crime scene, threat assessment is interested in myriad factors related to an increased likelihood that an identifiable person will engage in aggressive acts against an identifiable person. To further complicate the dynamic issue of assessing the level of threat a subject poses, law enforcement must also consider the influence that a severe mental illness may contribute to the level of threat posed by a subject.
Scalora and colleagues (2002b), in a follow-up study of previous work (2002a), examined subject-related and contact behavior-related factors in an effort to analyze the predictive utility for estimating the likelihood of problematic approach behavior toward political members. Their findings demonstrated that subjects engaging in approach behavior were more likely to have identified themselves prior to or during contacts with the target in addition to the presence of severe mental illness. The author’s study further found that those subjects studied were less likely to have issued threats prior to their approach of targets. Other findings of the study included that subjects who engaged in approach behavior had a large number of criminal offenses spanning multiple crime categories and were also more likely to have had contact with other federal law enforcement agencies for various reasons. Finally, those subjects in the study who engaged in problematic approach behavior toward Congressional members were more likely to utilize multiple methods of contact prior to their approach and were also more likely to articulate statements of a personal nature when contacting political members.

In a 2003 study conducted by Scalora and colleagues, it was found that mentally ill subjects tended to concentrate the thematic content of their communications around help seeking and religious content and as a group, they were far less likely to include insulting/degrading language in their communications. Further analysis of the data suggested that mentally ill subjects were more likely to include issuance of demands, and contact political members more often (Scalora et al., 2003).

Baumgartner (2003) examining 228 multiple approach, single approach, and non-approach cases, a number of subject characteristics were found. First, regarding those subjects that engaged in multiple approaches, it was found that they had a higher number of prior criminal charges, more likely to demonstrate target dispersion, and be experiencing psychotic/delusional
symptoms than single or non-approach cases. When examining the histories of multiple-approachers, the author noted a higher level of physically threatening contact behavior and further found that characteristics related to a greater number of approaches included a history of violent offense charges, more property offense charges, history of contact with federal law enforcement agencies, target dispersion, help-seeking themes, indicators of psychotic/delusional symptomatology, and an absence of threatening language. When Baumgartner examined those subjects with higher levels of physically threatening approach behavior, it was found that those subjects had a more violent offense history, more property charges, and more threat-related offense charges. When Baumgartner analyzed the characteristics present in those subjects who evidenced severe mental illness, target dispersion, history of contact with federal law enforcement agencies, personal themes, help-seeking themes, and a greater number of approach contacts was associated with psychotic/delusional symptoms.

Mental Illness and Threat Assessment

Research spanning decades has studied the association between mentally ill persons and violence. Within the field of threat assessment has been the continued study of subjects who engage in threatening correspondence and physical approach who exhibit signs of mental illness (Scalora, Baumgartner, & Plank, 2003; Scalora, Baumgartner, Zimmerman, Callaway, Hatch, Maillette, Covell, Palarea, Krebs, & Washington, 2002; Schoeneman, Scalora, Darrow, & Zimmerman, 2010). These subjects often suffer from a thought disorder that drives their erratic and sometimes dangerous behavior (Appelbaum, Robbins, & Monahan, 2000; Scalora et al., 2003; Scalora et al., 2002; Schoeneman et al., 2010). Due to the vast amount of subjects that contact political figures who are mentally ill, there is a need to understand the contextual factors associated with their behavior. Prior studies have suggested there is a relationship between
mental illness symptoms and higher-risk behavior, such as targeted violence against political figures involving approach behavior. In a study by Fein and Vossekuil (1999), it was suggested that mental illness was influential not only for the motivations compelling the subject to attempt violence, but also for the staging activity leading up to the attempted or completed attack.

David James and colleagues (2007) conducted a study examining mental illness and targeted violence against European and American political figures. Their study found that mental illness is a contributing factor to targeted violence against political members in both nations. Specifically, their study included an analysis of twenty-four attacks occurring between 1990 and 2004 with nearly half (11) of the incidents involving pre-attack warning behaviors and that ten of the attackers were shown to be psychotic at the time of the attacks. Moreover, the authors reported that the majority of those subjects identified as having suffered from a mental illness gave some warning and that these same subjects were responsible for most of the twelve attacks resulting in serious or fatal injuries. More recently, James and colleagues (2008) again examined the role of mental illness in problematic approach behavior and targeted violence. Individual characteristics of twenty-three persons who engaged in attacks against members of the British Royal Family between 1778 and 1994 were analyzed with particular emphasis placed on the following areas: (a) the target, and harm inflicted; (b) where and how the attacks occurred; (c) the nature of prior warning or stalking behaviors; (d) the attacker’s motives; (e) the attacker’s psychiatric history and mental state at the time of the incident; (f) the outcome for the incident perpetrator. Findings of the study conducted by James and colleagues (2008) reflected that approximately one-half of the subjects utilized a firearm in the commission of their attacks whereas nearly one-half of the subjects were found to be delusional or experiencing auditory or visual hallucinations at the time of their attacks. The authors also found that seventeen percent
of the subjects in the study had documented histories of mental illness. Related to problematic approach, the authors found that ten of the subjects in their study engage in contact behavior, of some manner, prior to their attacks on a target or verbalized their intent to attack others.

In a study performed by Scalora, Baumgartner, & Plank (2003), mentally ill subjects had a significantly higher rate of intensity in their contact behavior in such a way that they engaged in more frequent contact with targets. In addition, their dissemination of correspondence was more diffuse because they contacted multiple targets instead of isolating their contact to a particular target. These mentally ill subjects also engaged in more frequent contacts with public officials and were more focused on specific personal concerns. The authors also noted how the risk posed by mentally ill subjects could fluctuate over time based upon the stability of the subject’s mental status and treatment compliance.

While prior research has noted that threatening behavior has not often resulted in violent activity (Dietz et al., 1991; Meloy, 2001; Apelbaum, Robbins, Monahan, 2000), some noteworthy issues require additional attention. Research performed by Scalora and colleagues (2002), looking at characteristics of contactors with regard to their approach behavior determined that of the 4387 cases studied, “21% of the approaches were preceded by threatening statements and 42% of the violent approaches involved prior threatening statements (p. 3). Also noted within the study was that the thematic content was wide ranging from racism to domestic and foreign policy, though those contactors displaying more personalized themes were substantially more likely to engage in problematic approach behavior, suggesting the nature of the grievance stated was predcited (Scalora et al., 2002).

In a study designed to assess problematic contacts to political figures, it was discovered that subjects who approached political figures were significantly more likely to have pre-existing
criminal records as well as symptoms displayed during their contacts that indicated a possible major mental illness (Scalora, Baumgartner, Zimmerman, Callaway, Hatch Maillete, Covell, Palarea, Krebs, and Washington, 2002). Additionally, this study indicated that mentally ill subjects were significantly more likely to initiate multiple contacts as well as to make specific demands. Other common threats present in contacts made by mentally ill subjects analyzed through this study included the subjects increased likelihood to verbalize help-seeking concerns as well as a presence of religious themes (Scalora, Baumgartner, and Plank, 2003).

The field of research investigating violence and mental illness has substantiated the claim that persons who suffer from positive symptoms of a schizophrenia spectrum disorder may be at a higher risk for committing violent acts (Nolan, Volavka, Czobor, Sheitman, Lindenmayer, Citrome, et al., 2005). In a study examining mental illness and violent tendencies, it was found that mentally ill persons who were diagnosed with schizophrenia and experienced positive psychotic symptoms (e.g., paranoia, thought insertion, persecutory ideation, etc.) were at a higher risk at committing serious violence (Swanson, Swartz, Van Dorn, Elbogen, Wagner, Rosenheck, et al., 2006; Nolan, Volavka, Czobor, Sheitman, Lindenmayer, Citrome, et al., 2005). These acts included violence towards other mentally ill patients, staff at inpatient mental health units, the general public, and specifically targeted individuals. Research has helped to demystify some of the common misconceptions in this area. For example, the nature of symptoms for those with severe mental illness may be predictive of violence, namely individuals suffering from threat/control-override symptoms (Link & Stueve, 1994). In addition to examining the link between violence and mental illness, over the past few decades researchers have investigated a particular subset of mentally ill persons. Due to an accumulation of evidence gathered on violence perpetrated by mentally ill persons, the prevailing belief was that mentally
ill persons suffering from threat/control-override (TCO) delusions may be at a greater risk for violence (Link & Stueve, 1994). More recent research has not only examined the link between violence and persons with threat control/override symptoms, but also the influence of substance abuse and how that may influence rates of violence in these populations.

**Threat/Control-Override and Violence**

While results of studies have substantiated that persons diagnosed with schizophrenia may be at a higher risk for violence, far fewer studies have gone so far as to explore the relationships between threat/control-override symptoms and substance abuse. While Link and colleagues (1994) found that persons with threat/control override delusions were responsible for more violence, studies since have indicated less evidence to substantiate such claims (Appelbaum, et al., 2000). Past research focused on the mentally ill population of subjects as a whole, but recent research has focused on a particular subset of mentally ill individuals – those suffering from (TCO) symptoms. In a study performed by Bjorkly & Havik (2003), it was concluded that “A particular cluster of psychotic symptoms, perceived threat and control (TCO), may enhance violence (p. 87). Much of this body of research has established that a large percentage of those who threaten violence against others suffer from mental illness, but fewer studies have examined the thematic content of threatening correspondence and how that relates to the actual commission of crime against said targets.

There exists an abundance of research within psychology examining the association between violence and mental illness. Link and Stueve (1994), posited that mental health patients suffering from threat/control-override symptoms displayed a substantially higher rate of violence than did other mentally ill populations. The subset of mentally ill persons who are classified as having threat/control-override symptoms suffer from delusional thinking and may include one or
more of the following three symptoms: (1) feeling that others wished one harm, (2) that one’s mind was dominated by forces beyond one’s control, and (3) that others’ thoughts were being put into one’s head (Swanson, Borum, Swartz, & Monahan, 1996). The analytical measure of this cluster of symptoms is often accomplished either through self-report of the subject displaying these symptoms or through the use of the Threat/Control-Override Questionnaire (TCOQ), which was developed to assess the symptoms inherent to psychotic individuals experiencing threat/control-override symptoms. In a study to examine the psychometric properties of the TCOQ, Nederlof and colleagues (2011) examined three populations: 1) nonclinical students (n = 759), 2) acute psychotic patients (n = 111), and 3) stabilized psychotic patients (n = 33). The results of their study indicated that the measure had good internal consistency and test-retest reliability. Their study also concluded that concurrent and discriminant validity was demonstrated in its ability to provide a meaningful pattern of correlations with other self-report as well as interview measures. The authors noted that the TCOQ was a useful measure for assessing feelings of being persecuted and loss of control (Nederlof, Muris, & Hovens, 2011).

Early research studying the association between increased aggression and the presence of threat/control-override symptoms was conducted through the use of surveys. Using data from the Epidemiologic Catchment Area surveys, Swanson and colleagues (1996) examined the association between psychotic symptoms and violent behavior. Their study, which included over 10,000 participants, found an increased risk of violence when threat/control-override symptoms were present. In fact, the authors found that those participants who reported symptoms consistent with perceived threat and internal control-override were two times more likely to engage in assaultive behavior than those participants with hallucinations or other psychotic behaviors. Moreover, those same participants were five times more likely to engage in assaultive
behavior than those who did not have a mental disorder. Finally, the authors found that the use of substances combined with threat/control-override symptoms added significantly to the risk of violent behavior in their study (Swanson, Borum, Swartz, & Monahan, 1996).

In 2000 the MacArthur Violence Risk Assessment Study published its results that examined data on 1,136 patients discharged from an acute psychiatric hospital. The multi-wave study included interviews upon discharge from the inpatient psychiatric unit as well as interviews at specific intervals for one year that gathered historical and clinical information as well as the ongoing presence of delusional beliefs. In stark contrast to the findings of the study performed by Link and colleagues (1994) some years prior, it was found that “neither delusions in general nor threat/control-override delusions in particular were associated with a higher risk of violent behavior” (Appelbaum, Robbins, & Monahan, 2000, p. 566). Further, Appelbaum and colleagues found that in the absence of substance abuse, violent behavior decreased significantly. The significant differences in findings between the studies has since been attributed to the use of self-report measures in the study by Link and colleagues as well as problems with defining threat/control-override symptoms (Appelbaum et al., 2000; Stompe, Ortwein-Swobody, & Schanda, 2004).

In 2003, Bjorkly and colleagues examined a sample of 39 patients who had a history of violence. In an effort to control for the negative impact of self-report, the authors examined medical charts and police records when looking at the immediate impact of threat/control-override symptoms at the time violent acts were committed. The results of the study indicated that over fifty percent of those participants that displayed threat/control-override symptoms did so immediately prior to committing violent incidents (Bjorkly, Stal, Havik, & Odd, 2003). Related, Fanning and colleagues (2011) were interested in the relationship between psychiatric
patient’s perceived threat and aggression. In their study, the authors examined aggressive behavior in a population of subjects that displayed sub-clinical psychotic symptoms (e.g., “psychosis proneness”). They were interested in whether the subjects of the study who displayed psychosis proneness were more likely to engage in aggressive behaviors and whether subjects displaying threat/control-override symptoms tended to display aggressive behaviors. The results indicated that psychosis proneness was positively related to aggression. Regarding threat/control-override symptoms, the authors found that when threat and control-override symptoms were modeled as separate variables with mediation through the threat variable alone, they achieved the best model fit. Essentially, the researchers found that when a subject’s perceived threat is mediated, those subjects with psychosis proneness are more likely to engage in aggressive behavior (Fanning, Berman, Mohn, & McCloskey, 2011). While several studies have examined general violence and aggression in the population of individuals displaying threat/control-override symptoms, recent studies have also focused on the impact of violence against caregivers by persons displaying threat/control-override symptoms.

In a 2008 study by Chan, aggression committed against caregivers of individuals who displayed schizophrenia and threat/control-override symptoms was conducted. In his study, Chan examined the propensity of violence displayed by severely mentally ill individuals against caregivers who lived with and provided care for them. The author looked at both physical aggression committed by the mentally ill subjects as well as psychological aggression. The results suggested that when examining the dynamic variables predictive of both physical and psychological aggression, those subjects displaying threat/control-override symptoms were more likely to engage in such acts against their caregivers. Moreover, there appeared to be a positive relationship between aggressive behaviors and the intensity of threat/control-override symptoms
displayed. Specifically, as the intensity of one’s threat/control-override symptoms increased, so did the likelihood they would engage their caregivers in acts of aggression, either physically or psychologically (Chan, 2008).

Also interested in the propensity of violent behavior by subjects identified as displaying threat/control-override symptoms, Beck (2004) studied 90 psychiatric patients that were admitted to the hospital following an episode of serious violence. The author found that delusions were either present or questionably present in 73.3 percent of violent episodes and that 83.5 percent of delusionally violent patients had a history of substance abuse. Additionally, there were fewer recorded incidents of violent behavior amongst those participants with active delusions in the absence of substance abuse, which is consistent with findings from the MacArthur Violence Risk Assessment Study (Beck, 2004). However, the study noted that when delusional symptomology was present in incidents of violence, it was the delusional belief systems that appeared to drive the violent behavior of the patients. Coltheart and colleagues described this type of delusional belief – monothematic delusion - as including a small set of delusions, which are related to a singular theme (2011). For example, in the context of threatening communication targeting a political figure, fixed false beliefs relative to the identified political figure and a small set religiously based delusional beliefs would represent a monothematic delusion. In summary, the MacArthur Violence Risk Assessment Study concluded that while delusional symptoms alone do not account for violence perpetrated against others, when present, delusional beliefs systems appear to act as a catalyst in the violent behavior.

In a study assessing the relationship of threat/control-override delusions and violent behavior, Teasdale and colleagues (2006) examined gender differences and acts of violence. Data from the MacArthur Violence Risk Assessment Study was used to determine whether there
were significant differences between men and women suffering from threat/control-override delusions. Findings indicated that males were substantially more likely to engage in violent acts while experiencing threat delusions when compared to periods of time when they did not experience threat delusions. Conversely, women were found to engage in far fewer acts of violence while actively experiencing threat delusions than were men (Teasdale, et al., 2006). In a 2011 study that again examined the association between the experience of threat/control-override symptoms and aggressive behavior, Nederlof and colleagues (2011) further assessed the impact of emotional reactions to positive symptoms (e.g., anger or anxiety) on aggressive behaviors. The authors found that those subjects who displayed threat/control-override symptoms were significantly more likely to engage in aggressive behavior. Overall, the results suggested that the component of perceived threat on behalf of the subjects contributed to an increased likelihood of aggressive behavior. Further, their study concluded that while the component of control-override symptoms was not significantly related to an increase in the likelihood of aggressive behavior, when a subject felt threatened by their positive psychotic symptoms and was angered, the likelihood of aggression increased (Nederlof, Muris, & Hovens, 2011).

Interested in the continued study of violence and mental illness symptoms, Hodgins and Riaz (2011) examined two hundred and fifty-one adults diagnosed with schizophrenia who were part of a community sample. The authors found that among those subjects who displayed fewer positive symptoms, aggressive behavior was associated with threat/control-override symptoms. The study also found that aggressive behavior was associated with additional factors such as young age, the male sex, number of childhood conduct disorder symptoms, current illicit drug use, and prior aggressive behavior (Hodgins & Riaz, 2011).
While several studies have supported the theory that those suffering from various positive symptoms of schizophrenia, specific threat/control-override symptoms, substance abuse, or a combination of these factors have a higher likelihood of engaging in acts of general violence (Teasdale, et al., 2006; Appelbaum, et al., 2000; Beck, 2004; Nolan, Volavka, Czobor, Sheitman, Lindenmayer, Citrome, et al., 2005; Stompe, et al., 2004; Hodgins, Hiscoke, & Freese, 2003), far fewer studies have examined the relationship between these factors and targeted violence in the field of threat assessment.

Although not always directly related to severe mental illness symptomology, the study of stalking behaviors is relevant to an examination of how threat assessment can be utilized to protect identifiable victims who are the targets of continued harassing behaviors. Due to the number of victims who experience stalking at the hands of mentally ill subjects, there is a need to review literature relevant to the study of mental illness and stalking behavior (Tjaden & Thoennes, 1998).

Stalking

The act of stalking another person on its’ surface may not appear to be an act of targeted violence when compared against previously mentioned acts of targeted violence (e.g., threats/attacks against political figures). However, the act of stalking contains the elements necessary to conclude that it is targeted violence. Just as one person specifically targets a political figure for threatening or otherwise inappropriate behavior, so does the obsessed perpetrator harass, threaten, intimidate, and terrify a specific, identifiable victim. Stalking “refers to repeatedly and unwantedly communicating with, following or approaching other people” (Kropp, Hart, & Lyon, 2002). Stalking is not a new phenomenon and is commonly regarded as a complex pattern of behavior for a number of reasons. Much like those subjects that
threaten political members, the motivations of perpetrators of stalking behavior vary considerably with regard to victim relationality and mental status.

Research in the field of stalking over the past several decades has continued to substantiate that stalking exists within our country at alarming rates, and research has attempted to understand the reasons for such a high prevalence of this type of violence. In a study conducted by Tjade and Thoennes (1998), it was found that of the 8,000 women surveyed with regard to their having been subjected to stalking, over eight percent of women reported having been stalked at some point in their lives with one percent reporting an annual rate of being stalked by another person. Data from various studies have provided an overall picture of demographics specific to the stalking population, which yielded some surprising findings. Not surprisingly, the vast majority of identified stalkers are male and appear to have above-average intelligence with the vast majority of victims being female (Gill & Brockman, 1996; Harmon, Rosner, & Owens, 1995; Nicastro, Cousins, & Spitzberg, 2000). The study conducted by Harmon and colleagues (1995) further indicated that the vast majority of stalkers graduated from high school, which was comparitively the same when compared to a study conducted by Meloy and Gothard (1995) on clinical-forensic samples. Regarding psychological functioning, stalkers were found to experience relatively high rates of major mental illness, ranging from 43% up to 85% in others studies (Kropp, Hart, & Lyon, 2002; Harmon, Rosner, & Owens, 1995; Meloy & Gothard, 1995; Mullen, Pathe, Purcell, & Stuart, 1999). Concerning criminal histories of stalkers, several studies have found that most have a history of committing crimes as well as contacts with law enforcement specific to violence perpetrated against others (Gill & Brockman, 1996; Meloy & Gothard, 1995).
Noting a dearth of research in the area of stalking, Kropp and colleagues (2002) put forward four potential approaches to assessing risk in stalkers. First, the authors note the use of unstructured professional judgement, which is inherently limited in its ability to be validated empirically, which was noted by other researchers in the field (Melton, Petrila, Poythress, & Slobogin, 1997; Monahan, 1981, & Quinsey, Harris, Rice, & Cormier, 1998). Although this particular method of assessing risk for stalkers is not empirically valid, the authors note it ability to be tailored to the individual scenario. Ultimately, this approach is regarded as inadequate.

The next approach, labeled anamnestic risk assessment, is slightly more structured than the previous method and emphasises the need for evaluators to identify personal and situational factors that resulted in past violence perpetrated by the stalker in question. Essentially, this approach examines the incremental steps taken by the offender that ultimately led up to the stalking behavior. As such, it is posited that by understanding each of those steps specific to the offender will assist investigators in predicting behavior and intervening when necessary to prevent further acts of violence (Kropp, Hart, & Lyon, 2002). Similar to the unstructured professional judgement approach, there is little, if any, empirical support for this methodology and therefore this particular type of assessment exists practically in theory.

Unlike the previous two types of approaches, the third type of assessment depends on actuarial decision-making (Kropp et al., 2002; Grove & Meehl, 1996; Hart, 1998). Much like the actuarial measures utilized in the prediction of violence risk assessment, such as the Psychopathy Checklist-Revised, this approach emphasises the predictive utility of estimating the probability that the offender in question will again commit stalking or violent behavior. These probability estimates often exist on a temporal continuum with intervals. While actuarial measures are the preferred method for other forms of violence predcition, Kropp and colleagues (2002), noting
research by Hart (1998), posited that due to the variability of stalkers, the construction of valid actuarial measures that adequately fit each offender type would be too time-consuming and lack generalizability. The authors go on to address the issue of how law enforcement would be required to tailor their intervention methods based upon the construction of varying actuarial measures to adequately address the needs of each subtype of offender.

The fourth method for assessing risk with regard to stalkers is structured professional judgment, which is a technique that incorporates empirical findings and clinical judgement (Borum, 1996; Kropp, Hart, & Lyon, 2002; Hart, 1998). Kropp and colleagues outlined a number of objectives this method of risk assessment strives to achieve (p. 606):

1) Attempt to define the risk being considered
2) Discuss necessary qualifications for conducting an assessment
3) Recommend what information should be considered as part of the evaluation and how it should be gathered
4) Identify a set of core risk factors that according to the scientific and professional literature should be considered as part of any reasonably comprehensive assessment

The authors note that by achieving the above objectives, this type of assessment improves not only the transparency of decision-making, but also the usefulness and consistency of decisions (Kropp et al., 2002).

Many of the assessment techniques inherent to examining the behavior of someone engaging in stalking and harassing behavior against an identifiable individual share similarities to that of evaluating the activities of terrorists particularly related to some of the content of
problematic communications. As such, it is crucial to understand the factors leading up to one’s decision to engage a specific person in harassing, dangerous or otherwise inappropriate behavior.

*Terrorism*

Terrorism is another form of targeted violence. A number of U.S. interests domestically have been the targets of violence by extremist groups and those who may conform, either strictly or loosely, to the belief systems and values of a particular group. Given the shift of how law enforcement and related professions now conceptualize threat assessment from a rather static perspective to a more malleable and dynamic perspective, it is no surprise that such an approach would also be utilized in the assessment of targeted violence within the realm of terrorism. Due to this transition, Borum and colleagues (1996) emphasized the need for investigators to understand the interactions between person and situation and how behavior is dynamic over the course of one’s life. Moreover, it cannot be understated to what degree the group beliefs may influence the belief system of the individual. Pynchon and Borum (1999) identified a number of principles they saw as key to group behavior: 1) group attitudes and opinions, 2) group decision-making, 3) motivations to group action, and 4) diffusion of individual responsibility in a group context (p. 343).

Social psychology has informed the research about how membership in a group can alter one’s opinions or at least one’s intensity of opinions. Specifically, research regarding group polarization, which refers to one’s shift in his or her opinions about an issue within a given group, contends that groups often contain opinions and attitudes more extreme than those of the group itself (Moscovici, 1985; Myers & Lamm, 1975; Pynchon & Borum, 1999). Pynchon and Borum posited that group polarization happens as a result of two mechanisms (1999, p. 344):
1) Individuals in a group are exposed to previously unheard arguments in favor of a more extreme position and may alter their opinions in response to such newly examined arguments

2) competition – or social comparison – between group members leads individual members to adopt opinions that are consistent with, yet more extreme than, those held by fellow members

Group decision-making can vary when contrasting its’ outcome to that of the individual, which inherently has its’ negative outcomes. Specifically, Janis (1982) noted that the manner in which groups consider problems fails to identify all necessary aspects, which inevitably leads to a flawed outcome and ultimately can to decisions made by the group that are incorrect. Citing Janis (1982), Pynchon and Borum (1999) went on to identify the conditions that are likely to lead to groupthink (p. 344, 345):

1) high group cohesiveness (where the group may reject a member whose opinion deviates)

2) similarity in background and opinions of group members (decreasing the likelihood that alternative view points are represented)

3) Directive leadership (where members may feel pressure to agree with the leader rather than voice a dissenting opinion)

4) stress (where thorough consideration of available options may give way to urgency)

Group motivation is related to how members of that group perceive not only their membership within the group, but how they view each other within the group and particularly
those outside of the group (Pyncon & Borum, 1999). The authors went on to state that members of the group will often see their behaviors and actions in a positive light whereas they will perceive the actions and behaviors of others outside of the group in a negative light when they contrast themselves to the out of group members. Stephan (1985) investigated this phenomenon known as the “in-group/out-group bias” and ultimately form the basis for negative evaluations of the members of other groups thereby developing negative perceptions of out-group members (Pyncon & Borum, 1999).

Pynchon and Borum (1999) discussed the reduce accountability for violence that individual group members appear to have. Citing work by McCauley and Segal (1987), the authors noted that the individuals of a collective group may feel that responsibility and accountability for actions, even if violent and performed as a group, are diffuse and spread across the group as a whole as opposed to personal accountability. As a result, McCauley and Segal indicated that those individuals within the group, feeling a lessened sense of personal accountability for violent behaviors, may experience a lowered threshold with regard to the acceptability of perpetrating violence against others. Ultimately, the sense of diffuse responsibility allows the individual to pay less attention to personal accountability so that more extreme acts can be perpetrate under the auspices of group accountability.

A number of other factors are highly relevant when assessing the degree to which a group influences the individual’s behavior, which are specifically addressed by Pynchon and Borum (1999). While an in-depth review of these elements is beyond the scope of this paper, they are worth identifying: 1) Rewards and costs of membership, 2) conformity to group norms, and 3) compliance and obedience (Pynchon & Borum, 1999, p. 349). Closely related to the assessment of the degree to which the group has influenced the behavior of the individual are the questions
for specifically assessing the individuals influence by groups (Pynchon & Borum, 1999): 1) How important is the group to the individual, 2) How likely is the individual to deviate from the group, and 3) How likely is the individual to move toward a violent or extreme solution (p. 351). The goal of assessing the degree to which the group has influenced the individual and vice versa will assist investigators in determining trajectory of the individual in question as related to continued group membership and involvement in extreme violence either independently or under the auspices of a group. The degree to which an individual aligns his or her beliefs with a particular group or ideology can be examined through the analysis of language contained within the threatening communication issued by subjects. The analysis of language contained in a subject’s correspondence is underscored by the importance of understanding the driving motivations for engaging a target in threatening or harassing behavior (Pynchon & Borum, 1999; Meloy, 2001; Meloy, 2003).

Thematic Content Analysis

The analysis of language, specifically the language of threats authored by subjects who intend to intimidate, harass, or harm an identifiable individual, is another element of the dynamic threat assessment process. Meloy (2003) coined the phrase “predatory violence”, in which he characterized as “minimal autonomic arousal, no emotion, the absence of an imminent threat, planning and preparation, and a variety of goals, such as money, power, territory, dominance, sexual gratification, or revenge” (p.660). In the author’s definition of predatory violence, he established the importance of identifying the motivating factors related to the subject’s desire to engage a specific target in harassing or threatening behavior. Various researchers in the field of threat assessment have highlighted characteristics inherent to stalking situations where the victim is a public figure and not personally associated with the subject. Although the incidence rate of
violence perpetrated against these figures (e.g., celebrities, politicians, etc.), it is less common than intimate partner violence; however, direct threats are less common, diagnoses of psychoticism are more probable, and although variable, the motivations are more likely to be delusionally based (Calhoun, 1998; Fein & Vossekuil, 1999; Meloy, 2001; Meloy, 2003). Investigation into the motives of targeted violence appear relatively straight forward; the greater understanding an investigator has of the motives to carryout threats and acts of violence, the more appropriate interventions that can be devised to prevent the specific act.

In a comprehensive review of threat assessment literature to date, Meloy and colleagues (2004) noted the work of Scalora et al. (2002a, 2002b, 2003) in a series of studies that examined the communication from mentally ill subjects who engaged in inappropriate or threatening behavior against political members. In his seminal work, Scalora et al. highlighted the importance of a number of factors when conducting an analysis of a subject’s threatening correspondence: (a) intensity of interest, (b) extent of contact activity with the target, (c) interest in other targets, (d) personal help seeking, (e) the presence of mental illness, (f) history of criminal behavior in predicting approach behavior to federal legislators (Meloy et al., 2004).

In an effort to expand the field of literature regarding mentally ill subjects who targeted political figures, Scalora and colleagues (2003) analyzed one hundred and twenty-seven cases that resulted in law enforcement intervention. The subjects of this study had engaged in threatening or otherwise inappropriate communication with state officials. Of particular interest in their study was the thematic content communicated by subjects to state officials they had targeted. Previous studies have examined the relationship between delusional belief systems of subjects and how those distorted belief systems relate to their motivations to carry out threatening or otherwise inapproproate actions (Dietz, Matthews, Martell, Stewart, Hrouda, &
Scalora and colleagues (2003) examined thematic content of the communications received by subjects in their study to examine the prevalence of themes across subjects to determine what, if any, degree of association existed between the subjects distorted beliefs systems and their threatening communication. As such, Scalora and colleagues examined nine non-exclusive categories of content and themes coded from the threatening or otherwise inappropriate communication received by subjects. Policy-related content was coded if the individual made statements concerning issues related to governmental operations, or other topics related to policies or legal issues. Next, help seeking theme was coded if the threatener indicated a need for assistance from the target regarding any real or perceived problem s/he was dealing with. Insulting/degrading content was coded when the threatener made overt negative remarks that served to insult or personally attack the target. Investigators coded threat dominant if the prevailing theme of the threatening communication centered on direct threats of harm focused primarily on the target. Anti-government theme was coded if the communication indicated thoughts or beliefs representative of separatist movements or overall dislike and distrust of organized government. Racial themes were coded if content was present in the communication that indicated beliefs of degradation based on racial profiling or stereotyping. Related, thematic content surrounding beliefs regarding stereotyped beliefs based upon membership to a gender was coded. Any mention of content related to religious figures, organizations, or deity were coded as religious content. Finally, if the threatener utilized profane language in the communication, obscenities were coded. Results from Scalora and colleagues (2003) study
indicated a number of patterns when mentally ill subjects were compared to non-mentally ill subjects, including that mentally ill subjects focused the content of their communication on personally relevant themes and were less likely to insult.

In a more recent endeavor to analyze the thematic content of threatening and otherwise inappropriate contacts to political members, which subsequently resulted in problematic approach behavior, Schoeneman-Morris, Scalora, Chang, Zimmerman, and Garner (2007) examined data from the United States Capitol Police. The authors examined the differences between contact and approach characteristics of subjects who engaged in harassing or otherwise inappropriate communication via letter against those harassing and inappropriate subjects who utilized e-mail. Their findings spotlighted significant differences amongst the two groups of subjects. First, those subjects who engaged in contact through written letter were more likely to display symptoms consistent with serious mental illness, have a criminal history, write more information, use multiple methods of contact, and mention multiple targets. In contrast, those subjects to communicated threats via e-mail were more likely to focus on government-related issues and utilize obscene or profane language in their communications. Finally, subjects who sent written letters that contained harassing, threatening, or otherwise inappropriate content to Members of Congress were more likely to engage in problematic approach toward their specified targets.

In an examination of forms of pathological fixations and forms of loyalty and admiration, Mullen and colleagues (2009) addressed issues related to the pursuit of and fixation upon public figures. In the author’s research, it was posited that subjects who demonstrate pathological fixation may belong to one of five categories: (a) relationship seekers – who believe they have or are destined to enter into a special relationship with the targeted individual; (b) petitioners – who
request or demand assistance for some cause or personal issues; (c) pretenders – who assert a 
false claim to royalty or some elevated positions; (d) persecuted – who believe they are being 
persecuted against by either the targeted individual or a third-party; (e) chaotic – who 
demonstrate incoherent or disorganized behavior. It should be noted that many of the specific 
typologies suggested by the authors loosely fit several of the thematic content characteristics 
inherent to mentally ill subjects identified in previous empirical research, specifically, by that of 
Scalora and colleagues (2002a; 2002b). Mullen and colleagues (2009) further illustrated the 
degree of difficulty with accurately predicting the commission of problematic approach behavior 
by those subjects displaying severe mental illness due to the often times chaotic and disorganized 
nature of their mental illnesses.

The importance of examining the thematic content of communication received by 
subjects was underscored by previous researchers in the field of threat assessment. In an effort 
to formulate a comprehensive and operationally sound risk assessment, one must ascertain the 
motivational factors inherent to the threatener and accurately determine the influence those 
motives have on the commission of threatening and otherwise problematic behaviors (Borum, 
Fein, Vossekul, & Berglund, 1999; Dietz, Matthews, Martell, Stewart, Hrouda, & Warrant, 
1991a; Scalora, Baumgartner, & Plank, 2003).

Purpose and Specific Hypotheses

The research base that has contributed to the growth of threat assessment literature has 
steadily increased over the past decade due to the implementation of empirically sound research 
examining this phenomenon across a range of contexts. As a result, the techniques used by 
threat assessment professionals have been significantly refined over time. The purpose of the 
present research is examine the predictive utility of studying a subject’s threatening
communication directed toward a specific target and how the thematic content of that communication is related to approach behavior. Related, the differences between subjects classified as mentally ill, mentally ill and displaying TCO symptoms, and non-mentally ill will be explored. With this purpose in mind, the present research is designed to examine the following hypotheses with accompanying proposed analyses:

1. Non-mentally ill subjects are more likely to engage in direct or conditional threats toward political members. This means that subjects communicate threats toward their specific targets in a direct manner, where overt statements of harm are communicated.

2. When mentally ill subjects contact politicians, their manner of contact will more likely contain emotional language (i.e., language that conveys intense feelings regarding beliefs) when compared against that of non-mentally ill subjects. The presence of emotional language inherent to mentally ill subject’s communication will be related to personal thematic content.

3. Consistent with prior research, mentally ill subjects will be more likely to engage in problematic approach behavior against political members than non-mentally ill subjects.

4. Subjects displaying threat/control override symptoms will be more likely to engage in problematic approach than non-mentally ill subjects.

5. Subjects displaying threat/control override symptoms will display more language that has a higher degree of religious content and less degrading language focused on the target compared to non mentally ill subjects.

6. Mentally ill subjects will display more language focused upon their grievances on personal issues as opposed to more policy driven issues for non-mentally ill subjects.

7. Multivariate analyses will find that the contact factors of target dispersion, help-seeking
themes, personal themes, religious themes, threatening language, and major life stressors will differentiate across the three groups.
Chapter 2 – Methods

Consistent with research in the area of threat assessment, the following definitions were utilized in the following analyses: Threat/control-override or “TCO” will refer to subjects who display mental illness symptoms reflecting a belief that they are being threatened by a force outside of themselves. Subjects displaying TCO symptoms also believe their actions are being controlled by forces outside of themselves. Specific symptoms include thought insertion or withdrawal delusions, delusions of being controlled, thought broadcasting delusions as well as delusions indicating specific bodily harm. Problematic approach will refer to an attempted or actual appearance at the grounds of the United States Capitol, at a Congressional office, or at another location under the protection of Capitol security personnel where members were present, during which the subject engages in threatening or harassing behaviors. Target will refer to the person or persons toward whom the subject's threatening or harassing behavior are directed, or to the person or persons who incidentally become involved in the subject's actions (e.g., congressional staff, USCP officers). Case will refer to the entirety of documented contact and approach behaviors enacted by an individual subject toward any USCP protectees. Direct or Conditional threats will refer to correspondence authored by the contactor that contains language specific to how the contactor intends to harm (i.e., either murder, physically harm, harm politically, embarrass publically, etc.) the target, if the target does not comply with stated requests. Emotional language will refer to an intensified level of language utilized by the contactor that could include the use of obscene language, the use of all capital letters, or the use of punctuation that signifies increased attention to what is being communicated. Degrading language refers to the contactor’s use of insulting words or phrases to humiliate or otherwise debase the target. Religious content refers to the use of words commonly associated with
established religious organizations, beliefs echoed by particular faiths, or reference to religiously held deities. *Personal issues* refers to highly individualized ideation communicated by the contactor to the target. Often, personal issues referenced by the contactor include content that may be known or understood only by the contactor or surrounds topics held in high importance to the contactor. *Policy driven issues* refers to the contactor’s use of governmental policy, practice, or legislation that reflect either domestic or foreign issues.

**Sample**

The sample for the present study was randomly selected from the population of subjects who have engaged in threatening or otherwise inappropriate contact toward members of the United States Congress and have subsequently been investigated by the Threat Assessment Section (TAS) of the USCP. As noted by Scalora and colleagues (2002), the USCP is responsible for the safety and security of members of both the United States House of Representatives and the United States Senate, congressional staff, visitors to the Capitol grounds and congressional offices throughout the nation. Established in 1828, the USCP is one of the oldest law enforcement agencies with significant protective responsibilities. The TAS is specifically responsible for performing investigative and risk assessment activities in response to threatening or suspicious activity involving Congressional members, or which occur on Capitol grounds, Congressional district offices, the residences of Congressional members, or at public events where a Congressional member is present. For the present study, cases involving subjects who engaged in threatening, harassing, or otherwise problematic behaviors were randomly selected from the TAS investigative case files for correspondence received from 2002 through 2012.
In the absence of any prior literature suggesting an effect size for the variables of greatest interest, and assuming an effect size and a statistical significance level of .05, a sample size of 419 cases (219 subjects who did not exhibit symptoms consistent with a major mental illness, 200 subjects who did evidence symptoms consistent with a major mental illness; 48 of which also exhibited behaviors consistent with threat/control-override symptoms) were targeted in order to ensure that the sample is large enough to correctly reject the null hypotheses.

Problematic approach behavior was also an interest of the present study. Based upon prior research suggesting that subjects who engage in problematic approach behavior typically do so within a year of their first documented threat or otherwise inappropriate contact toward their target (Baumgartner, Scalora, & Plank, 2001), non-approach cases with less than one year of available follow-up or in which the subject is known to have died were excluded from inclusion in the proposed study.

**Procedure**

Subject characteristics, characteristics of problematic approach behavior, and characteristics of threatening and inappropriate contact toward Congressional members were extrapolated from investigative records maintained by the USCP TAS. These records consist of information from a variety of sources, including interviews with the subject, interviews with third parties (e.g., subject acquaintances and family members, witnesses), a review of National Crime Information Center (NCIC) when available, and any written correspondence from the subject. Investigators of the TAS received specialized training in evaluative techniques to determine the presence of symptoms consistent with a major mental illness and those symptoms that have previously been shown to be predictive of violent behavior, threat/control-override symptoms.
A number of variables were examined during the present study in an effort to differentiate between the three identified groups (non-mentally ill, mentally ill without TCO symptoms, and mentally ill with TCO symptoms). Examination of these variables served to replicate prior findings of research examining problematic approach behavior and threatening or inappropriate contacts toward members of Congress. This particular research study examined the behavior of contactors identified as displaying threat/control-override symptoms, as well as the two previously mentioned groups, which have been studied relatively little in the context of engaging problematic behavior toward members of Congress. These variables, their definitions, and coding criteria were adopted from Baumgartner (2004) and include the following:

- **Subject behavior expressing any psychotic / delusional symptomology**
  - Derived from examination of behaviors noted in the case documentation and drawn from detailed incident information, witness statements, investigator observations, and collateral and corroborating information from family, acquaintances, and mental health records. Symptoms included hallucination, behavioral agitation, and a variety of delusions including: persecutory delusions, delusions of being controlled, delusions of thought insertion or withdrawal, delusions of grandiosity, delusions of thought broadcasting, religious delusions, ideas of reference (delusional belief that unrelated events relate to one's self), other delusions of identity, and erotmanic delusions (delusions of a romantic relationship with someone whom the subject has never met).

- **Subject offense history**
  - Derived from official documentation, including federal National Crime Information Center (NCIC), state, and local records.
    - Violent offenses (e.g., murder, assault, robbery, sexual offenses).
- Property offenses (e.g., burglary, trespassing, theft).
- Alcohol / drug offenses (e.g., DWI, possession, manufacture, distribution).
- Threat / harassment offenses (e.g., terroristic threats, obscene phone calling, violation of protection order).
- Other offenses (e.g., disturbing the peace, mischief, failure to appear, disorderly conduct, etc.)

- Subject history of contact with federal agencies for harassment behavior
  - Derived from official documentation from federal law enforcement records.

- Target dispersion
  - Multiple USCP protectees targeted (including the selection of entire offices / bodies).

- Non-exclusive contact themes
  - Derived from examination of incident reports, subject and witness statements, and any other supporting documentation related to the themes / motives driving the subject's contact behavior.
  - Personal themes (related to perceived personal issues or problems).
  - Policy / government themes (related to actual governmental function or policy).
  - Help-seeking themes (related to requests for assistance).
  - Threat / harassment themes (related to contact intended to threaten, harass, or frighten the target).

- Subject use of any threat language (direct, indirect, or veiled) in the contact behavior

- Elevated physically threatening and aggressive contact behavior
  - A binary variable was extrapolated based upon engagement in any elevated physically threatening and aggressive contact behavior, including carrying weapon / no physical
aggression, property aggression, property damage, physical restraint of subject / no physical injuries, or physical injuries.

- A scaled variable was extrapolated based upon a range of elevated physically threatening and aggressive contact behavior. This scale ranged from one to six, with the following values:
  - 1 - No threat language / No physical aggression
  - 2 – Threat language / No physical aggression
  - 3 – Carry weapon / No physical aggression
  - 4 – Property damage
  - 5 – Physical restraint of subject / No physical injuries
  - 6 – Physical injuries

The reliability of item ratings made by research personnel from TAS records was ensured through the concurrent coding of a random sample of cases by two raters. Research personnel comprised of two graduate students of the University of Nebraska-Lincoln Department of Psychology Clinical Psychology Training Program. They received specific guidelines and training on the coding of the variables pertinent to the present study. Any discrepancies, disagreements, or uncertainties with regard to proper coding were discussed at length between the two coders, and final determinations on those issues were reviewed for accuracy by the primary investigator’s supervisor. Independent coding did not take place unless kappa coefficients or pearson correlations indicated inter-rater reliability above the .85 level.
Chapter 3 – Results

A total of 419 subjects were included in the present analyses. Univariate analyses were completed to examine each of the three groups as related to their demographic statistics and whether they engaged in approach behavior (refer to Table 1). The results indicated that far fewer women (n = 9) engaged in problematic approach behavior when compared to men (n = 60) in the present study. Interestingly, of the nine women who engaged in problematic approach, eight of them were mentally ill while one of those eight also displayed threat/control-override symptoms. Regarding men and problematic approach, of the sixty that engaged in problematic approach, forty-five were mentally ill with six of those displaying threat/control-override symptoms.

Regarding problematic approach as it related to ethnicity, the majority of subjects who approached targets were Caucasian (n = 51), followed by African-American subjects (n = 14), and finally Hispanic subjects (n = 2). The ethnicity of the remaining eight subjects was not known by investigators. Regarding the presence of mental illness within the ethnic groups studied, a total of thirty-eight subjects identified as Caucasian engaged in problematic approach behavior, with six of them displaying threat/control-override symptoms. Regarding the other ethnic groups studied, twelve African-American subjects engaged in problematic physical approach, one of which displayed threat/control-override symptoms. Regarding Hispanics, one of the two subjects who engaged in problematic approach was mentally ill, but did not display threat/control-override symptoms.
Table 1

Univariate analyses of approach and non-approach samples across the studied groups

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Non- Mentally Ill</th>
<th>Mentally Ill Non-TCO</th>
<th>Mentally Ill with TCO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Approach</td>
<td>Non-Approach</td>
<td>Approach</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>15 (3.5%)</td>
<td>128 (30.5%)</td>
<td>39 (9.3%)</td>
</tr>
<tr>
<td>Female</td>
<td>1 (0.2%)</td>
<td>14 (3.3%)</td>
<td>7 (1.6%)</td>
</tr>
<tr>
<td>Race / Ethnicity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>European-decent</td>
<td>13 (3.1%)</td>
<td>94 (22.4%)</td>
<td>32 (7.6%)</td>
</tr>
<tr>
<td>African-decent</td>
<td>2 (0.4%)</td>
<td>10 (2.3%)</td>
<td>11 (2.6%)</td>
</tr>
<tr>
<td>Hispanic</td>
<td>1 (0.2%)</td>
<td>2 (0.4%)</td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Middle Eastern</td>
<td>0 (0%)</td>
<td>2 (0.4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Asian</td>
<td>0 (0%)</td>
<td>1 (0.2%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

Note: A total of 419 subjects were examined for the analyses. The percentages reflect the number of subjects compared against the overall sample population. However, demographics were not available for all 419 subjects due to inability to confirm identifying information.
Examination of the 419 subjects and available demographic information revealed an average age of approximately 48 years (SD = 16.01) at the time of their first contact with the USCP (refer to Table 2). Of the subjects whose ages could be verified, over 68% were identified as male (n = 289) with just over 13% identified as female (n = 56). 57.5% (n = 241) of the subjects for whom ethnicity was known were Caucasian and approximately 10% were African-American. Fewer than 15 total subjects were classified as Hispanic, Asian, or Middle Eastern.

Table 2
Demographic representation of sample population

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>N</th>
<th>Non-Mentally Ill</th>
<th>Mentally Ill Non-TCO</th>
<th>Mentally Ill with TCO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (SD)</td>
<td>315</td>
<td>48.17 (14.84)</td>
<td>48.20 (17.07)</td>
<td>43.68 (12.21)</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>289</td>
<td>143 (34.1%)</td>
<td>115 (27.4%)</td>
<td>31 (7.3%)</td>
</tr>
<tr>
<td>Female</td>
<td>56</td>
<td>15 (3.5%)</td>
<td>30 (7.1%)</td>
<td>11 (2.6%)</td>
</tr>
<tr>
<td>Race / Ethnicity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>European-decent</td>
<td>241</td>
<td>107 (25.5%)</td>
<td>103 (24.6%)</td>
<td>31 (7.4%)</td>
</tr>
<tr>
<td>African-decent</td>
<td>37</td>
<td>12 (2.8%)</td>
<td>21 (5.0%)</td>
<td>4 (1.0%)</td>
</tr>
<tr>
<td>Hispanic</td>
<td>7</td>
<td>3 (0.7%)</td>
<td>3 (0.7%)</td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Middle Eastern</td>
<td>3</td>
<td>2 (0.4%)</td>
<td>1 (0.2%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Asian</td>
<td>4</td>
<td>1 (0.2%)</td>
<td>2 (0.5%)</td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Cases Analyzed</td>
<td>419</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: A total of 419 subjects were examined for the analyses. The percentages reflect the number of subjects compared against the overall sample population.

For those subjects whose identities were known, 24% (n = 96) had a documented history of prior contacts with the identified target. Regarding the issuance of a direct or conditional threat made against the target, nearly 28% (n = 116) engaged in this behavior. Those subjects who engaged in physical approach of the target represented approximately 18% (n = 75) of the
sample population. In addition to the issuance of a threat made by subjects, the nature of contact utilized by subjects to engage their targets was analyzed (summarized in Table 3). Not surprisingly, the type of contact that most subjects utilized was internet based in the form of electronic mail. Collectively, the use of electronic mail accounted for greater than 37% of all forms of contact. Although not utilized as frequently as electronic mail, subjects attempted to engage their targets through the use of a telephone by contacting the target’s various offices. While attempting to contact the target by telephone, subjects tended to engage staff members verbally or would leave voicemails, some of which were during regular business hours while others were during the evening or weekends.
Table 3

Nature of contact utilized by subjects to engage targets

<table>
<thead>
<tr>
<th>Contact Behavior</th>
<th>N</th>
<th>Non-Mentally Ill</th>
<th>Mentally Ill Non-TCO</th>
<th>Mentally Ill with TCO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Approach</td>
<td>75 (17.8%)</td>
<td>21 (5.0%)</td>
<td>47 (11.2%)</td>
<td>7 (1.6%)</td>
</tr>
<tr>
<td>Comment to Third Party</td>
<td>2 (0.4%)</td>
<td>0 (0%)</td>
<td>2 (0.4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Letter</td>
<td>24 (5.7%)</td>
<td>9 (2.1%)</td>
<td>13 (3.1%)</td>
<td>2 (0.4%)</td>
</tr>
<tr>
<td>Fax</td>
<td>3 (0.7%)</td>
<td>1 (0.2%)</td>
<td>2 (0.4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Computer Contact</td>
<td>58 (13.8%)</td>
<td>28 (6.6%)</td>
<td>25 (5.9%)</td>
<td>5 (1.1%)</td>
</tr>
<tr>
<td>Telephone Voice Mail</td>
<td>13 (3.1%)</td>
<td>6 (1.4%)</td>
<td>6 (1.4%)</td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Telephone Conversation</td>
<td>23 (5.4%)</td>
<td>7 (1.6%)</td>
<td>12 (2.8%)</td>
<td>4 (0.9%)</td>
</tr>
<tr>
<td>Public Statement</td>
<td>6 (1.4%)</td>
<td>3 (0.7%)</td>
<td>2 (0.4%)</td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Face-to-Face w/ Law Enforcement</td>
<td>5 (1.1%)</td>
<td>0 (0%)</td>
<td>5 (1.1%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Face-to-Face w/ Staff Member</td>
<td>14 (3.3%)</td>
<td>4 (0.9%)</td>
<td>8 (1.9%)</td>
<td>2 (0.4%)</td>
</tr>
<tr>
<td>Face-to-Face with Target</td>
<td>4 (0.9%)</td>
<td>1 (0.2%)</td>
<td>2 (0.4%)</td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Object Left / Delivered</td>
<td>4 (0.9%)</td>
<td>2 (0.4%)</td>
<td>2 (0.4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Number of Cases Analyzed</td>
<td>419</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: A total of 419 subjects were examined for the analyses. The percentages reflect the number of subjects compared against the overall sample population.
Regarding the presence of a mental illness that was readily identifiable by law enforcement (i.e., overt symptoms of severe mental illness were present at the time of contact), 47.7% (n = 200) of the subjects met this criteria in the present research study, whereas approximately 10% (n = 43) were identified as displaying mental illness symptoms consistent with that of threat/control-override. An analysis of the symptoms displayed by both mentally ill subjects without threat/control-override symptoms and mentally ill subjects with threat/control-override symptoms revealed a number of interesting results (refer to Tables 4 & 5). Specifically, the most prominent symptomatology displayed by both groups of mentally ill subjects was that of persecutory/paranoid delusions (66.5% of mentally ill non-TCO and 81.4% of mentally ill with TCO symptoms). These beliefs included a set of fixed false beliefs that one is being plotted against or being persecuted wronged by another. Delusions of grandiosity were also a prominent symptom found in the sampled mentally ill subjects (38.5% of mentally ill non-TCO and 41.9% of mentally ill with TCO symptoms). These belief systems included fixed false beliefs where the subject genuinely believed he had great powers or occupied a powerful and influential position. Also prominent amongst the sampled groups was symptoms related to loose associations. Loose associations, within the context of the sample population, had to do with the organization of information provided by the subjects. In the present study, 34% (n = 68) of mentally ill subjects without threat/control-override symptoms were observed to have loose associations, whereas 44.2% (n = 19) of mentally ill subjects with threat/control-override symptoms displayed loose associations.
Table 4
Symptoms displayed by mentally ill subjects

<table>
<thead>
<tr>
<th>Mental Illness Symptomatology</th>
<th>N</th>
<th>Mentally Ill-Non TCO</th>
<th>df</th>
<th>$\chi^2$</th>
<th>p Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agitation</td>
<td>42</td>
<td>36 (18%)</td>
<td>1</td>
<td>0.883</td>
<td>.347</td>
</tr>
<tr>
<td>Auditory Hallucinations</td>
<td>30</td>
<td>20 (10%)</td>
<td>1</td>
<td>22.998</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Visual Hallucinations</td>
<td>6</td>
<td>5 (2.5%)</td>
<td>1</td>
<td>5.541</td>
<td>.019</td>
</tr>
<tr>
<td>Persecutory/Paranoid Delusions</td>
<td>158</td>
<td>133 (66.5%)</td>
<td>1</td>
<td>213.360</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Delusions of Jealousy/Erotomania</td>
<td>9</td>
<td>8 (4%)</td>
<td>2</td>
<td>10.071</td>
<td>.007</td>
</tr>
<tr>
<td>Grandiose Delusions</td>
<td>95</td>
<td>77 (38.5%)</td>
<td>2</td>
<td>104.947</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Religious Delusions</td>
<td>24</td>
<td>20 (10%)</td>
<td>2</td>
<td>24.208</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Delusions of Reference</td>
<td>18</td>
<td>12 (6%)</td>
<td>2</td>
<td>14.691</td>
<td>.001</td>
</tr>
<tr>
<td>Loose Associations</td>
<td>87</td>
<td>68 (34%)</td>
<td>2</td>
<td>83.792</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Tangential Thoughts</td>
<td>67</td>
<td>54 (27%)</td>
<td>2</td>
<td>69.325</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Number of Cases Analyzed</td>
<td>419</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note: Percentages represent the proportion of subjects within the respective threat group.*

Table 5
Symptoms displayed by mentally ill subjects with TCO symptoms

<table>
<thead>
<tr>
<th>Mental Illness Symptomatology</th>
<th>N</th>
<th>Mentally Ill-TCO</th>
<th>df</th>
<th>$\chi^2$</th>
<th>p Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delusions of Being Controlled</td>
<td>12</td>
<td>12 (27.9%)</td>
<td>2</td>
<td>108.087</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Delusions of Mind Reading</td>
<td>4</td>
<td>4 (9.3%)</td>
<td>2</td>
<td>35.317</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Thought Broadcasting</td>
<td>0</td>
<td>0 (0.0%)</td>
<td>1</td>
<td>0.115</td>
<td>0.735</td>
</tr>
<tr>
<td>Thought Insertion</td>
<td>1</td>
<td>1 (2.3%)</td>
<td>2</td>
<td>8.875</td>
<td>0.012</td>
</tr>
<tr>
<td>Thought Withdrawal</td>
<td>0</td>
<td>0 (0.0%)</td>
<td>1</td>
<td>0.115</td>
<td>0.735</td>
</tr>
<tr>
<td>Number of Cases Analyzed</td>
<td>419</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note: Percentages represent the proportion of subjects within the respective threat group.*
Through a series of Pearson’s Chi Square analyses, the relationship between a number of thematic content variables (i.e., help-seeking behavior, political content, threatening language, etc.) was examined against each of the three studied groups (non-mentally ill, mentally ill non-TCO, and mentally ill with TCO symptoms). The first hypothesis of the study examined the relationship between the issuance of direct threats made by each of the three groups of subjects. Specifically, the first hypothesis posited that non-mentally ill subjects were more likely to engage in threats toward political members in a direct manner. For instance, subjects would be more likely to communicate threats toward their specific targets using overt statements of harm. Results indicated that mentally ill subjects (TCO or Non-TCO) were far less likely to issue direct or conditional threats than their non-mentally ill counterparts. Regarding the relationship between direct threats issued by both mentally ill and non-mentally ill subjects, results indicated there was a statistically significant relationship between non-mentally subjects and the engagement of direct or conditional threats $\chi^2(1) = 8.541, p = .003$. This result meant that subjects identified as non-mentally ill were significantly more likely to engage in direct or conditional threats against their targets, which was consistent with the proposed hypothesis. Even though non-mentally ill subjects were more likely to engage in direct or conditional threats than mentally ill subjects, it was less likely for either of the three groups to issue a direct or conditional threat than not. Results summarizing the number of subjects who engaged in direct or conditional threats, as well various other forms of threatening behavior, is summarized in Table 6.
Table 6
Type of threat issued by subjects

<table>
<thead>
<tr>
<th>Threatening Content</th>
<th>N</th>
<th>Non-Mentally Ill</th>
<th>Mentally Ill Non-TCO</th>
<th>Mentally Ill with TCO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct/Conditional Threat</td>
<td>124</td>
<td>74(33.8%)</td>
<td>42(21%)</td>
<td>8(18.6%)</td>
</tr>
<tr>
<td>Veiled/Vague Threat</td>
<td>149</td>
<td>91(41.6%)</td>
<td>50(25%)</td>
<td>8(18.6%)</td>
</tr>
<tr>
<td>Inappropriate Statements</td>
<td>326</td>
<td>128(58.4%)</td>
<td>162(81%)</td>
<td>36(83.7%)</td>
</tr>
<tr>
<td>No Threatening Behavior</td>
<td>40</td>
<td>19(8.7%)</td>
<td>16(8%)</td>
<td>5(11.6%)</td>
</tr>
<tr>
<td>Number of Cases Analyzed</td>
<td>419</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Percentages represent the proportion of subjects within the respective group.

Pearson’s Chi Square analyses were conducted in an effort to examine the relationship between the use of emotionally laden language while engaging in contact with the target. The second hypothesis of the study proposed that when mentally ill subjects contacted politicians, the language contained in their correspondence were such that it conveyed intense feelings regarding their beliefs. Contrary, in part, to the hypothesis, subjects who displayed threat/control-override symptoms were less likely than mentally ill non-TCO and non-mentally ill subjects to utilize emotionally laden language during the issuance of threats, $\chi^2(1) = 3.52, p = .060$, indicating there as not a statistically significant relationship between the variables. However, results indicated there was a statistically significant relationship between the issuance of emotionally laden language amongst subjects who were identified as mentally ill without TCO symptoms, $\chi^2 = 5.29, p = .021$.

Further analyses were completed to examine the relationship between each of the three groups and the likelihood to engage in problematic physical approach behavior against the identified target. The third hypothesis of the present study posited that mentally ill subjects
would be more likely to engage in problematic physical approach against specified targets than their non-mentally ill counterparts. Consistent with prior literature in the area, as well as being consistent with the proposed hypothesis of the present study, mentally ill non-TCO subjects were more likely than non-mentally ill subjects to engage in problematic approach of targeted political figures, \( \chi^2(1) = 21.56, p = .001 \), thereby indicating a statistically significant relationship between the variables. There was not, however, a statistically significant relationship between problematic approach behavior and subjects who were identified as displaying threat/control-override symptoms, \( \chi^2(1) = .086, p = .770 \). Results indicated that very few subjects identified as displaying TCO symptoms went on to engage in problematic physical approach of their targets.

The fourth hypothesis of this study posited that threat/control-override subjects would be more likely to engage in problematic approach than their non-mentally ill counterparts. Contrary to the hypothesis, subjects who displayed evidence of threat/control-override symptomatology were less likely to engage in problematic approach of a target when compared against non-mentally ill subjects. In fact, the analysis examining the relationship between mentally ill subjects with threat/control-override symptoms and problematic physical approach was not statistically significant, \( \chi^2(2) = .520, p = .771 \).

The present study was interested in the prevailing themes of the content issued at specified targets. Related to this endeavor, the presence of religious content within the communication from subjects identified as mentally ill and displaying threat/control-override symptoms was analyzed. The fifth hypothesis of the present study posited that subjects who displayed threat/control-override symptoms would display language with a higher degree of religious content than non-mentally ill subjects. Related, it was also hypothesized that subjects displaying threat/control-override symptoms would include in their communications less
degrading language focused on the target. Contrary to the proposed hypothesis, the communication sent by mentally ill subjects with threat/control-override symptoms was not more likely to contain religious content when compared to the communication of non-mentally ill subjects, $\chi^2(1) = .116, p = .733$, indicating there was not a statistically significant relationship between the issuance of religiously laden communication and mentally ill subjects displaying threat/control-override symptoms. Also contrary to the proposed hypothesis, there also was a statistically significant relationship between mentally ill subjects displaying threat/control-override symptoms and the presence of degrading or insulting language, $\chi^2(1) = 4.166, p = .041$. Taken together, the results indicated that subjects who were mentally ill and displayed threat/control-override symptoms did not appear to issue problematic communications to their targets that tended to include religious ideation, but was more likely to include insulting or degrading language.

The present study was also interested in examining the relationship between personal versus politically themed content in communication sent by both mentally ill and non-mentally ill subjects. The sixth hypothesis of this study posited that mentally ill subjects would focus the content of their communications on personal grievances. Related, it was hypothesized that non-mentally ill subjects would focus the content of their communication on topics related to policy-driven grievances. As was hypothesized, mentally ill subjects did not tend to base the content of their communications on policy driven issues, $\chi^2(1) = 1.212, p = .271$, which indicated the absence of a statistically significant relationship between the variables. Also consistent with the proposed hypothesis, mentally ill subjects who did not display threat/control-override symptoms tended to focus the content of their communications on personally relevant themes, $\chi^2(1) = 94.882, p = <.001$, which indicated a statistically significant relationship between personal
thematically content and subjects who were identified as mentally ill without threat/control-override symptoms. Regarding the group of mentally ill subjects who displayed threat/control-override symptoms, there was not a statistically significant relationship between them and communication containing policy driven language, \( \chi^2(1) = .000, p = .983 \). However, there was a strong and statistically significant relationship between personally themed communication and mentally ill subjects who displayed threat/control-override symptoms, \( \chi^2(1) = 66.14, p < .001 \), thereby indicating that mentally ill contactors with threat/control-override symptoms tended to write about personally relevant information when engaging in problematic contact with their specified targets.

The seventh hypothesis of the present study was interested in the examination of identified contact factors that would differentiate across the three groups (non-mentally ill, mentally ill non-TCO, and mentally ill with TCO). To test the hypothesis that examined which contact factors were associated with each group, a direct discriminant function analysis was performed examining the six contact factors. Contact factors examined in the analysis were: 1) target dispersion, 2) help-seeking themes, 3) personal themes, 4) religious themes, 5) threatening language, and 6) major life stressors. The six contact factors were examined across the following groups of the present study: 1) non-mentally ill, 2) mentally ill without threat/control-override symptoms, and 3) mentally ill with threat/control-override symptoms. Using an alpha level of .001 to evaluate the homogeneity of covariance assumption, Box’s M test was significant (\( p = <.001 \)).

A linear discriminant function analysis was performed, with a combined \( \chi^2(12) = 175.64, p < .001 \). After removal of the first function, there was still a strong association between the groups and contact factors, \( \chi^2(5) = 11.06, p = .05 \). When comparing across the threat groups with
the discriminant function analysis, two discriminant functions were rendered. The first function accounted for 57% of the variance, while the second function accounted for 16% of the variance. Based on both statistical and practical significance, each of the discriminant functions were considered noteworthy.

The first discriminant function maximally classified subjects who were non-mentally ill (M = -.619) from those subjects who were mentally ill without threat/control-override symptoms (M = .497). An analysis of the standardized discriminant function coefficients and accompanying structure weights indicated that the contact factors of personal themes and threatening language best predicted group membership. Specifically, mentally ill subjects without threat/control-override symptoms were more likely to communicate personal beliefs to their specified targets than non-mentally ill subjects. Conversely, the use of threatening language against the specified target was more likely to be utilized by non-mentally ill subjects than by mentally ill subjects without threat/control-override symptoms. The second discriminant function maximally classified subjects who were non-mentally ill (M = -.057) from those subjects who were mentally ill and displayed threat/control-override symptoms (M = -.279). An analysis of the standardized discriminant function coefficients and accompanying structure weights of the second function indicated that the contact factors of religious content, major life stressors, and personal themes best predicted group membership. Specifically, mentally ill subjects with threat/control-override symptoms were more likely to utilize religiously themed content when contacting specified targets than did non-mentally ill subjects. Regarding the conveyance of major life stressors pertinent to the subject, non-mentally ill subjects were more likely to engage their targets in such dialogue as opposed to subjects who were mentally ill and displaying threat/control-override symptoms. Finally, the second discriminant function indicated
that mentally ill subjects who displayed threat/control-override symptoms were more likely than non-mentally ill subjects to incorporate personal themes in their correspondence with specified targets.

Table 7

<table>
<thead>
<tr>
<th>Content Feature</th>
<th>Function I Structure Weights</th>
<th>Function I Standardized Coefficients</th>
<th>Function II Structure Weights</th>
<th>Function II Standardized Coefficients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target Dispersion</td>
<td>.212</td>
<td>.169</td>
<td>-.092</td>
<td>.076</td>
</tr>
<tr>
<td>Help-Seeking Content</td>
<td>.641</td>
<td>.005</td>
<td>-.026</td>
<td>.236</td>
</tr>
<tr>
<td>Personal Themes</td>
<td>.887</td>
<td>.891</td>
<td>-.325</td>
<td>-.414</td>
</tr>
<tr>
<td>Religious Themes</td>
<td>.215</td>
<td>.310</td>
<td>.561</td>
<td>.694</td>
</tr>
<tr>
<td>Threatening Language</td>
<td>-.361</td>
<td>-.295</td>
<td>-.241</td>
<td>-.189</td>
</tr>
<tr>
<td>Major Life Stressors</td>
<td>-.024</td>
<td>.100</td>
<td>.601</td>
<td>.739</td>
</tr>
</tbody>
</table>

The weights and loadings for the first discriminant function suggested that the best predictors for distinguishing between subjects who were non-mentally ill and subjects who were non-mentally ill without threat/control-override symptoms were personal themes and threatening language. In the second function, the best predictors for distinguishing between non-mentally ill subjects and mentally ill subjects with threat/control-override symptoms were religious content, major life stressors, and personal themes. Results of the direct discriminant function analysis indicated that 57% of the original groups were accurately classified in the present study. Predicted group membership for the present study is detailed in Table 8. Classification results indicated that amongst subjects who were non-mentally ill, nearly 80% were correctly classified in the present study. Mentally ill subjects without threat/control-override symptoms were
correctly classified at nearly 20%, whereas mentally ill subjects with threat/control-override symptoms were correctly classified at 95%.

Table 8
Classification results of the discriminant function analysis

<table>
<thead>
<tr>
<th>Predicted Group Membership</th>
<th>N</th>
<th>Non-Mentally Ill</th>
<th>Mentally Ill Non-TCO</th>
<th>Mentally Ill with TCO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Mentally Ill</td>
<td>219</td>
<td>171 (78.1%)</td>
<td>19 (8.7%)</td>
<td>29 (13.2%)</td>
</tr>
<tr>
<td>Mentally Ill Non-TCO</td>
<td>159</td>
<td>52 (32.7%)</td>
<td>31 (19.5%)</td>
<td>76 (47.8%)</td>
</tr>
<tr>
<td>Mentally Ill with TCO</td>
<td>40</td>
<td>1 (2.5%)</td>
<td>1 (2.5%)</td>
<td>38 (95%)</td>
</tr>
<tr>
<td>Number of Cases Analyzed</td>
<td>418</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Chapter 4 – Discussion

Due to the overwhelming number of contacts sent by subjects to political figures, there is a need to understand the driving forces behind the subjects who initiate this behavior. Because of the number of harassing and threatening correspondence received by individuals assessed as mentally ill, the use of threat assessment techniques to isolate which patterns of behaviors may be indicative of dangerous behavior directed at a specified target is critical. The focus of this study was to highlight the importance of comprehensive threat assessment analysis as it relates to the investigation of threatening or otherwise inappropriate contacts sent to political members. The study of behaviors leading up to dangerous behavior against a specified target underscores the need to understand the level of threat posed by individuals identified by law enforcement as mentally ill. Moreover, law enforcement and mental health professionals need to conceptualize how the symptomology of those subjects relates to their threatening contact and approach behavior that may ultimately lead to harm of an identified target.

Primary Analyses

The central goal of the present study was to better understand not only the thematic content of communication sent to political figures by the studied groups, but to also examine the mental illness symptoms present in those groups that may have enhanced their likelihood to engage in problematic contact. Several previous studies have studied the elements inherent to subjects that ultimately engage political figures in threatening correspondence and physical approach (Scalora, Baumgartner, & Plank, 2003; Scalora, Baumgartner, Zimmerman, Callaway, Hatch, Maillete, Covell, Palarea, Krebs, & Washington, 2002; Schoeneman, Scalora, Darrow, & Zimmerman, 2010).
One of the central precepts of the present study was to examine which, if any, of the three groups were more likely to engage in problematic approach of political figures. Over the past several years, media has highlighted the various acts of harm committed by mentally ill individuals against political members. Because of the increased focus on the populations of individuals who commit acts of targeted violence against specified targets, the present study sought to differentiate between the three studied groups. Consistent with the research conducted by Fein and Vossekuil (1999), the present study found that certain symptoms of mental illness were influential in compelling subjects to engage in problematic behavior toward specified targets. Specifically, the present study found that mentally ill subjects who displayed overt symptoms of a major mental illness, but not threat/control-override symptoms, were more likely than non-mentally ill subjects to engage targets in problematic physical approach. The results also indicated that mentally ill subjects without threat/control-override symptoms were likely to contact multiple targets, as opposed to a single target, prior to problematic physical approach. Alternatively, mentally ill subjects without threat/control-override symptoms appeared somewhat less likely to use threatening language compared to non-mentally ill subjects.

**Threat/Control-Override Symptoms**

Previous research by Link and colleagues, as well as the research of Swanson and colleagues found threat/control-override symptoms to be a potentially exacerbating factor in the commission of violence. Despite the fact that subjects in the present study who were mentally ill and displayed threat/control-override were found to be less likely to engage in problematic physical approach than the other threat groups, specific contact factors associated with their symptoms were discovered. Mentally ill subjects with threat/control-override symptoms tended to include issues that were personally relevant to them in their correspondence. The present
study indicated that mentally ill subjects with threat/control-override symptoms are less likely to engage in problematic physical approach when compared to mentally ill subjects without threat/control-override symptoms. Despite this finding, a proportion of mentally ill subjects who displayed symptoms consistent with that of threat/control-override continue to engage in problematic physical approach. This further substantiates that the presence of threat/control-override symptoms remain relevant in the study of problematic behavior perpetrated against specified targets.

The present study also discovered an inverse relationship between the likelihood of problematic physical approach and the presence of threat/control-override symptoms in mentally ill subjects. Consistent with the research conducted by Applebaum, Robbins, and Monahan (2000) as part of the MacArthur Violence Risk Assessment Study, subjects in the present study who displayed threat/control-override symptoms did not appear to be at a higher risk of violent behavior. One potential reason for these findings may lie in the present study’s definition of threat/control-override symptoms. Specifically, the present study examined the presence of threat/control-override symptoms through behaviors exhibited by subject at the time of the contact. More specifically, the present study defined the presence of threat/control-override symptoms as 1) the subject’s belief that his safety was being threatened by an outside entity, and 2) the subject believed his ability to control his own thoughts and actions were severely compromised and controlled by an outside entity. The present study’s definition of symptoms associated with threat/control-override is consistent with that of previous studies (Swanson, Borum, Swartz, & Monahan, 1996; Appelbaum, Robbins, and Monahan, 2000; Link & Stueve, 1994). These criteria for subjects displaying threat/control-override symptoms serve to capture
those mentally ill subjects who display behaviors observable to members of law enforcement that indicate the presence of threat/control-override symptoms.

While studying the association between mental illness and violence, Swanson and colleagues (1996) found that mentally ill subjects with threat/control-override symptoms were substantially more likely to engage in violence than non-mentally ill subjects or subjects who experienced hallucinations. An important consideration when examining the differences in the two studies was the intended targets of the subject’s violence and documentation of problematic physical approach. Subjects in the 1996 Epidemiologic Catchment Area survey study, conducted by Swanson and colleagues, relied on self-report and interview data when assessing for problematic physical approach. With regard to the present study, reported incidents of problematic physical approach were verified by members of law enforcement, and in many cases, law enforcement personnel were present to ensure the safety of the targeted individual. Also mental health records were often obtained after the encounter to verify the nature of the subject’s mental illness. Moreover, the present study includes cases where an identifiable subject chose to engage a specified target in an act of violence. This is in contrast to the subjects in the Epidemiologic Catchment Area study that was interested in the perpetration of violence not against a specified target, but instead assaultive behavior without evidence of targeting a specific person (Swanson et al., 1996).

In a 2003 study conducted by Scalora and colleagues, the presence of threat/control-override symptoms in subjects and the thematic content in their communications was examined. The results of their study indicated, in part, that subjects who displayed threat/control-override symptoms were more likely to include specific personal concerns as part of their communication with targets. Consistent with the findings of Scalora and colleagues, the present study also found
there to be a strong relationship between communication containing personally relevant grievances and subjects who displayed threat/control-override symptoms. Specifically, the results of the present study demonstrated that mentally ill subjects with threat/control-override symptoms tended to write about personally relevant grievances when engaging in problematic contact with their specified targets. Also consistent with research conducted by Scalora and colleagues, results of the present study found that non-mentally ill subjects were far less likely than their mentally ill counterparts to focus the content of their communications on personally relevant material. Instead, non-mentally ill subjects in the present study tended to focus the content of their communication on more policy driven subject material.

Regarding thematic content present in the communication authored by subjects, the present study was interested in the use of degrading language and religious content utilized by mentally ill subjects who displayed threat/control-override symptoms. In formulating the hypotheses for the present study, a 2003 study performed by Scalora and colleagues was reviewed. In the research performed by Scalora and colleagues, it was found that mentally ill subjects were more likely to include religious content in their communication with specified targets than their non-mentally ill counterparts. Scalora and colleague’s work also demonstrated that mentally subjects were less likely than non-mentally ill subjects to contain degrading language focused on the target. Regarding the presence of religiously themed content in the communication of subjects to their targets, the present study found that mentally ill subjects who displayed threat/control-override symptoms tended to not to include religious themes, which is not consistent with the 2003 study conducted by Scalora and colleagues utilizing a sample of persons with mental illness in general. However, inconsistent with the work of Scalora and colleagues, mentally ill subjects with threat/control-override symptoms tended to utilize
degrading or insulting language when communicating with their specified targets. Taken together, the results of the present study, with regard to the analysis of thematic content, suggest that the focus of mentally ill subjects who displayed threat/control-override symptoms was more focused on conveying personal beliefs in a manner that may have utilize insulting language directed toward the intended target.

It was hypothesized that non-mentally ill subjects would be more likely to engage in direct threats against political members more frequently than mentally ill subjects with threat/control-override symptoms or those mentally ill subjects with threat/control-override symptoms. Results in the present study indicated, consistent with the hypothesis, that non-mentally ill subjects were more likely to engage in direct threats against political figures than mentally ill subjects, either with or without threat/control-override symptoms. Moreover, there appeared to be an inverse relationship between mental illness and the likelihood of issuing a direct or conditional threat. Specifically, not only were mentally ill contactors without threat/control-override symptoms less likely to issue direct or conditional threats than non-mentally ill contactors, mentally ill contactors with threat/control-override symptoms were the least likely to engage in such behavior against political figures amongst the studied groups.

Given the interest in the thematic content that subjects often send to political figures, the present research study examined the relationship between highly emotional language utilized amongst the studied groups. Specifically, it was hypothesized that mentally ill contactors overall, would utilize emotionally charged language when conveying their ideas or intent to political figures. While it was demonstrated in the present study that mentally ill contactors were more likely to utilize emotionally charged language than non-mentally ill subjects, this was only true when examining the behavior of mentally ill subjects whom did not display threat/control-
override symptoms. In fact, mentally ill subjects who also displayed symptoms consistent with that of threat/control-override were far less likely to utilize emotionally charged language when engaging their specified targets. One particular reason for this finding may be the protective features inherent to some forms of severe mental illness.

Limitations of the Present Study

Despite the promising results of the present research endeavor, there are a number of limitations that should be addressed to aid further researchers in enhancing the results of future studies examining the thematic content of communication and behaviors predictive of problematic approach. Firstly, prior research in the field of threat assessment and general violence perpetrated by mentally ill subjects has underscored the importance of not only symptoms of severe mental illness, but also the use of alcohol and illicit substance abuse. In fact, research conducted by Appelbaum, Robbins, & Monahan (2000); Swanson, Borum Swartz, & Monahan (1996); and Hodgins & Riaz (2011) highlighted the increased risk of violence perpetrated by mentally ill subjects when those subjects were known to have abused mind-altering substances. Specifically, the author’s research found that the likelihood of engaging in violence increased markedly when mentally ill subjects were under the influence of alcohol or other substances at the time they engaged in assaultive behavior. Research later conducted by Beck (2004) supported the findings of Appelbaum and colleagues. With regard to the present study, only a small number of subjects actually engaged in problematic physical approach of their targets. Given the difficulty inherent to objectively ascertaining if the subjects who were interceded by law enforcement were under the influence of substances, the present study was not able to examine the effect of substance abuse on the perpetration of violence or otherwise problematic approach. Moreover, it is plausible that subjects who engaged in threatening contact
with their targets in the present study may have been, to some degree, under the influence of mind-altering substances. However, there was a distinct inability on part of investigators to objectively determine the presence of such substances and how their presence influenced their subsequent behaviors.

A second limitation of the present study has to do with a dynamic factor that prior research has demonstrated its utility in potentially predicting targeted violence. In a 2003 study performed by Scalora and colleagues, one of the dynamic factors associated with the potential perpetration of violence against specified targets was treatment noncompliance on behalf of mentally ill subjects. Ostensibly, mentally ill subjects who have a history of engaging in threatening or violent behavior and who have a documented history of treatment noncompliance may be at a heightened risk to engage in problematic behavior. These results were further supported by the work of Nederlof, Muris, and Hovens (2011) in their study of two hundred and fifty adults with schizophrenia. Among other factors, the authors discovered that medication noncompliance was associated with aggressive behavior in among adults with high positive symptoms (Nederlof et al., 2011). It was beyond the scope of the present study to extensively evaluate treatment noncompliance on behalf of the studied subjects. Moreover, the law enforcement members whom are charged with the responsibility of documenting the behavior of the subjects in this study did not always have at their disposal the resources to evaluate each subject’s treatment compliance history and how that may have influenced their likelihood to engage in acts of targeted violence.

Another potential limitation of the current study was the inability to measure, at least longitudinally, which risk factors were associated with an increased risk of problematic approach when examined temporally. Skeem and colleagues (2006) studied a number of risk factors
associated with assaultive behavior and measured the temporal proximity of those risk factors to the actual commission of violence against the victim. The authors discovered that while threat/control-overide symptoms did not appear to increase the likelihood of violence soon after those symptoms were observed, an increase in anger did increase the likelihood of violence within one week of escalating anger. To potentially enhance the present study, future research may attempt to include additional background information from collateral sources that would confirm the subject’s overall presentation leading up to the problematic physical approach of the specified target. It was beyond the scope of the present study to accumulate documented behaviors of each subject leading up to their engagement in problematic physical approach. Moreover, to accurately validate the behaviors exhibited by mentally ill subjects who approach their targets in a problematic manner would be enhanced by cross validation of sources. This would include interviews of family members, caregivers, treatment providers, and local law enforcement.

A final limitation of the present study was the absence of empirically supported measures that accurately identify individuals displaying threat/control-overide symptoms. In their 2011 study, Nederlof and colleagues utilized the Threat/Control-Override Questionnaire (TCOQ), which was developed to assess the symptoms inherent to psychotic individuals experiencing threat/control-overide symptoms. The use of such a measure helps to evaluate the individual who is suspected of displaying threat/control-overide symptoms to determine if he meets criteria to support such an assertion. In the present study, members of law enforcement were directly involved in the apprehension and interview of subjects, which made the possibility of utilize a measure such as the TCOQ impractical. Moreover, file review of cases in the present study evaluated the presence of the overarching symptoms consistent with threat/control-overide, but
did not allow for an objective measure of the actual individual who was displaying the symptoms at the time he was displaying such behavior.

*Implications and Directions for Future Research*

A central goal of evaluating subjects who pose threats to identifiable persons is to determine their level of threat, what factors may need to be present in order for the subject to carry out their plans as well as corroboration from collateral informants who can validate statements made by the subject. Evaluating the degree of threat that exists at any given time towards a specific target is inherently difficult as there are a number of factors that influence a subject’s probability of following through with violent threats. A number of factors are related to not only the likelihood that a subject will follow through with an aggressive act, but there are also a multitude of factors that serve to mitigate violence. Dynamic factors that are highly individualized to the subject, such as recent significant loss, noncompliance with treatment, and substance abuse are just a few. Those factors related to the potential prevention of targeted violence could include familial support, treatment compliance, and abstinence from mind-altering substances, along with several others.

While there is a wide array of individuals who contact political figures annually, there is a surprisingly scant amount of research that has studied the type of threat issued, and thematic content of the correspondence and whether it was predictive of approach behavior (Meloy et al., 2004). Because mentally ill persons tend to contact members of congress more frequently than other groups, focus on the predictive factors of mental illness related to such behaviors is required (Scalora et al., 2002). Technological advancements in recent years have enabled the rapid exchange of information allowing for enhanced collaboration amongst federal, state, and local law enforcement agencies. As such, the collaboration amongst law enforcement agencies
and mental health professionals is strongly encouraged to further enhance the amount and quality of information disseminated to law enforcement to ensure the safety of potential victims. Multi-agency collaboration can aid investigators in not only deciding the most appropriate course of action when dealing with contactors, but also aid in understanding the variables, especially mental illness indicators, that may lead to a greater understanding of how to prepare for and/or predict future threatening communication against political figures. Continued evaluation of subjects who display threat/control override symptoms and who engaged in multi-agency contacting, along with corresponding thematic content is warranted in an effort to establish possible patterns of behavior predictive of violence.

There is a continued need to study factors that are indicative of aggressive approach behavior. Consistent with prior research on threat assessment, the mere presence of threat/control-override symptoms in mentally ill contactors was not predictive of approach behavior. However, thematic content related to personally relevant topics, religious preoccupation, and help-seeking behaviors tend to enhance the likelihood of problematic approach. Moreover, mentally ill contactors who did not display threat/control-override symptoms were more likely to engage in problematic approach than either of the other two subgroups. Because mentally ill persons tend to contact political figures more frequently than other groups and alone was predictive of approach behavior, continued focus on the predictive factors of mental illness related to such behaviors is required. Further examination of additional factors may prove useful. As prior research has indicated, the presence of substance abuse in mentally ill subjects is highly associated with violence and may be a factor indicative of targeted violence within this population of contactors.
Given the known attributes of those contactors who are more likely to engage in problematic approach and due to the overwhelming number of contacts sent by subjects to political figures, there is a need to understand the driving forces behind the subjects who initiate this behavior. While there are a wide array of individuals who contact political figures annually, there is a need for more research that thoroughly examines mentally ill subjects and how the interaction between mitigating factors such as medication and treatment compliance interact with other environmental stressors that act as catalysts for threatening or otherwise inappropriate behavior toward specified targets. While the goal of understanding this dynamic process is not to create a “profile” of the mentally ill person who actively threatens political members, it is the hope that by studying the interaction of varying factors investigators and mental health professionals alike can work together to recognize and intervene earlier with appropriate strategies to prevent future violence toward political members.
Chapter 5 – References


Schoeneman, K., Scalora, M., Darrow, C. and Zimmerman, W., 2010-03-18 “The Language of Threat: Assessing Written Content for Indicators of Targeted Violence toward Political


