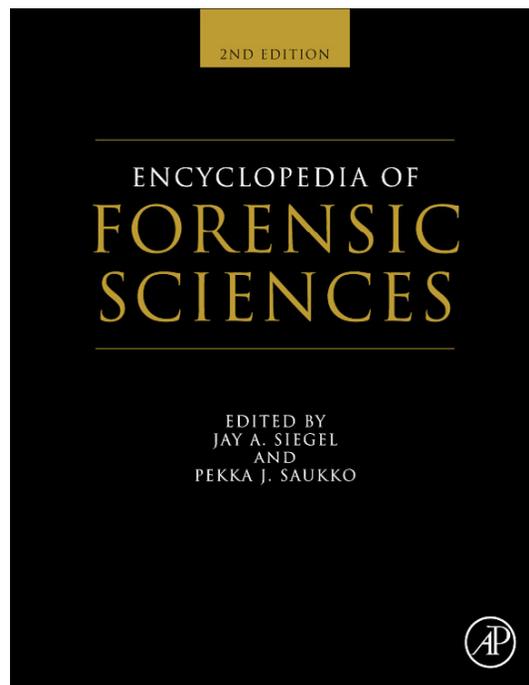


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Stalking

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Glossary

Attachment A psychobiologically based behavioral system which is present in humans from birth and is evident in seeking physical closeness to the love object. In infancy this is the mother; in adulthood it is often the sexually intimate partner.

Envy The wish to damage or destroy the goodness in another.

Jealousy Competitive feelings for the love object.

Obsession Repetitive, frequent thoughts which may impair the daily functioning of the person; when extreme, they are called fixations or pathological preoccupations.

Psychosis A generic term for a loss of contact with consensual reality and the creation of a private, bizarre, idiosyncratic reality; may be caused by a variety of mental disorders.

Validation To scientifically demonstrate the usefulness of a measure.

The crime of stalking contains three elements: a pattern of unwanted following or harassment; a credible threat; and the induction or intent to induce fear in the victim. Without victim awareness, there is no crime of stalking. This eliminates the inappropriate application of the term 'stalking' to describe violent crimes in which some form of surveillance precedes an attack, such as rape or robbery. Unwanted pursuit and sustained fear are the *sine qua non* of stalking.

Large-scale representative studies of stalking across three continents indicate that 2–13% of males and 8–32% of females will be victimized by a stalker at some point in their adult lives. These figures encompass clinical, forensic, general population, and college samples. Females are the target in 80% of the cases, and almost half of all stalking cases involve a prior sexual intimate as the perpetrator. The average duration of stalking is 2 years, but in one large study the modal duration was 1 month. Most stalkers have known their victim in some capacity before the stalking begins. Unfortunately, stalking is a crime that has only received attention in Westernized developed countries, although other areas of the world are beginning to take notice.

The two most validated typologies of stalkers focus upon clinical and operational concerns. The clinical typology was developed by Mullen et al. at the Victorian Institute of Forensic Mental Health in Melbourne, Australia, and consists of five groups: the rejected, the resentful, the socially incompetent, the intimacy seeking, and the sexually predatory. There is a growing body of work which utilizes this typology for treatment and management of both stalkers and their victims.

The operational typology of stalking is called RECON (relationship and context), and identifies four groups of stalkers: those who target prior intimates, prior acquaintances, public figures, and private strangers. This typology was developed utilizing a large nonrandom sample of stalkers ($N=1005$) in North America, and showed good interrater reliability and discriminant validity. It was created for use by law enforcement and security professionals. Both typologies show equivalency in the prediction of violence risk.

Stalking behavior predictably includes a number of tactics:

1. Hyperintimacy – rapidly trying to accelerate intimacy which induces fear or anxiety in the victim

2. Proximity/surveillance – watching or following the victim
3. Invasion – violating the privacy of the victim
4. Proxy pursuit – using third parties to follow the victim
5. Intimidation or harassment – threatening or psychologically manipulating the victim
6. Coercion/constraint – forcefully restricting the behavior of the victim
7. Aggression – being violent toward self, the victim, third parties, or property

One third of stalkers will be physically violent toward their victim during the course of their pursuit. The frequency of violence substantially increases when the stalker is a prior sexual intimate of the victim, and exceeds 50%. This is a highly replicated finding, and suggests that sexual intimacy intensifies attraction, attachment, and emotional reactivity when a bond is threatened.

The nature of the violence in such cases is usually *affective*, characterized by heightened autonomic arousal, anger or fear, the presence of a threat (usually fear of abandonment), and a lack of planning. It is impulsive, reactive, and immediate. Such violence contrasts with the nature of violence when a public figure is stalked and attacked, which is usually *predatory*: planned, purposeful, and emotionless. These two modes of violence are psychobiologically distinctive in mammals, including humans. Risk of homicide in all stalking cases involving prior sexual intimates is estimated to be 0.25%, and data suggest that stalking is a risk factor in the prediction of spousal homicide.

The earlier prediction of violence research found a number of variables that were significantly related to stalking violence, including the presence of threats, substance abuse, a prior sexually intimate relationship, personality disorder, a history of violent behavior, and the absence of psychosis. One study in the prediction of stalking violence utilized a regression tree approach which generated subgroups that have different probability estimates of violence through the interaction effects of the predictor variables. The most useful model contained nine variables: age under 30 years, education less than high school, threats toward the victim, prior intimate relationship, revenge motivation, psychotic disorder, personality disorder, substance

abuse history, and criminal history. The directionality of some of these variables depended on their interaction with other variables. Such sophisticated models may pave the way for actuarial software programs which will fairly accurately assess risk of violence over a particular period of time.

Other advanced work in stalking risk assessment focuses upon efforts to predict physical violence and persistence in stalking cases. Models have been developed which elucidate the predictor variables for the various subtypes of stalkers according to the Mullen et al. typology. Violence risk assessment of a particular subject is most useful when the evaluator initially focuses on status (distal or static) variables, such as age <30 and prior violence, and then turns to state (proximal or dynamic) variables, such as threats, proximity seeking, and current drug use, which individualizes the approach. There are two structured professional judgment instruments to assess violence risk in stalking cases: *The Stalking Risk Profile* and *Guidelines for Stalking Assessment and Management*. Both tools are based upon extant empirical research and the clinical work of the authors.

The paradox of stalking – an individual is pursued that is continuously rejecting – is best understood as a pathology of attachment. Attachment is a biologically rooted, species-specific behavioral system that is either secure or insecure, and in cases of stalking, the attachment pathology is insecure and often *preoccupied*. Numerous studies have tested and confirmed this hypothesis first proposed by Meloy. Kienlen first found in a small sample of imprisoned stalkers that the majority had lost a primary caretaker in childhood and had also suffered a major loss within a year prior to the onset of stalking. These two findings suggest both predisposing and precipitating events that may contribute to the onset of stalking. Stalkers typically remember their parents as emotionally neglectful and have insecure attachment styles.

Adult stalkers are usually males in their fourth decade of life with prior psychiatric, drug abuse, and criminal histories. They often have both a major mental illness and a personality disorder, necessitating a psychiatric and psychological evaluation to discern the best approach to treatment and risk management. Psychosis occurs in a minority of stalkers, but is more likely among stalkers of strangers and/or public figures. Questions remain concerning the psychopathology of college students who engage in 'obsessive relational intrusion,' a sub-criminal form of stalking.

Stalkers are preoccupied with thoughts of their object of pursuit. If an obsession is functionally defined as an abnormal frequency of preoccupation with an object, substantial data indicate that obsessional thinking is the most common cognitive trait of the stalker. The content of the stalker's conscious thoughts varies from case to case, but thinking is generally characterized by paradox and contradiction. Examples include the juxtaposition of statements that both idealize and devalue the victim; the wish for complete freedom for the victim alongside demands for complete control; or statements of rage commingled with yearnings for love and affection.

The preoccupations and contradictions which characterize the stalker's thinking may be unconsciously rooted in 'narcissistic linking fantasies,' recurrent thoughts of a special and unique relationship with the love object. Such fantasies are normal in the initial stages of romance or infatuation, yet in the case of stalking, they are met with rejection when acted

upon, and they usher in emotions of intense humiliation and rage that the stalker will express toward the victim. In normal men and women, romantic rejection often triggers feelings of grief, anger, and sadness, and the search for a new love object. When pathological narcissism predominates, such as one sees among stalkers, the intensity of their fury is a measure of their degree of ego deflation and may accelerate their pursuit.

The two most prominent emotions among stalkers are anger and jealousy. Such feelings are often consciously felt and acknowledged by the stalker, but often defend against other more vulnerable feelings and deficiencies outside his awareness, such as shame, loneliness, isolation, and social inadequacy. Anger often fuels the pursuit of the victim, and may be further motivated by envy to damage or destroy that which cannot be possessed, or a wish to inflict pain upon the one who has inflicted pain, the primitive impulse of *lex talionis*, an eye for an eye. Anger can also repair narcissistic wounds through a fantasized sense of omnipotent control over the victim. Victim surveys have noted that the most common perceived motivation of the stalker is a desire to control her.

Jealousy is a complex emotion, and is defined interpersonally as competition for the love of the object. Pathological or morbid jealousy may be apparent in some stalkers, and may reach delusional proportions, sometimes seen in cases of celebrity stalking. Jealousy also may motivate behavior to dominate and isolate the victim, and has predicted stalking in one study.

The psychological defenses used to manage such intense emotions include minimization, denial, projection of blame, and projective identification. Defenses serve to protect the stalker's inflated sense of self, but at a price. He remains vulnerable when confronted by his behavior, which paradoxically can escalate his rage. He inhabits an intrapsychic world populated by his own persecutory objects, but his fantasy of being persecuted can be confirmed by third parties, such as a husband, an attorney, or a police officer, who are trying to stop his incessant pursuit.

Although most stalkers are male, 15–20% are female. Female stalkers are less likely to have a history of violent criminality or substance abuse, and less likely to stalk a prior sexual intimate than male stalkers. They are more likely than male stalkers to pursue an acquaintance, and to pursue a victim of the same gender. Threat and assault rates, on average, are the same as men. In one large study of female stalkers, the women were in their 30s, single, educated, and intelligent. A minority were prior sexual intimates of the victims. Usually the victims were slightly older men who knew them as acquaintances. Unlike male stalkers, female stalkers appear to be motivated to *establish* intimacy with the victim, whereas their male counterparts are attempting to *maintain* intimacy with their victim. However, the more intimate the relationship had been prior to the stalking, the greater the risk of violence. The most common documented emotion among the women was anger, particularly abandonment rage. The most common personality diagnosis was borderline personality disorder. Although there are very few studies of female stalkers, recent work has largely confirmed these earlier findings.

Pathological narcissism appears to be less frequent among female stalkers, who are more intent on forming a relationship to assuage feelings of loneliness, dependency, and anger.

There are no randomized and controlled studies concerning the treatment of stalkers. The effectiveness of mental health interventions is currently based upon anecdotal data. There are efforts underway to measure treatment outcome in a comprehensive program in Victoria, Australia, and treatment and management recommendations are becoming more refined and focused. The importance of a correct diagnosis, which is often complex, and an accurate understanding of the stalker's motivation are recommended before treatment begins. Stalking motivated by major mental disorder is typically more treatable than stalking that is the result of personality disorder. The treatment of choice for the latter is long-term psychodynamic psychotherapy.

Victim impact in stalking cases is severe and chronic. More than one third of stalking victims will incur a psychiatric diagnosis that will persist long after the stalking has ceased. Many victims have their personal and professional lives seriously disrupted. Risk management of stalking cases is long term, difficult, and complex due to the reluctance of law enforcement to prosecute such behavior and the impressive tenacity and intelligence of some stalkers. Effective risk management encompasses many principles which have been elucidated elsewhere, but generally focuses upon four recommendations:

First, stalking victims often minimize or deny the crime being committed against them for weeks or months. It is imperative that any unwanted pursuit that induces fear should be recognized as a serious problem, if not a criminal activity, and be treated as such by contacting law enforcement. Some large urban areas have police units devoted to stalking.

Second, stalking victims often attempt to resolve the problem alone. It is imperative that professional help be sought, including contact with both law enforcement and mental health. Stalkers are typically psychiatrically impaired, and efforts to dissuade a stalker often involve simultaneous police and psychiatric interventions.

Third, stalking victims often destroy evidence. It is imperative that all evidence of unwanted pursuit, including notes, letters, e-mails, objects, gifts, audio and video recordings, text messages, and other means of communication be kept in a safe place for eventual prosecution. Stalking laws often require the establishment of a *continuity of purpose* by the stalker, and such evidence is critical in proving a case.

And fourth, stalking victims often decide to initiate contact with the stalker to reason with him. It is imperative that all direct contact with the stalker be avoided, especially contact initiated by the victim – although the stalker's ability to continue to communicate his thoughts to the victim should not be removed (e.g., e-mail address, telephone number) as a source of intelligence gathering concerning his state of mind. If the victim attempts to meet with the stalker, it will probably reinforce his behavior, and may increase his frequency of pursuit. One cannot reason with someone who is behaving unreasonably and in many cases dangerously.

See also: **Forensic Medicine/Clinical: Domestic Violence; Sexual Violence.**

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