

Protecting the prominent?

A research journey with Paul Mullen

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ABSTRACT

Recent research from the United Kingdom has called into question entrenched assumptions from the USA about public figure threat assessment, in particular the low importance given to mental illness and to the making of threats. This article reviews some of the evidence, concluding that the high prevalence of psychotic illness in threateners and harassers of public figures and the frequency of warning behaviours determines that these factors should be accorded a central role in the assessment and management of such cases. It is noted that data in US studies do not differ greatly from those in UK studies, but rather their interpretation. The practical benefits of attending to the factors in question are illustrated by reference to the activities of the United Kingdom's Fixated Threat Assessment Centre. The overlap is noted between the fields of public figure threat assessment and stalking, which have hitherto developed separately. The issue of public figure threat assessment is used to illustrate some of the attitudes and personal qualities which have typified the career and achievements of Paul Mullen in forensic psychiatry research. Copyright © 2010 John Wiley & Sons, Ltd.

Paul Mullen, questioned as to which part of his work had given him most satisfaction, replied: 'I have enjoyed research that aims to derail the juggernauts of official wisdom and entrenched assumption', though he feared that his time in psychiatry had 'dulled the outraged iconoclasm which was my most honest attribute' (Mullen, 2003). The official wisdom and entrenched assumptions in the area of public figure protection can be summed up as follows: mental illness is of little importance in attacks on public figures; threats do not matter – in fact, they are 'protective'; and the field of protecting the prominent is separate from that of stalking – its main focus is on the policing of a behavioural 'pathway to violence'.

There are two highly influential studies in this field. The first, by Dietz and colleagues (1991), examined writers of letters to members of the US Congress. It compared 43 writers who also physically approached members with 43 who did not. The conclusion that was widely drawn from the results was that those who threaten do not go on to approach. No comment was made in the paper on the issue of mental illness. The second study was by Fein and Vossekuil (1998, 1999), known as the Exceptional Case Study. This set out to examine the characteristics of those who attacked or assassinated public figures. To obtain a sufficiently large sample, the authors took a 50-year period. They included businessmen and film stars, as well as politicians, and expanded the concept of attack to include 'near lethal approaches', by which was meant someone found in the vicinity of the prominent person with a weapon. There were 34 cases of attack or assassination. Their two central conclusions were that 'mental illness only rarely plays a part in assassination behaviours' (Fein and Fossekuil, 1998: p. 182) and that threats are not of central importance: 'persons who pose threats most often do not make threats' (Fein and Fossekuil, 1998: p. 183).

If this is the entrenched wisdom, are there any reasons to be suspicious of it? Taking the Dietz paper first, two things stand out. First, the authors fail to mention that 72% of people in their sample had a psychotic illness. This is discoverable from their lengthy unpublished report to the National Institute of Justice (Dietz and Martell, 1989), from which the data in their paper were extracted. It is difficult to understand why such a central item of information should have been omitted from their paper. Second, the conclusion that threats are of little importance has been over-interpreted. In fact, their paper states: 'Subjects who sent threats to a member of Congress were significantly less likely to pursue a face-to-face encounter with him or her' (p. 1466). This may be statistically accurate, but disguises the fact that 33% of cases who made a direct threat subsequently approached. The widespread interpretation that threats are somehow 'protective', which the authors do not appear to have discouraged, is quite erroneous.

There is also reason to be suspicious of the entrenched wisdom represented by the Exceptional Case Study (Fein and Vossekuil, 1998, 1999). Let us examine the two central conclusions quoted above. First, that mental illness is of little importance in attacks on public figures. Examining the detail of their study, 61% had a psychiatric history, 43% had a history of delusional ideas and 10% of violent command hallucinations. This is so different from prevalence rates in the general population that it seems impossible to square with their conclusion. It also is difficult to square with earlier observations that 'approximately 90 per cent of all persons the Secret Service presently consider dangerous gave some indication of mental disorder' (Takeuchi et al., 1981: p. 28). Then, there is the assertion that threats are not of major importance. This sits uncomfortably with Fein and Vossekuil's reports that 77% of their cases had a history of verbal or written communication about the target and that 63% had a history of indirect or conditional

threats about or to the target. It seems likely that the message that others have drawn from their data is not one that involved a detailed reading of their papers.

In 2003, Paul and I were commissioned to research risks to public figures from lone individuals, and we formed the *Fixated Research Group*. The research was in several parts. First, there were visits to security agencies in other countries. The second part of the project comprised an exhaustive, 3-year evaluation of 5000 files from the archives of the Royalty Protection Division of the Metropolitan Police Service. Finally, we undertook a detailed examination of attacks on Western European politicians and an historical review of attacks on the British royal family. How then did Paul's efforts with our group fare in terms of 'research that aims to derail the juggernauts of official wisdom and entrenched assumption'? Various published studies answer this.

The first, published in *Psychological Medicine*, was based on examination of 5000 files held by Royalty Protection Police on people who had made threatening, harassing or inappropriate communications to members of the royal family, their residences or public appearances (James et al., 2009). Initially, the files were examined for evidence of serious mental illness, motivation and type of behaviour. Eighty-three per cent of cases showed clear evidence of serious mental illness, according to a strict operational definition. This placed mental illness at the heart of the matter. It also pointed to a direct overlap between the issue of protecting public figures and the interests of public health and the health of the individual. Dealing with inappropriate attentions involves obtaining treatment for seriously ill people who have fallen through the care net.

Scattered amongst people with florid psychosis were petitions from persistent complainants and querulents, whose initial local grievances had expanded to become pressing matters of national import and whose strange personality traits had finally crossed the border into delusional disorder. This was a group that Paul had previously studied (Mullen and Lester, 2006). Our later study, just described (James et al., 2009) looked at associations between motivation, mental state and behaviour. There were no episodes of violence to a royal family member in the case series, although there had been to a number against protection staff, so proxy markers for assault were studied instead (James et al., in press a). It transpired that it was the group of aggrieved individuals on highly personal quests for 'justice', which was highly significantly associated with the three main proxies studied – breaching security barriers, achieving close proximity to a royal family member, and carrying a weapon.

So much for proxies, but were there any actual attacks? Were these associated with mental disorder? We undertook our own study of attacks on politicians, specifically in Western Europe, between the years 1990 and 2004 (James et al., 2007). We excluded terrorist attacks, which meant excluding Spain and the UK assassination of Ian Gow in 1990 by the Provisional Irish Republican Army. There were 24 attacks in all. Two were mass killings involving local assemblies in which 22 people were killed and 37 injured. The remaining cases involved

presidents, prime ministers, ministers, heads of parties and the mayors of Vienna and Paris. There were 3 deaths, 8 serious injuries and 11 cases where no injury was sustained. Death and serious injury were significantly associated with the presence of mental disorder ($p = 0.012$, $\phi = 0.57$) and of psychosis ($p = 0.036$, $\phi = 0.49$), and those responsible were pursuing particular personal quests or grievances. Twelve of the 24 cases in the sample had engaged in warning behaviours and these had the same associations as death and serious injury, in other words the presence of mental disorder ($p = 0.000$, $\phi = 0.77$) and of psychosis ($p = 0.003$, $\phi = 0.65$). The warning behaviours were not subtle. They comprised chaotic deluded letters to politicians and police, threatening letters to politicians, paranoid contacts with MPs, lawsuits against the government, attempted self-immolation, newspaper advertisement, posters, leafleting and telling friends.

There are many more illustrative cases than can be considered in the space available. Three will suffice. In April 1990, Oskar Lafontaine, a leading politician in Germany's Social Democratic Party, was stabbed in the neck at a political rally in front of his protection officers. The assailant, a middle-aged woman, attacked him with a knife hidden in a bunch of flowers, as he signed his autograph for her. For years, she had made repeated representations to the authorities about underground killing factories. She believed that citizens were being abducted from their beds at night, and chopped up to make robots: anything left over was being turned into sausages and sold off in butchers' shops. Desperate to stop this and with her pleas unheard, she decided that she had to attack the first politician who came to town. This happened to be Mr Lafontaine. In the same year, the German interior minister, Wolfgang Schäubler, was shot as he left a political rally in the company of his bodyguards. He was paralysed from the waist down. The attacker believed that the German government was using transmitters to beam intense pain and feelings of lust into his body. For 7 years, he made numerous complaints to official bodies and to his member of parliament, and twice tried to take the government to court, but all to no avail. He eventually decided that his only way out was to take matters into his own hands.

A similar case occurred in the United Kingdom in 2001. The then Liberal Democrat MP, Nigel Jones, was attacked by a constituent with a samurai sword. His friend and aide, Andrew Pennington, who intervened to protect him, was run through and killed. The perpetrator was a man who had developed complex persecutory delusions after losing his job. These involved conspiracies by freemasons and others to ruin him. He wrote numerous letters to the authorities about the plot over a 2-year period and initiated a string of legal actions. He became increasingly angry about the lack of redress. He visited the MP's surgery, so it came out at his trial, between 50 and 100 times, with the same rambling paranoid grievances. None of these cases was predictable, but all were potentially preventable, had a system been in place to evaluate bizarre and hostile complaints.

The *Fixated Research Group* also studied historical attacks on the British royal family over the period 1778 to 2003 (James et al., 2008). The task was complicated

by the paucity of historical records on some cases. It was also necessary to set aside a prevailing belief in Victorian times that attacking the royal family was in itself proof positive of mental illness. For instance, the judge sentencing Pate after his attack on Queen Victoria in 1850 stated: 'I would fain believe it is the privilege and boast of the country that no man but a madman would attack the most gracious Sovereign of this country. I believe it is as great a proof of insanity as it is possible for a person to give' (*R. v. Pate*, 8 St. Tr. N.S. 2). The popular versifier, McGonagall, expressed similar sentiments in rhyme after a further attack on the Queen in 1882: 'Maclean must be a madman, Which is obvious to be seen, Or else he wouldn't have tried to shoot, Our most beloved Queen' (McGonagall, 1890). Despite these methodological complications, sufficient evidence was found to conclude that, out of 23 attackers, 11 (48%) clearly had psychosis and one possibly so, two had depressive illnesses and one exhibited features of anti-social personality disorder. Ten attackers (44%) were known to have engaged in forms of warning behaviour.

The common themes in these studies, then, were the importance of mental illness and the significance of warning behaviours. To students of British forensic psychiatry, these cases may have a familiar ring. Delusionally driven individuals, pursuing idiosyncratic quests for 'justice', were responsible for the killings of the Prime Minister Spencer Perceval in 1812 (Wilson, 1812; Hanrahan, 2008) and Edward Drummond, the private secretary to the Prime Minister, in 1843 – the Daniel McNaughton case, which became a legal landmark (West and Walk, 1977). In both cases, what we now understand as clear warning behaviours had been apparent for several years. It is worth noting that later research has established the particular importance of delusional drive with respect to more rather than less serious violence (Taylor, 1985; Taylor et al., 1998).

The importance of motivation in assessing risk was also a consistent theme of our studies (Mullen et al., 2009b). In short, the risk of violence was significantly higher in the resentful (i.e. querulants and those with pathological quests for 'justice' or high-risk delusions). The risk was low in those seeking intimacy or personal relationships for whatever reason. This contrasts with the entrenched assumptions in the risk assessment literature, which is typified by Calhoun and Weston (2009: p. 21), in a book otherwise full of practical experience, where they stress the importance in threat assessment and management of concentrating on behaviour and the need to 'avoid trying to plumb the minds and motives' of cases, preferring 'to leave that chore to forensic psychologists and psychiatrists'.

The third official wisdom or entrenched assumption, which links to this, is that the field of public figure protection is separate from that of stalking and harassment of the general population, its main focus being on the policing of a behavioural 'pathway to violence'. The latter, it is contended, involves a logical sequence from conception, through planning, practical preparations, and then dry runs, followed by action. Paul's group looked for evidence for such a pathway

in the cohort of Royalty Protection Police cases. We compared the characteristics of those that had engaged in certain behaviours: unsuccessful breaching of security perimeters; successful breaching; achieving close proximity to a family member; carrying a weapon and offering evidence of homicidal ideation (James et al., in press-a). In terms of a pathway, one might surmise that these groups would form a chain of subsets of each other, each being successively smaller. However, although there were associations between each form of behaviour and specific patterns of motivation and mental state, no evidence of a pathway phenomenon could be elucidated in this sample.

Next, a direct comparison was made between the Royalty Protection sample and the stalker sample collected by Paul's team in Melbourne, which has formed the basis of many of his studies in this area. Re-framing the definition of stalking for the public figure arena (Mullen et al., 2009a: p. 197) and excluding cases in which the victim had slept with the perpetrator, it became evident that risk factors for public figure and general population victims were similar in the areas studied (James et al., 2010b). The conclusion to be drawn is an important one. Whereas public figure threat assessment and stalking have developed as entirely separate fields of research, they are essentially dealing with the same phenomenon. This enables the adoption into the public figure arena of the various insights into risk from the general stalking literature, and, potentially, vice versa. In particular, it enabled the adoption by Fixed Threat Assessment Centre (James et al., 2010a) of the Stalking Risk Profile (MacKenzie et al., 2009), which is a manualised assessment of different domains of risk, following a structured professional judgement model, which points to treatment options in individual cases. This approach separates risk into different domains, for which risk factors differ (persistence, escalation, recurrence, psychosocial damage to stalker, disruption and violence) and recognises that risks in each domain vary according to motivational group. This broadens the arena of public figure threat to include other more common types of risk than that of violence, which has dominated the risk assessment literature hitherto.

There are other papers produced in this research effort which there is no space to do more than mention here (James et al., in press-b; Meloy et al., 2004; Meloy et al., in press). All were prepared with another of Paul's maxims in mind, which is that there is little point in undertaking research which cannot be translated into some advance in practice. The main practical outcome of all this work was the establishment of the Fixated Threat Assessment Centre (FTAC), the first joint police/NHS unit in the United Kingdom, to assess and manage risks to public figures. FTAC proved able to catalyse suitable health outcomes for its cases. This both reduced risk to public figures and benefited patients (James et al., 2010a). Of the first 100 people assessed by unit staff, 86% suffered from psychotic illness. Following FTAC intervention, 57% were admitted to hospital by local psychiatric services, and 26% taken on by community psychiatric teams. Assessed threat levels were reduced to low through FTAC interventions in 80% of cases.

Objections have been raised in some quarters that FTAC is providing a service only to the privileged, rather than to the general public. This is to misunderstand the effects of FTAC's interventions. Those most directly exposed to the attentions of people who harass or threaten public figures are not the public figures themselves, but rather members of the families of those individuals and the general public. Furthermore, much of the threat engendered by these people arises in consequence of the misery or terror caused by their symptoms. They are seeking relief, albeit in misguided and dangerous ways: FTAC provides this for them where other services have not done so. It is the suffering individuals and their families who almost certainly benefit most from FTAC's work.

Here, we come to the crux of the matter in terms of Paul's stamp on proceedings. In effect, the aims set by the funders, ostensibly designed to protect the privileged, had been redefined by Paul so as to benefit the primary sufferers and the general populace as well. Considering the initial tasks set, the aim 'research the risks to prominent public figures from lone individuals' had been redefined as 'use inappropriate attentions to the prominent as a new tool to identify untreated serious mental illness in the community'. 'Devise and effect a mechanism by which such risks could be reduced' had become 'establish a new unit which can catalyse the treatment of those suffering from serious mental illness who have fallen through the care net'. Finally, 'thereby help protect a range of prominent people' (which one might term the 'establishment') had been turned into 'thereby protect those sick people and the public, as well as the prominent'.

In this particular research journey, Paul had succeeded in derailing the 'jugernauts of official wisdom and entrenched assumption' about public figure protection. He had done so in a way which helped reshape the field and which immediately gave rise to practical change. One can only applaud Paul's 'enraged iconoclasm' and the part that it has played, not only here, but throughout his career, in improving the lot of the mentally ill and in educating those that have been privileged enough to journey with him.

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