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People With Severe Mental Illness More Likely To Be Victims Than Perpetrators of Violence

Special Issue of Psychiatric Services Focuses on Violence and Mental Illness

Arlington, Va. – Intense media coverage of violence perpetrated by people with mental disorders—such as the April, 2007 shootings at Virginia Tech—has unintentionally reinforced a common public misconception: mental illness equals violence. However, more than a decade of research has shown that the equation is not so straightforward. Research has also shown that focusing on people with mental illness who commit public acts of violence has obscured the fact that persons with mental disorders are more often victims of physical assaults, rape, and robbery.

The February issue of *Psychiatric Services* features articles that examine recent research with the goal of clarifying the relationship between mental illness and violence. The important matter of prevention is also addressed: is it possible for mental health professionals to predict, with any accuracy, whether a patient in their care will physically harm other people?

“Mental health professionals are concerned about the recovery of individuals with mental disorders, and we must protect them from harm,” said Howard Goldman, M.D., Ph.D., editor of *Psychiatric Services*. “But we also have an obligation to protect society from dangers that might be associated with mental illness. Historically, our society has been more concerned about its own protection than about the protection of psychiatric patients. But it is imperative that we get the balance right. We need a more nuanced view of the association between violence and mental illness—and that is the editorial intent behind this special issue.”

In 1998, the landmark *MacArthur Violence Risk Assessment Study* found that the link between mental illness and violence is indirect: people with mental disorders are much more likely than those without them to abuse alcohol and illicit drugs, and people who abuse these substances are much more likely than those who do not to engage in violent behaviors. In addition, the MacArthur study found that because of the disabling nature of severe mental illness, these patients, on average, have little income and live in impoverished and socially disorganized environments where the probability of violence is higher.

When researchers controlled for factors such as substance abuse, age, socioeconomic status, employment and housing, they found that people with mental illness discharged from a psychiatric hospitalization were no more likely to be violent than people in the general population.

Highlights of the February special issue of *Psychiatric Services*:

- In the lead article, E. Fuller Torrey, M.D., and Jonathan Stanley, J.D., challenge the accuracy of the MacArthur study's conclusions and criticize several aspects of the original study's design. The authors of the MacArthur study, led by John Monahan, Ph.D., and Henry J. Steadman, Ph.D., respond to the each challenge and say they stand by their 1998 conclusions that people with mental illness—who do not abuse alcohol or drugs—are no more likely to be violent than people in the general population.
- Linda A. Teplin, Ph.D., and colleagues review 31 U.S. research studies published since 1990 focusing on the relationship between mental illness and violence. Among outpatients, between 2 percent and 13 percent reported committing a violent act. The rates varied depending on the length of the time period examined in the studies (from six months to three years). However, over those same time periods, between 20 percent and 34 percent of these same outpatients reported being a victim of violent crime themselves. Dr. Teplin and colleagues cite national studies indicating that the overall risk of violence attributable to mental illness in the United States is 2 percent. They also argue that two demographic characteristics unrelated to mental illness—gender and age—are much more powerful predictors of violence: Nearly 40 percent of arrests for serious violent crimes are of males 24 years and younger.
- In a pair of companion articles, Alec Buchanan, Ph.D., M.D., and Jeffrey W. Swanson, Ph.D note that the ability of mental health professionals to identify patients who are likely to be violent has improved over the past 30 years. Research on violence has identified risk factors that have been incorporated into screening interviews that are used in treatment settings, such as emergency rooms. However, the accuracy of even the best such screening test is substantially below what would be considered acceptable in other areas of medicine.
- Other articles in the special issue examine controversial hospital practices—seclusion, physical restraint, and forced medication—that are used when patients who are deemed to have a high potential for violence are hospitalized. Also included are two articles on rates of jail incarceration in samples of people with mental illness, an article assessing the effectiveness of specially trained police officers in de-escalating violence when they encounter people with mental illness, and a report on concerns about safety and security in a focus group of psychiatric patients living in an inner-city group residence.

Note to Editors:

For more information about *Psychiatric Services*, including embargoed copies of journal articles, contact Jim Rosack at 703-907-7862 / jrosack@psych.org or the APA Office of Communications and Public Affairs at 703-907-8640 / press@psych.org. To sign up to receive eTOCs and other email alerts visit <http://ps.psychiatryonline.org/subscriptions/etoc.dtl>.

About *Psychiatric Services*:

Psychiatric Services was established in 1950 as a monthly publication by the American Psychiatric Association (APA) for mental health professionals and others concerned with treatment and services for persons with mental illnesses and mental disabilities. The journal strives to advance APA's objectives to improve care and treatment, to promote research and professional education in psychiatric and related fields, and to advance the standards of all psychiatric services and facilities. The journal's peer review and editorial processes are conducted independent of any other APA component. Statements in this press release or in the articles published in the journal are not official policy statements of the APA, unless otherwise noted.

About the American Psychiatric Association:

The American Psychiatric Association is a national medical specialty society whose more than 38,000 physician members specialize in diagnosis, treatment, prevention and research of mental illnesses including substance use disorders. Visit the APA at www.psych.org and www.HealthyMinds.org.

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