

## Psychiatry & Behaiorial Sciences Section – 2009

## I13 General and Forensic Psychiatrists as Objects of Inimical Conduct

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After attending this presentation, attendees will become aware of the prevalence of inimical acts against general and forensic psychiatrists and the impact of this behavior on psychiatrists. Attendees will learn how to identify potential offenders and when dangerous behavior is escalating. Lastly, they will understand the steps to take if they are being victimized.

This presentation will impact the forensic community by heightening the awareness of the frequency of attacks against general and forensic psychiatrists. Also by teaching psychiatrists how they can protect themselves by identifying potential attackers, identifying escalating dangerous behavior, and teaching appropriate measures to take in order to preserve personal safety.

Personal safety is an issue that concerns everyone. In the general population as many as 2 out of every 25 women and 1 out of every 50 men have been the victims of inimical behavior. Moreover, general psychiatrists and forensic psychiatrists are at great risk for stalking, assaults, and violent threats. Literature has reported that up to 1 in 5 general psychiatrists has been stalked, harassed, threatened, or assaulted by their patients and up to almost half of forensic psychiatrists have experienced such behavior. Therefore, mental health care professionals need to be aware of perilous behavior.

Threats to personal safety can have a severe impact on the psychiatrist's emotional, occupational, and social functioning. The impact can vary from simply changing one's daily routine to having to changes jobs and/or move to another city. Often, the longer the perpetrator demonstrates the deviant behavior, the more upsetting and disruptive it becomes to the victim. In the most severe cases, psychiatrists had to be treated for post-traumatic stress disorder.

The statistics regarding imperiling conduct are alarming. How can psychiatrists guard their personal safety? Psychiatrists need to be aware of how to identify possible offenders and recognize when their behavior is becoming more dangerous. Psychiatrists need to be on high alert if the patient/client has stalked or harassed before and/or has had a violent history. Perpetrators tend to be male and have a diagnosis of personality disorder, substance abuse disorder, schizophrenia, and/or mood disorder. Indicators of escalating dangerous behaviors include: instances when the patient/client becomes more obsessed/fixated on the psychiatrist resulting in more contacts, demonstrates an increased degree of negative emotions (e.g., anger, jealousy, hatred) toward the psychiatrist, and makes an increased number of threats.

The most appropriate measure for a psychiatrist to take if they are being victimized is to avoid direct contact with offender. Often victims of adverse behavior want to confront the offender. Unfortunately, confrontation encourages more of the unwanted conduct. The police should be immediately notified and the psychiatrist should notify their supervisor and team at their job. The supervisor and team can aid in acting as a barrier between the psychiatrist and the offender. Psychiatrist should promote their own personal safety by enhancing alarm systems, varying daily routines, and investing in a personal security officer, if needed. Most importantly, document and record any communications the perpetrator has made which will help the case when filing for a restraining order and bringing criminal charges, if required.

In summary, mental health professionals are at risk for being victims of adverse behavior. The impact that victimization has on the psychiatrist's psychological, occupational, and social functioning can be severe. It is important that psychiatrists are aware of this fact and can identify possible offenders as well as know if an offender's dangerous behavior is escalating. It is imperative that psychiatrists know how to protect their personal safety if they are objects of inimical conduct.

Stalking, Assault, Psychiatrists