



Psychiatry & Behavioral Sciences Section – 2011

17 Coexistence and Independent Relation Between Mental Disturbance and Stalking

Roberto Catanesi, MD, Section of Forensic Psychiatry, University of Bari, Piazza Giulio Cesare, Bari, 70124, ITALY; and Felice Carabellese, MD, Section of Forensic Psychiatry, University of Bari, Piazza Giulio Cesare, Bari, 70124, ITALY*

After attending this presentation, attendees will understand the relation between psychopathology and criminal motivations that are at the basis of the female stalking.

This presentation will impact the forensic science community by presenting an unusual case of a female stalker diagnosed with bipolar disorder.

Introduction: There are many known features of stalking, ranging from the definition (Meoly, 1998), characteristics of reiteration (Hege, 2005), continuity and persistence over time (Hall, 1998), to the underlying motivations. In this scenario, some have reported a significant correlation with mental disturbances, including erotomania (Zona, 1998), psychosis (Silva, 2000), personality disorders (Meoly, 1998), although the stalking is considered to be less strongly correlated with mental disorders.

Most stalkers are male (Budd, 2000), and the most dangerous are “rejected” and “resentful” (Mc Ewan, 2009), as defined by Mullen (1999), namely men who cannot accept the end of a relationship or are rejected by their partner and develop the habit of tailing their victim – generally a woman – in a sadistic game (Hege, 2005), while they get ready to strike (Palarea, 1999). A meta-analysis (Spitzberg 2002) confirmed the data.

Few studies have been made of female stalkers.

Objectives: Objective of this work is to contribute to the knowledge of female stalking. The data on this phenomenon depend on the population considered: the prevalence in the general population is 12-13% (Tjaden, 1998), whereas in selected samples from the psychiatric-forensic community there is a higher percentage, ranging from 28% (Purcell, 2001) to 32-33% (Zona, 1993; Harmon, 1995). In the latter group the male-female stalker ratio is 4:1 (Purcell, 2001).

Unlike male stalkers, few female stalkers have a criminal record (Purcell, 2001); typically, they are young, white, heterosexual, single, childless and highly educated (Meloy, 2003). In an overwhelming majority of cases the woman knows her victim personally, often on a professional basis (Purcell, 2001). She is acting in revenge in 2/3 of cases (Meloy, 2003) and the closer the pre-existing relationship between the stalker and her victim, the greater the risk of violent acts of

persecution. In his meta-analysis, West (2008) underlines the “smart” tactics adopted by the female stalker to torment her victim. There is no reason to believe that female stalkers are less dangerous than their male counterparts. Characteristically, a high proportion of victims of the same sex has been reported (Purcell, 2001).

Moreover, studies have shown that unlike in male stalkers, in females there is a high incidence of severe mental disorders and insanity. According to Meloy (2003), at the start of their stalking acts, 50% of these cases have a diagnosis of “psychosis.” These are Axis I Disorders (Delusional Disorder, Paranoid Schizophrenia, Mood Disorder). There are also a high percentage of personality disorders, especially cluster B (Kamphuis, 2000). However, there are a lower percentage of disorders due to substance addiction than in male stalkers (West, 2008). Thus, there seems to be a greater prevalence of psychopathology motivations among female stalkers.

Methods: The case is a 43-year-old woman, university professor, single and childless, with a history of a long affair with the victim that ended in 2007. In July 2009 she was reported by the ex-partner's mother for acts of persecution (continuous phone calls, slanderous remarks, stalking, murder threats) against herself and her son, who had moved to another city.

Diagnosed with a bipolar disorder that had developed in 2003, the woman was in treatment since 2005. The woman's mother, who had committed suicide by throwing herself out of the window in 2003, was also affected by a bipolar disorder. The acts of stalking had started in January 2009, and lasted for six months, during which period the woman was not taking her prescribed drugs. After being reported to the police, she resumed treatment, and derived benefit. In December 2009, despite her medicated condition and the fact that she was still under forensic- psychiatric observation, she resumed the same stalking behavior she had previously abandoned.

Conclusions: The peculiar characteristic of this case is the fact that despite being well medicated the woman continued the same criminal acts. This demonstrates that even when there seems to be an evident relation between psychopathology and criminal motivations, it is always necessary to determine if, or to what extent, the mental disorder, even if severe, is at the basis of the criminal behavior. **Female Stalker, Mental Illness, Insanity**