



### I14 Violent Fantasies in Psychotherapy: Risks of Precipitating Violent Behavior

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After attending this presentation, attendees will become familiar with the theory and practice of psychotherapy techniques that focus on violent fantasies. Readers will also gain an understanding of the net risks involved in the use of violent fantasies in psychotherapy and important measures for the psychotherapist to undertake before, while and after a patient offers a spontaneous or a prompted report of violent fantasies. This presentation will also consider the tradeoffs involved in such measures, including compromises in confidentiality, chilling effects on psychotherapy, and disruptions to the therapeutic alliance.

This presentation will impact the forensic science community by focusing on both violence risks associated with fantasy in psychotherapy as well as affirmative approaches to address such risk. This presentation offers important recommendations to forensic practitioners, psychotherapy providers, and the community in general.

In the context of psychotherapy, the exploration of violent or aggressive fantasies often serves the important function of providing insight into sources of attachment trauma, which in turn facilitates eventual mastery over said trauma and resolution of certain maladaptive defenses and psychological symptoms. Indeed, in some methods of psychotherapy, murderous fantasies are specifically elicited by the psychotherapist, who then assists the patient to experience and elaborate on the feelings of rage as well as relief upon imagining the acting out of those violent fantasies.

The question thus arises as to whether the use of fantasy in therapy affects the risk that the patient will act out on the violent thoughts in reality. More specifically, to what extent must therapists take into account the actual risk of violent behavior in patients who are deliberately asked to develop and articulate their violent fantasies and then encouraged to experience the catharsis of enacting their aggressive urges?

This presentation reviews the current research on the violence risk associated with patient reports of violent fantasies. Though violent fantasies are common and in fact normal in healthy populations, in certain groups, they constitute a risk factor for violent behaviors. In particular, risks may increase in persons with deficits in domains such as judgment, impulse control, or reality testing, including those with borderline personality or substance use disorders and those with criminal backgrounds. The content of the reported fantasy may also be correlated to the risk of violent behavior; fantasies of rape, beating, or torture may indicate increased risk compared to fantasies of mere murder. Additionally, concern for violent acts increases when therapy patients exhibit preoccupation with or sexual excitement from violent fantasies. Taking these risks into account, the articulation of specific violent fantasies by certain patients against identified individuals may in select circumstances constitute a threat that invokes duties to warn and/or protect under Tarasoff laws.

Accordingly, psychiatrists should be aware of their duties and implement safeguards to protect their patients and the community, to ameliorate risks of both violent behavior and of liability exposure. Appropriate safeguards include proper screening and violence risk assessment to determine if specific patients can appropriately handle the experience of fantasy exploration in therapy; containment of patients who demonstrate or develop a breakdown in ability to control urges to act on violent fantasies; and reporting of patients to law enforcement agencies where identified individuals may be at risk of harm from the patient.

#### **Violence Risk Assessment, Tarasoff, Psychotherapy**