



GGD

Amsterdam

Public Health Profiling: profiles of extreme harrassers

Ardan Miedema

12 November 2016



GGD Focus in the Amsterdam Harrasment approach

- **Victims are the key issue; protecting the safety of people living near the harasser is paramount.**
 - Assessing risks to the neighborhood and its residents is an essential part of the approach.
- **The Public health service aids in making this risk assessment**
 - By looking at the harasser and his behavior, and the interaction and problem solving skills of all involved.
 - However, the Amsterdam harassment approach are serious cases that require an urban approach.



Why focus on harassers?

- **The harasser themselves suffer from their own behaviour.**
 - It is also in their own interest that this behaviour stops.





Safety and the relation with psychiatry

- **In determining the safety risks the presence of psychopathology is considered .**
 - The presence of psychopathology and the possibility that this influences the behavior of the harasser must be considered or excluded.
 - This is despite the fact that most people with mental health problems are not violent or dangerous. They are more the victim.
- **On that account, the GGD is committed to screening harassers**
 - Part of a good assessment is face-to-face contact with a community psychiatric examination

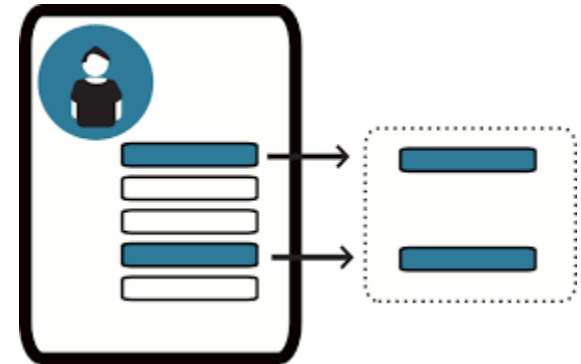


The dilemma's in collaborations, working together

- **Care & Safety: a comprehensive plan. To that end chain partners share information.**
- **The GGD is a medical service and can't necessarily provide information about the harasser.**
 - This means just 'outside information' for the interested parties .
 - In this context, the GGD learned from experience in other similar programs, such as the Top 600 approach (care and treatment advice).



Profiles: part of the solution



- ***In general, by working with profiles,*** chain partners can be advised on the way forward in harassment situations, namely on the basis of the extent to which - partly by provision of care/treatment - **we can expect any change in behavior.**
- **Profiling also helps to 'exclude care', or identifying harassers with a (very) limited treatment perspective.**
 - a behavioral change through (more) care is difficult to achieve- and then it's the 'law enforcement's' turn.



Profile 1: “Willing and able to change”

- There is a willingness to change;
- There is no evidence of severe chronic psychopathology;
 - Problems are often stress-related en periodic, transient.
- The harasser is motivated to comply with the counseling appointments.
- ~10% of cases



Profile 2: “Willing, but unable to change”

- **There is a willingness to change, but there are signs of a severe disorder;**
- **With the right intervention are often motivatable for treatment/ counselling, but cannot (usually) do it independantly (i.e. cognitive impairment, addiction);**
- **Are eventually prepared to meet commitments, i.e. if the living conditions have been addressed (housing, finances and daily activities).**
- **Above points require an intensive approach, often by combining coercion and pressure.**
- **~40%**



Profiel 3: "Able, but unwilling to change"

- Signs of severe psychopathology;
- The harasser is usually not motivated to: change, accept treatment, fulfill counseling agreements ("motivational paradox").
- Clear distinction between profile 2 with respect to the motivation and impairment-insight
- ~20%



Profile 4: “Unable, unwilling to change”

- **There is no question of psychopathology in the any sense, but rather a complex, often antisocial, personality structure**
- **Harasser is not motivated to keep counseling appointments, not motivated to change;**
- **Impassive for authority;**
- **Anti-social behaviour is the norm, the concerned profits from behaviour.**
- **~30%**



Limitations

- Profiles are a simplification of reality.
 - Because within the profiles a diversity of diagnoses is represented, it is not always possible to describe in general terms the danger that these clients pose for their environment.
 - To determine the exact path/route of settling a case it is sometimes still necessary to share more detailed information.



Thanks for your attention.

Ardan Miedema
amiedema@ggd.amsterdam.nl

