

Mental disorder and violence: is there a relationship beyond substance use?

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Abstract

Purpose A general consensus exists that severe mental illness (SMI) increases violence risk. However, a recent report claimed that SMI “alone was not statistically related to future violence in bivariate or multivariate analyses.” We reanalyze the data used to make this claim with a focus on causal relationships between SMI and violence, rather than the statistical prediction of violence.

Methods Data are from the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC), a two-wave study ($N = 34,653$: Wave 1: 2001–2003; Wave 2: 2004–2005). Indicators of mental disorder in the year prior to Wave 1 were used to examine violence between Waves 1 and 2.

Results Those with SMI, irrespective of substance abuse status, were significantly more likely to be violent than those with no mental or substance use disorders. This finding held in both bivariate and multivariable models. Those with comorbid mental and substance use disorders had the highest risk of violence. Historical and current conditions were also associated with violence, including

childhood abuse and neglect, household antisocial behavior, binge drinking and stressful life events.

Conclusions These results, in contrast to a recently published report, show that the NESARC data are consistent with the consensus view on mental disorder and violence: there is a statistically significant, yet modest relationship between SMI (within 12 months) and violence, and a stronger relationship between SMI with substance use disorder and violence. These results also highlight the importance of premorbid conditions, and other contemporaneous clinical factors, in violent behavior.

Keywords Violence · Severe mental illness · Epidemiology · Causality versus statistical prediction

Introduction

Over the past 20 years consensus has emerged among most researchers that there is a modest, yet statistically significant relationship between severe mental illness (SMI) and violence. Consequently, in recent years, much of the research designed to examine this relationship has focused on refining risk assessment [1–3]. Researchers have long understood that most people with mental illness are not violent, that most violent acts are committed by people who are not mentally ill, and that substance abuse—more common in people with mental illness—is responsible for much of the increased risk attributable to mental disorder [4–8].

Recently, a number of papers have sought to further clarify the relationship between mental disorder and violence by focusing on the roles that substance use [9, 10], prior violence [11], premorbid conditions [12], familial factors [13], and clinical features such as hostility and lack of insight [14, 15] play in increasing violence risk, in

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