

Link between Mental Health Conditions and Criminal Tendencies

An Evidence-Based Analysis

Student Name and Number

[Pick the date]

Introduction

Mental disorders have been linked to an increased propensity to commit crimes since time immemorial. One important reason for this may be the widespread representation of criminals as mentally unstable by the media. While this may be true to a certain extent, it is in no way representative of the entire population of people with mental disorders. However, the connection between mental conditions and the increased tendency towards aggressive behaviours cannot be neglected. It is possible that certain types of mental conditions may be the prerequisite for people committing certain types of crimes, and understanding this link can prevent several criminal activities and form the basis for these people getting help and protection against violence and imprisonment.

This paper aims to establish clear guidelines for what is considered mental disorder and crime, and then analyze the research surrounding the link between mental disorders and crime to prove beyond reasonable doubt that such a link exists and drives several criminal acts that we witness today.

Definition of 'Mental' and 'Mental Disorders'

According to the American Psychiatric Association (APA), the word 'mental' stands for inner thoughts and experiences relating to mood or senses, behavioural patterns, and cognitive aspects such as social perspective, reality assessment, and learning. 'Mental disorder' refers to any clinically recognized psychological or behavioural syndrome exhibited by an individual that is linked to any current underlying distress and that has a significant risk of leading to death, pain, or disability (APA, 2000).

Definition of 'Crime'

The word 'crime' refers to violent, aggressive, or sexually abusive behaviours against other individuals. These acts may be individual acts or patterns of criminal behaviours exhibited by individuals (Anckarsater *et al.*, 2009). Some may be less serious such as jaywalking and some

may be more serious such as physical abuse; however, any and all criminal acts fall under this category nonetheless (Er).

Relationship between 'Mental Disorder' and 'Crime'

The relationship between mental disorders and criminal acts is a cause for much debate, and several theories and factors have been proposed to strengthen the link. The various theories that point towards this relationship may be psychoanalytic, personality-based, social learning, or biological. However, the thing to remember here is that not all criminals suffer from a mental disorder and not all people who have mental disorders are prone to violence. Despite the lack of ways in which this relationship can be probed and analyzed, several studies have shown a definitive link between the two (Er).

Evidence-based analysis of the relationship between mental disorders and crime

i. The Epidemiologic Catchment Area (ECA) Study

In this study, Bourdon *et al.* (1992) performed a cross-sectional analysis of over 18,000 adults in the years 1980 and 1984 at five different locations in the United States. Data was collected through personal interviews of self-reported mental conditions and crimes, and it was found that about 55% of people with a mental condition reported aggressive behaviour in the last one year as compared to 20% of people without a mental disorder. As this was based on self-reporting, the data was likely to be a misrepresentation of actual numbers; however, 55% as opposed to 20% is a significant number and is indicative of a strong link between mental conditions and tendency to behave violently (Bourdon *et al.*, 1992).

ii. The Swedish Metropolitan Project

This is one of the most complete studies till date that has a 100% follow-up rate and thus, no loss of information. This study considered all individuals born in the year 1953, and criminal as well as mental health records were obtained from the respective departments in the year 1983 for these individuals. Among the total men in the study, 1.1% had a mental disorder, 2.1% had alcohol or drug dependency, and 0.9% had other minor mental conditions. Among the

total women in the study, 1.1% had a mental disorder, 1.4% was addicted to alcohol or drugs, and 1.8% had other minor mental conditions. Comparing the numbers of people who had committed crimes from this cohort, 47.6% of people who had mental disorders and 89.7% of people addicted to drugs or alcohol as opposed to 29.4% of the normal population had been arrested at least once. The percentages were similar for both men and women strongly indicating that substance abuse and mental illness were strong predisposers for committing crimes (Hodgins, 1995)

iii. Cross-sectional survey in the United Kingdom

In 2006, Coid *et al.* conducted a cross-sectional interview survey in the United Kingdom and analyzed specific habits and mental conditions that were associated with violent behaviour. This study found that alcohol abuse alone was responsible for around half the incidents involving aggressive behaviour. Intoxication due to drug abuse was also responsible for a significant number of incidents where injury to the self and the victim was reported. Occurrence of a mental condition along with alcohol abuse or drug abuse greatly increased the risk of the individual to indulge in criminal activities. However, this study too was based on self-reported data and hence, not an accurate representation of the total number of cases of mental disorders and crime rates. Additionally, this study was a household study and lacked data from individuals who were in prisons, rehabilitation centres, or institutions for the mentally challenged (Coid *et al.*, 2006).

iv. Analysis of registers in Sweden

In contrast to the self-reported data obtained through various studies, Fazel and Grann (2006) studied the hospital discharge records and crime records to further understand the link between mental disorders and crime. Out of the people with diagnosed mental conditions, 6.6% had been involved in criminal activities in contrast to 1.8% of people with no known mental conditions. Of the population diagnosed with mental disorder, 0.3% had been convicted at least 10 times in contrast to 0.1% of the general population. The rate of involvement in crimes was at least 9 times higher for men than for women. The age group that showed the most number of violent cases for people with mental disorders was 25 to 39 for men and over

40 for women. The crimes that mentally unstable people were most likely to commit were homicide and arson, although other crimes such as verbal and physical threats, harassments, sexual assault, and robbery were also likely (Fazel and Grann, 2006).

Risk factors that govern the relationship between mental disorder and crime

Clinically, several mental health conditions have been proven to trigger aggressive behaviours in individuals. People with diagnosed mental disorders are more likely to be violent if they are also paranoid, delusional, and are not receiving appropriate treatment for their condition. People with severe symptoms who are experiencing hallucinations are more likely to get involved in criminal activities under the influence of their disorder. In addition, people with mental disorders who also have issues of drug dependence, alcohol abuse, homelessness, and unemployment are more likely to exhibit aggressive behaviours (Ghiasi and Singh, 2020).

i. Substance Use Disorders (SUD)

The single most important risk factor surrounding the connection between crime and mental conditions is a longstanding history of alcohol abuse and drug abuse. This risk factor alone is responsible for a 4-fold increase in crime rates in the mentally unstable population (Ghiasi and Singh, 2020). People with SUD have been shown to get arrested more often than patients suffering from schizophrenia, affective disorders, or personality disorders. The co-occurrence of any mental condition along with SUD has been shown to increase the risk of the individual turning violent in any given situation. The co-existence of SUD along with a mental condition makes an individual 240% more likely to commit a crime than a person with a mental condition alone (Rueve and Welton, 2008).

ii. Lack of treatment for mental conditions

The second most important risk factor for increase in violence is receiving inadequate treatment for mental conditions. Insufficient management of mental health conditions is an important risk factor for increasing cases of homicide and mass murders in particular (Ghiasi and Singh, 2020). People with schizophrenia who were on a strict treatment of antipsychotic

medication demonstrated a decreased tendency to behave violently in provocative situations (Fazel *et al.*, 2014).

iii. Occurrence of delusions and hallucinations

Around 20% of mentally unstable people who are involved in violence have reported that they have experienced delusions or hallucinations relating to a familiar voice. Delusional patients may exhibit aggression as an attempt of self-defence if they feel that they are being physically or sexually threatened. Paranoia along with delusions doubles the risk of individuals becoming violent as compared to the absence of paranoia in a person (Rueve and Welton, 2008).

iv. Demographic factors

These factors include those that cannot be altered with clinical intervention such as gender, age, and past history of violence. Mentally ill patients of the male gender and a younger adult age are more likely to commit acts of violence as compared to women and other age groups. Also, people who have a past history of aggression, impulsivity, and delusions have a higher chance of committing future acts of violence especially if they have not received adequate treatment for their condition (Rueve and Welton, 2008).

Prevalence of mental illness in prisoners

Several studies have found that a large number of people in state prisons have a history of mental illness. Statistically, there is a 56% chance that a prisoner has an underlying mental disorder. Out of the prisoners suffering from mental illness, at least 25% have been convicted three or more times for acts of violence. Additionally, there is a 58% chance that a prisoner with a mental disorder has demonstrated aggression within the facility and a 20% chance that the individual has sustained injuries due to a prison fight. On the downside, there is only a 34% chance that a prisoner identified with a mental health condition has been diagnosed and received appropriate treatment (Allen, 2008).

According to a study conducted in 2004, one of the major mental health problems reported in prisoners was depression, with around 40% of the prisoners having at least one symptom of depression. Other common disorders diagnosed in prisoners are psychotic disorders such as schizophrenia and bipolar disorder, and the symptoms of these disorders directly correlate with the development of aggressive tendencies in prisoners. People diagnosed with at least one of these disorders are four times more likely to commit crimes than those that do not have either of these disorders. Additionally, around 80% of people with these disorders who were arrested for violence were not under ongoing treatment at the time of their arrest (Allen, 2008).

Mental disorders associated with violence

Some mental disorders, more than others, are associated with an underlying tendency towards aggression. These are personality disorders, affective disorders, psychotic disorders, dementia, delirium, oppositional defiant disorders, posttraumatic stress disorders, sexual sadism, intermittent explosive disorder, and premenstrual dysphoric disorder. The demonstrated rates of violence for these disorders are 18% without co-occurring substance abuse, 31% with co-occurring substance abuse, and 43% for patients having personality disorder with co-occurring substance abuse (Rueve and Welton, 2008). In particular, Borderline Personality Disorder (BPD) and Antisocial Personality Disorder (ASPD) have been shown to increase the risk of aggression in individuals to a considerable extent (Howard *et al.*, 2008).

A large number of people who are convicted for various acts of violence are diagnosed for one mental condition or another. Among the juvenile offender individuals, the mental disorders that are seen most often are Attention Deficit Hyperactivity Disorder (ADHD), conduct disorder, and oppositional defiant disorder. Symptoms of depression and anxiety are also found to be considerably higher in violent individuals with mental health conditions as compared to the general population. Adults with psychosis and antisocial personality disorder have greater tendency towards violence as compared to people not exhibiting these conditions (Vogel, 2014).

Considering schizophrenia specifically, 30% of schizophrenic males with SUD were involved in criminal activities. However, it has not been established beyond reasonable doubt that aggressive behaviours are more prevalent in schizophrenic patients as opposed to individuals with other mental health conditions. Patients with Alzheimer's disease are 30% more likely to get involved in violent crimes as compared to people with no mental illness (Rueve and Welton, 2008).

People diagnosed with bipolar disorder often experience manic and depressive episodes with dramatic mood swings. At least 10 to 15% of people diagnosed with bipolar disorder are suicidal, whereas people who go through severe manic episodes end up abusing their spouse or children. Many people with bipolar disorder also abuse drugs or alcohol, increasing their risk to commit acts of violence (Allen, 2008).

Among patients admitted in the hospital, people suffering from dementia and mania are most likely to exhibit acts of aggression. The victims are not necessarily targeted deliberately; rather they may be innocent bystanders or nurses attempting to help them. Patients with mental retardation lack the capacity to respond non-violently and maturely, and so they often use aggressive and violent methods to communicate their needs (Rueve and Welton, 2008).

Possible explanations for the tendency of mentally ill people to commit crimes

A considerable proportion of the individuals diagnosed with mental health conditions abuse alcohol and drugs, and this predisposes them to commit criminal acts. Several studies have demonstrated that the reason mentally ill patients are more likely to commit crimes are because of their substance abuse issues. Although this scenario is complex and open to critical analysis, the link to mental health conditions, however indirect, is, nonetheless, striking. People who are diagnosed with schizophrenia, depression, and bipolar disorder are more likely to abuse substance, which, in turn, predisposes them to aggressive behaviour (Hodgins, 1995).

Studies have shown that children who abuse alcohol or drugs in their childhood are more likely to develop mental health conditions and exhibit aggressive behaviour when they enter adulthood. Children who show patterns of addiction also demonstrate early signs of

antisocial behaviour, a psychiatric condition that is a strong prerequisite to indulging in criminal activities (Hodgins, 1995).

Conclusion

Although it may be inaccurate to assume that all people with mental health conditions are predisposed to committing crimes, there exists an underlying relationship between criminal tendencies and mental disorders. Several studies that have analyzed the percentages of mentally ill and normal people who commit crimes have shown that the percentage of mentally ill patients is far higher than that of the general population who exhibit aggressive behaviours. Several risk factors that promote criminal tendencies in the mentally ill population include severe substance abuse, non-adherence to treatment, and occurrence of hallucinations and delusions. Apart from this, male gender and younger adult age group also predispose people with mental disorders to commit crimes. However, the likelihood of people with certain conditions such as bipolar disorder, schizophrenia, depression, and antisocial disorder for committing crimes is higher than that for other conditions.

Several prisons all over the world have now taken up the practice of assessing the mental health status of those convicted and have found one or more mental conditions in a considerable number of the prisoners. This practice can possibly be a start to adequately treating these people so that they don't become repeat offenders in the future. Treating the prisoners' mental conditions will also help them overcome their addiction to alcohol and/or drugs, ensuring their better physical, emotional, and mental health statuses.

References

- Allen, S. (2008). Mental Health Treatment and the Criminal Justice System. *Journal of Health & Biomedical Law*, 4(1), 153-191.
- American Psychiatric Association. (2000). Diagnostic and statistical manual of mental disorders, 4th ed Washington DC: American Psychiatric Association.
- Anckarsäter, H., Radovic, S., Svennerlind, C., Höglund, P., & Radovic, F. (2009). Mental disorder is a cause of crime: The cornerstone of forensic psychiatry. *International Journal of Law and Psychiatry*, 32(6), 342–347. doi: 10.1016/j.ijlp.2009.09.002
- Bourdon, K.H., Rae, D.S., Locke, B.Z., Narrow, W.E., & Regier, D.A. (1992). Estimating the prevalence of mental disorders in U.S. adults from the Epidemiologic Catchment Area Survey. *Public Health Reports*, 107:663-668.
- Coid, J., Yang, M., Roberts, A., Ullrich, S., Moran, P., Bebbington, P., Brugha, T., Jenkins, R., Farrell, M., Lewis, G., Singleton, N. (2006). Violence and psychiatric morbidity in the national household population of Britain: public health implications. *British Journal of Psychiatry*, 189:12-19.
- Er, H. H. (n.d.). Mental Disorder & Crime. Retrieved from https://www.academia.edu/3723593/Mental_Disorder_and_Crime
- Fazel, S., & Grann, M. (2006). The population impact of severe mental illness on violent crime. *American Journal of Psychiatry*, 163:1397-1403.
- Fazel, S., Zetterqvist, J., Larsson, H., Langstrom, N., & Lichtenstein, P. (2014). Antipsychotics, mood stabilisers, and risk of violent crime. *Lancet*, 384(9949):1206-1214.
- Ghiasi, N., & Singh, J. (2020). Psychiatric Illness and Criminality. Treasure Island (FL): StatPearls Publishing.
- Hodgins, S. (1995). Major mental disorder and crime: An overview. *Psychology, Crime & Law*, 2(1), 5–17. doi: 10.1080/10683169508409761

Howard, R.C., Huband, N., Duggan, C., & Mannion, A. (2008). Exploring the link between personality disorder and criminality in a community sample. *Journal of personality disorders, 22*(6):589-603.

Rueve, M.E., & Welton, R.S. (2008). Violence and Mental Illness. *Psychiatry, 34*-48.

Vogel, M. (2014). Mental Illness and Criminal Behavior. *Sociology Compass, 8*(4), 337–346. doi: 10.1111/soc4.12140